



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1213856
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
-----------------------------------	-----------------	---

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1213856

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------	-------	---------	------------	---

Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
---	--

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
--	--	---

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

July 16, 2014

darryn young
NC Oil Company, Inc.
7545 250TH RD
HUMBOLDT, KS 66748-3203

Re: ACO-1
API 15-133-27706-00-00
Young 9
SW/4 Sec.02-27S-18E
Neosho County, Kansas

Dear darryn young:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 02/17/2014 and the ACO-1 was received on July 10, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department



MIDWEST SURVEYS
 LOGGING - PERFORATING - CONSOLIDATING SERVICES
 P.O. Box 88, Oskawatomie, KS 68084
 913 / 755 - 2128

GAMMA RAY / NEUTRON / CCL

File No.

Company N-C Oil Company, Inc.

Well Young No.-9

Field Humbolt - Chanute

County Neosho

State Kansas

Location

4348 FSL & 2613 FWL

SE-NE-SE-SW

Sec. 2 Twp. 27S Rge. 18E

Permanent Datum GL

Log Measured From GL

Drilling Measured From GL

Date 02-25-2014

Run Number One

Depth Logger 919.0

Bottom Logged Interval 918.0

Top Log Interval 20.0

Fluid Level Full

Type Fluid Water

Density / Viscosity NA

Salinity - PPM Cl NA

Max Recorded Temp NA

Estimated Cement Top 0.0

Equipment No. 102

Recorded By Gary Windisch

Witnessed By Darryn Young

BORE-HOLE RECORD

RUN No. BIT FROM TO

One 9.875" 0.0 20.0

Two 5.625" 20.0 928.0

CASINGS RECORD

TO SIZE WGT. FROM TO

20.0 7.00" 0.0 20.0

928.0 2.875" 6.5# 0.0

TO 820.0

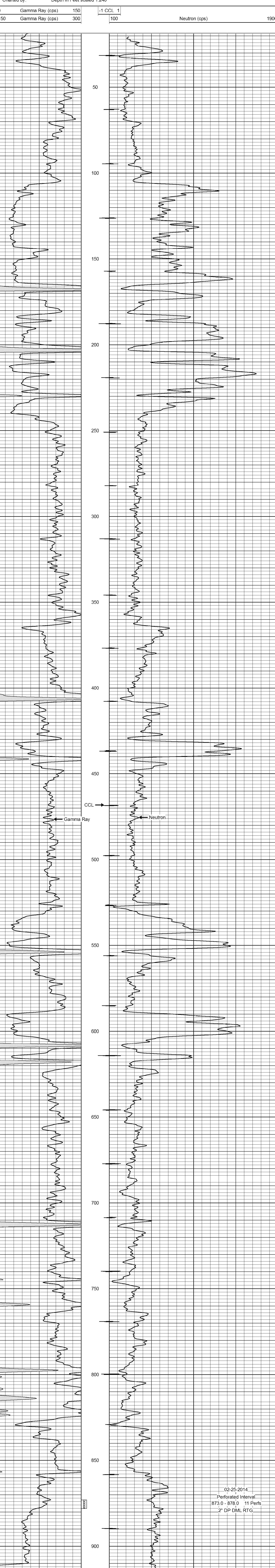
<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

Drilling Contractor :
David Wrestler

Database File: young9.db
 Dataset Pathname: pass1
 Presentation Format: gr-n-ccl
 Dataset Creation: Tue Feb 25 13:04:56 2014 by Log SCH 111116
 Charted by: Depth in Feet scaled 1:240



N. Industrial Rd.
J. Box 664
Tola, Kansas 66749
Phone: (620) 365-5588

Payless Concrete Products, Inc.

CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road.
under truck's own power. Due to delivery at owner's or intermediary's direction,
seller assumes no responsibility for damages in any manner to sidewalks,
roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's
risk. The maximum allowed time for unloading trucks is 6 minutes per yard. A
charge will be made for loading trucks longer. This concrete contains correct
amount of admixtures for strength or mix indicated. We do not assume responsibility for
strength test when water is added at customer's request.
NOTICE TO OWNER
Failure of this contractor to pay those persons supplying material or services to
complete this contract can result in the filing of a mechanic's lien on the property
which is the subject of this contract.

PLANT/TRANSACTION #	DRIVER/TRUCK	LOAD SIZE	YARDS ORDERED	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER	DATE	FORMULA	LOAD #
15000											

WARNING
IRRITATING TO THE SKIN AND EYES
Contains Portland Cement, Wear Rubber Boots and Gloves, Prolonged Contact May
Cause Burns, Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of
Contact With Skin or Eyes, Flush Thoroughly With Water, If Irritation Persists, Get Medical
Attention. KEEP CHILDREN AWAY.
CONCRETE IS A PERISHABLE COMMODITY AND BECOMES THE PROPERTY OF THE PURCHASER UPON
TELEPHONING THE PLANT. ANY CHANGES OR CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE
TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.
The undersigned promises to pay all costs, including reasonable attorney's fees, incurred in collecting
any sums owed.
At accounts not paid within 30 days of delivery will bear interest at the rate of 2% per annum.
Not Responsible for Receptive Aggregate or Color Quality, No Claim Allowed Unless Made at Time
of Delivery.
A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Credits.
Excess Daily Time Charged @ \$50/Hr

QUANTITY	CODE	DESCRIPTION	EXTENDED PRICE	UNIT PRICE

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
420	420	415	1. JOB NOT READY 2. SLOW POUR ON PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. STATION 9. OTHER	
445				
495				
TOTAL AT JOB	311	350		
UNLOADING TIME				
DELAY TIME				
ADDITIONAL CHARGE 1				
ADDITIONAL CHARGE 2				
GRAND TOTAL				\$1,050.07