

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1215586

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: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West      County: \_\_\_\_\_

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto: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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name	Top	Datum
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:					

<div style="text-align: center;"> <b>CASING RECORD</b> <input type="checkbox"/> New    <input type="checkbox"/> Used         </div> <div style="text-align: center;">Report all strings set-conductor, surface, intermediate, production, etc.</div>							
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 (Amount and Kind of Material Used)		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 (Explain) _____			
Estimated Production Per 24 Hours	Oil                      Bbls.	Gas                      Mcf	Water                      Bbls.	Gas-Oil Ratio	Gravity

<p style="text-align: center;"><b>DISPOSITION OF GAS:</b></p> <p> <input type="checkbox"/> Vented                <input type="checkbox"/> Sold                <input type="checkbox"/> Used on Lease         </p> <p style="text-align: center;"><i>(If vented, Submit ACO-18.)</i></p>	<p style="text-align: center;"><b>METHOD OF COMPLETION:</b></p> <p> <input type="checkbox"/> Open Hole                <input type="checkbox"/> Perf.                <input type="checkbox"/> Dually Comp.                <input type="checkbox"/> Commingled         </p> <p style="text-align: center;"> <i>(Submit ACO-5)</i> </p> <p> <input type="checkbox"/> Other <i>(Specify)</i> _____         </p>	<p style="text-align: center;"><b>PRODUCTION INTERVAL:</b></p> <p>_____</p> <p>_____</p>
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**CONSOLIDATED**  
Oil Well Services, LLC

46803

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

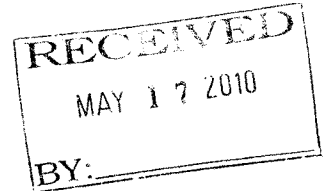
Invoice # 234261

Invoice Date: 05/14/2010 Terms:

Page 1

BLAKE PRODUCTION CO, INC.  
1601 NW EXPRESSWAY SUITE 1200  
OKLAHOMA CITY OK 73118  
(405) 286-9800

DAVIS RANCH A-29  
28707  
05-13-10



Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	235.00	13.1000	3078.50
1102	CALCIUM CHLORIDE (50#)	660.00	.7300	481.80
1107	FLO-SEAL (25#)	60.00	2.0000	120.00
1107A	PHENOSEAL (M) 40# BAG	235.00	1.1200	263.20
1118A	S-5 GEL/ BENTONITE (50#)	450.00	.1700	76.50
1104S	CLASS "A" CEMENT (SALE)	65.00	13.1000	851.50
1102	CALCIUM CHLORIDE (50#)	185.00	.7300	135.05
1118A	S-5 GEL/ BENTONITE (50#)	125.00	.1700	21.25
4434	10 3/4" WOODEN PLUG	1.00	102.0000	102.00
4109	CEMENT BASKET 10 3/4"	1.00	427.0000	427.00

Description	Hours	Unit Price	Total
437 80 BBL VACUUM TRUCK (CEMENT)	15.00	96.00	1440.00
445 CEMENT PUMP (SURFACE)	1.00	700.00	700.00
445 EQUIPMENT MILEAGE (ONE WAY)	70.00	3.55	248.50
479 TON MILEAGE DELIVERY	493.50	1.20	592.20
543 TON MILEAGE DELIVERY	493.50	1.20	592.20

Parts: 5556.80 Freight: .00 Tax: 377.87 AR 9507.57  
Labor: .00 Misc: .00 Total: 9507.57  
Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 28707

LOCATION EUREKA

FOREMAN KEVIN McCoy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-13-10	1298	DAVIS Ranch A-29	33	135	10E	Lincoln
CUSTOMER <u>Blake Production Co., Inc.</u>			Summit Drig. Co.			
MAILING ADDRESS <u>1601 N.W. Expressway Ste 1200</u>						
CITY <u>Oklahoma City</u>	STATE <u>OK</u>	ZIP CODE <u>73118</u>				
			TRUCK #	DRIVER	TRUCK #	DRIVER
			445	Justin		
			543	DAVE		
			479	John S		
			437	Jim		

JOB TYPE SURFACE O HOLE SIZE 14 3/4 HOLE DEPTH 375' KB CASING SIZE & WEIGHT 10 3/4 40 # NEW  
CASING DEPTH 333' G.L. DRILL PIPE TUBING OTHER  
SLURRY WEIGHT 15.4 # SLURRY VOL 60 BBL WATER gal/sk 6.5 CEMENT LEFT IN CASING 25'  
DISPLACEMENT 31.9 BBL DISPLACEMENT PSI MIX PSI RATE

REMARKS: Safety Meeting: Rig Lost Circulation while Drilling SURFACE hole @ 179' K.B. Hauled water while DRY Drilling from 179' - 375'. Consolidated Hauled 1120 BBL, McCoy Trucking Hauled 1120 BBL. (Total 2240 BBL). Ran 333' G.L. measurement 10 3/4" casing. Drilling Rig Pumped 50 BBL Gel water w/ No Fluid to SURFACE. Rig up to Cement. Mixed 235 sks Class "A" Cement w/ 3% CACL2, 2% Gel, 1/4" Floccle, 1" Pheno Seal 1sk @ 15.4 #/gal. Shut down. Release Plug. Displace w/ 32 BBL Fresh water. Got Fluid to SURFACE. No Cement Returns. Annulus Standing Full of Fluid. Shut casing in. (Cement Basket 155' Below G.L.) wait 2 Hrs. Ran 1" Tubing down Annulus Tag Cement @ 60' Mixed 65 sks Class "A" Cement w/ 3% CACL2, 2% Gel, Good Cement to SURFACE. Pull 1" Tubing. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	700.00	700.00
5406	70	MILEAGE	3.55	248.50
11045	235 SKS	Class "A" Cement	13.10	3078.50
1102	660 #	CACL2 3%	.73 #	481.80
1107	60 #	Floccle 1/4" /sk	2.00 #	120.00
1107 A	235 #	Pheno Seal 1" /sk	1.12 #	263.20
1118 A	450 #	Gel 2%	.17 #	76.50
11045	65 SKS	Class "A" Cement	13.10	851.50
1102	185 #	CACL2 3%	.73 #	135.05
1118 A	125 #	Gel 2%	.17 #	21.25
5407 A	14.1 Tons	70 miles Bulk Trucks	1.20	1184.40
5302 C	15 Hrs	80 BBL VAC TRUCK (Haul water to DRILL 14 3/4" SURFACE hole, Lost Circulation @ 179') TO 375'	96.00	1440.00
4434	1	10 3/4 Wooden Plug	102.00	102.00
4109	1	10 3/4 Cement Basket	427.00	427.00
		Sub TOTAL		9129.70
		THANK You	6.8%	
		SALES TAX		377.87
		ESTIMATED TOTAL		9507.57

Ravin 3737

AUTHORIZATION Witnessed By Jeff Stahl

TITLE Blake Co. Rep.

DATE 5-13-10

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



**CONSOLIDATED**  
Oil Well Services, LLC

47139

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 234396

Invoice Date: 05/26/2010 Terms:

Page 1

BLAKE PRODUCTION CO, INC.  
1601 NW EXPRESSWAY SUITE 1200  
OKLAHOMA CITY OK 73118  
(405) 286-9800

DAVIS A-29  
28771  
05-25-10

MAILED  
MAY 28 2010

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	175.00	16.5000	2887.50
1110A	KOL SEAL (50# BAG)	875.00	.4000	350.00
1123	CITY WATER	3300.00	.0145	47.85
4206	GUIDE SHOE 7"	1.00	236.0000	236.00
4187	FLOAT COLLAR 7"	1.00	484.0000	484.00
4107	CEMENT BASKET 7"	2.00	300.0000	600.00
4131	CENTRALIZER 7"	6.00	54.0000	324.00
4409	7" RUBBER PLUG(TOP)	1.00	76.0000	76.00

Description	Hours	Unit Price	Total
445 CEMENT PUMP	1.00	900.00	900.00
445 EQUIPMENT MILEAGE (ONE WAY)	70.00	3.55	248.50
543 TON MILEAGE DELIVERY	673.40	1.20	808.08

Parts: 5005.35 Freight: .00 Tax: 340.36 AR 7302.29  
Labor: .00 Misc: .00 Total: 7302.29  
Sublt: .00 Supplies: .00 Change: .00

Signed

Date



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 28771

LOCATION EUREKA

FOREMAN KEVIN MCCOY

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-25-10	1298	DAVIS A-29	33	135	10E	WABARUNSEE
CUSTOMER <u>Blake Production Co., Inc.</u>			Summit Daly. Co.			
MAILING ADDRESS <u>1601 N.W. Expressway Ste 1200</u>						
CITY <u>OKlahoma City</u>						
STATE <u>OK</u>						
ZIP CODE <u>73118</u>						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>445</u>	<u>Justin</u>		
			<u>543</u>	<u>Dave</u>		

JOB TYPE Logging HOLE SIZE 9 1/2 HOLE DEPTH 3360' KB CASING SIZE & WEIGHT 7" 23" NEW  
CASING DEPTH 3356' KB DRILL PIPE TUBING OTHER  
SLURRY WEIGHT 13.5\* SLURRY VOL 58 BBL WATER gal/sk 9.0 CEMENT LEFT in CASING 2'  
DISPLACEMENT 133 BBL DISPLACEMENT PSI 900 PSI 1300 Bump Plug RATE 6 BPM

REMARKS: Safety Meeting: TD 3360' KB 7" 23" Casing Set @ 3356' = 2' Above KB. Rig up to 7" Casing. BREAK Circulation w/ 15 BBL Fresh water. Mixed 175 sks THICK Set Cement w/ 5" Kol-Seal /sk @ 13.5\*/gal, yield 1.85. Shut down. Wash out Pump & Lines. Release Plug. Displace w/ 133 BBL Fresh water. Final Pumping Pressure 900 PSI. Bump Plug to 1300 PSI. wait 2 minutes. Release Pressure. Float Held. Good Circulation @ ALL times while Cementing. Job Complete. Rig down.

Note: 58 BBL Slurry x 24.93 LIN. FT / BBL = 1445' Fill up on IN gauge hole.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	900.00	900.00
5406	70	MILEAGE	3.55	248.50
1126 A	175 SKS	THICK Set Cement	16.50	2887.50
1110 A	875 "	Kol-Seal 5"/sk	.40	350.00
5407 A	9.62 Tons	70 miles Buck Truck	1.20	808.08
1123	3300 gals	City water	14.50/1000	47.85
4206	1	7" Guide Shoe	236.00	236.00
4187	1	7" Float Collar	484.00	484.00
4107	2	7" Cement Baskets	300.00	600.00
4131	6	7" Centralizers	54.00	324.00
4409	1	7" Top Rubber Plug	76.00	76.00
		Sub Total		6961.93
		THANK You	6.8%	
		SALES TAX		340.36
		ESTIMATED TOTAL		7302.29

Ravin 3737

AUTHORIZATION Witnessed By Jeff Stahl

TITLE Blake Co. Rep.

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.