



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1215988  
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<br>Recompletion Date | Date Reached TD | Completion Date or<br>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: \_\_\_\_\_

1215988

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<br><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:                                       |  |                              |                                  |                                 |

| 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR: \_\_\_\_\_ Producing Method:  
 Flowing    Pumping    Gas Lift    Other *(Explain)* \_\_\_\_\_

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

|  |   |   |
|--|---|---|
| <b>DISPOSITION OF GAS:</b><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i><br><input type="checkbox"/> Other <i>(Specify)</i> _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|---|---|

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

August 11, 2014

Ronald  
Ron's Oil Operations Inc  
1889 200TH AVE  
PENOKEE, KS 67659-2036

Re: ACO-1  
API 15-065-24002-00-00  
KEITH 14-2  
NE/4 Sec.14-08S-22W  
Graham County, Kansas

Dear Ronald:

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 01/25/2014 and the ACO-1 was received on July 25, 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



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

none 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7715

|      |         |      |    |      |   |       |    |        |        |       |    |             |  |        |           |
|------|---------|------|----|------|---|-------|----|--------|--------|-------|----|-------------|--|--------|-----------|
| Date | 1-21-14 | Sec. | 14 | Twp. | 8 | Range | 22 | County | Graham | State | KS | On Location |  | Finish | 3:00 A.M. |
|------|---------|------|----|------|---|-------|----|--------|--------|-------|----|-------------|--|--------|-----------|

Location *Bogert P. TEMRO 3w Ninto*

|                     |                          |            |             |  |  |
|---------------------|--------------------------|------------|-------------|--|--|
| Lease               | <i>Keith</i>             | Well No.   | <i>14-2</i> | Owner  | To Quality Oilwell Cementing, Inc.<br>You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |
| Contractor          | <i>Anderson Drilling</i> |            |             |  |  |
| Type Job            | <i>Surface</i>           |            |             |  |  |
| Hole Size           | <i>12 1/4</i>            | T.D.       | <i>219</i>  | Charge To  | <i>Rons Oil Operations</i>   |
| Csg.                | <i>8 5/8</i>             | Depth      | <i>218</i>  | Street   |  |
| Tbg. Size           |                          | Depth      |             | City   | State  |
| Tool                |                          | Depth      |             | The above was done to satisfaction and supervision of owner agent or contractor. |  |
| Cement Left in Csg. |                          | Shoe Joint |             | Cement Amount Ordered  | <i>1500m 3/CC 2/602</i>  |
| Meas Line           |                          | Displace   | <i>13BL</i> |  |  |

**EQUIPMENT**

|         |           |     |  |          |             |          |            |
|---------|-----------|-----|--|----------|-------------|----------|------------|
| Pumptrk | <i>18</i> | No. |  | Cementer | <i>Gary</i> | Common   | <i>150</i> |
|         |           |     |  | Helper   |             | Poz. Mix |            |
| Bulktrk |           | No. |  | Driver   | <i>Carl</i> | Gel.     | <i>3</i>   |
|         |           |     |  | Driver   |             | Calcium  | <i>5</i>   |
| Bulktrk | <i>1</i>  | No. |  | Driver   | <i>Lonn</i> |          |            |

**JOB SERVICES & REMARKS**

|                    |  |                         |            |
|--------------------|--|-------------------------|------------|
| Remarks:           |  | Hulls                   |            |
| Rat Hole           |  | Salt                    |            |
| Mouse Hole         |  | Flowseal                |            |
| Centralizers       |  | Kol-Seal                |            |
| Baskets            |  | Mud CLR 48              |            |
| D/V or Port Collar |  | CFL-117 or CD110 CAF 38 |            |
|                    |  | Sand                    |            |
|                    |  | Handling                | <i>158</i> |
|                    |  | Mileage                 |            |

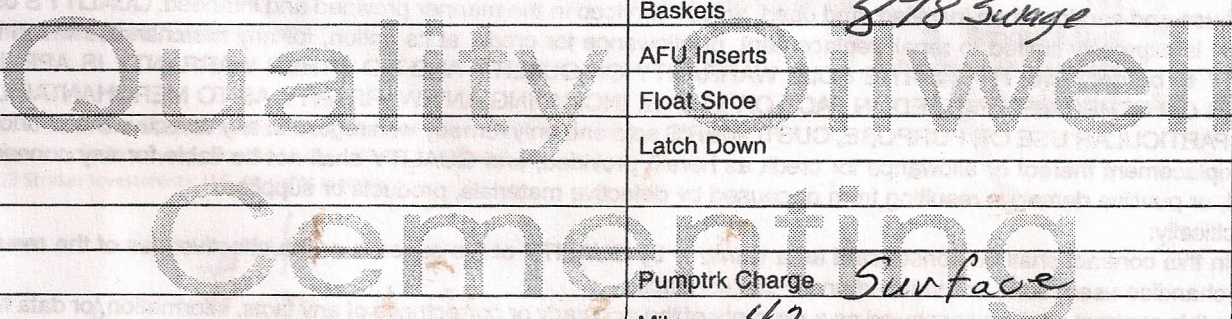
**FLOAT EQUIPMENT**

|             |                    |
|-------------|--------------------|
| Guide Shoe  |                    |
| Centralizer |                    |
| Baskets     | <i>8 5/8 Surge</i> |
| AFU Inserts |                    |
| Float Shoe  |                    |
| Latch Down  |                    |

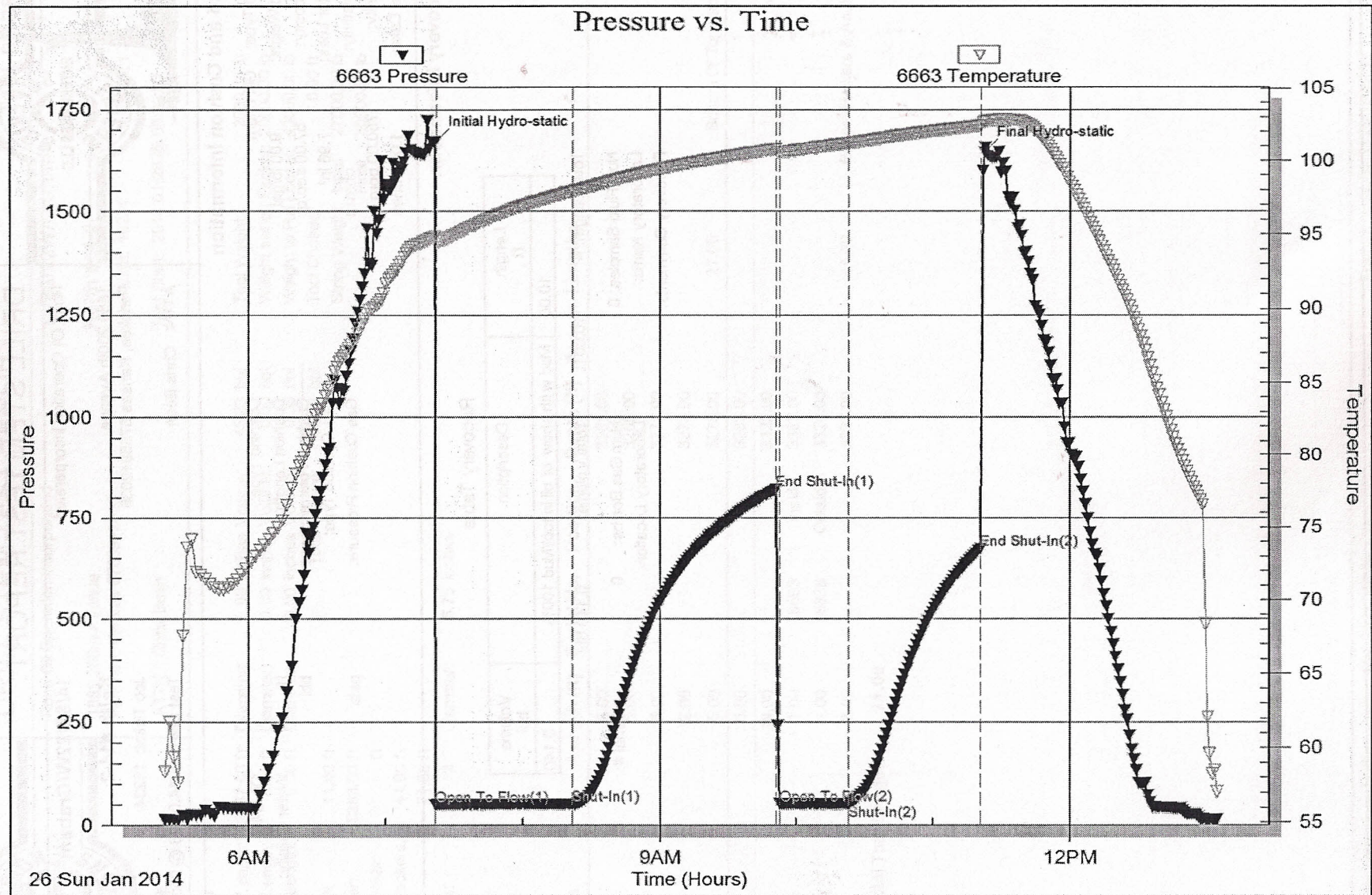
Pumptrk Charge *Surface*  
Mileage *42*

Tax  
Discount  
Total Charge

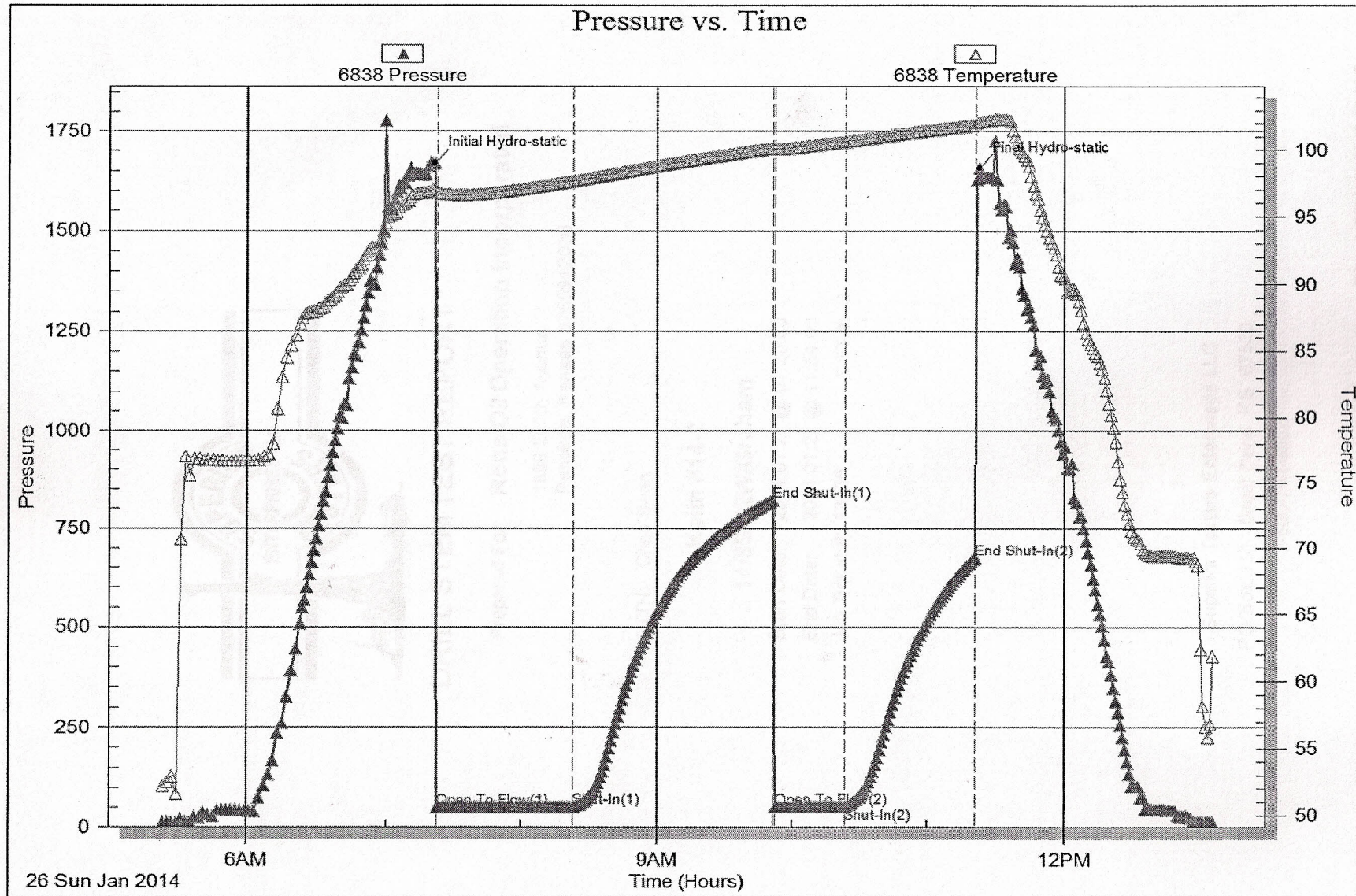
X  
Signature



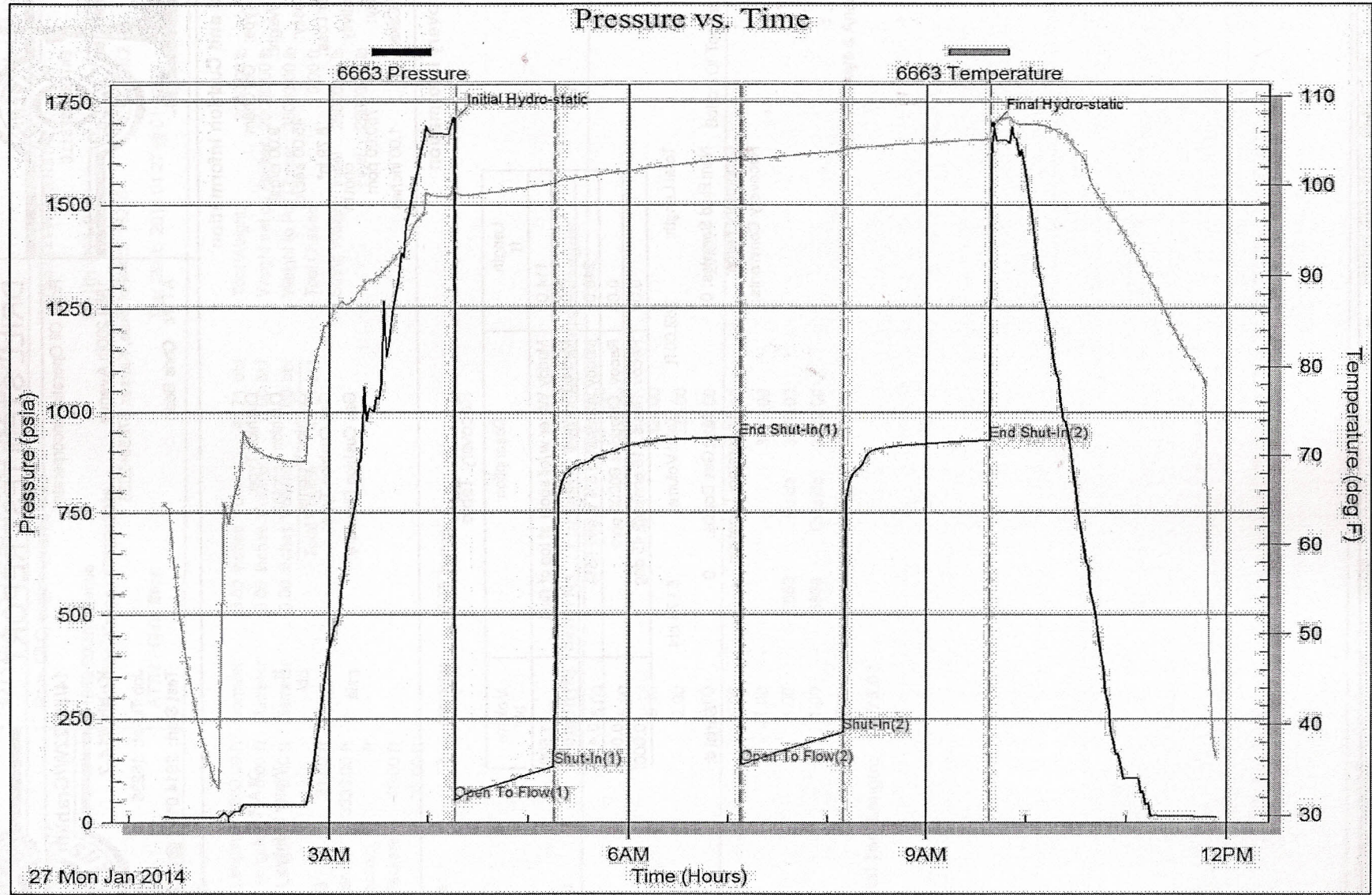












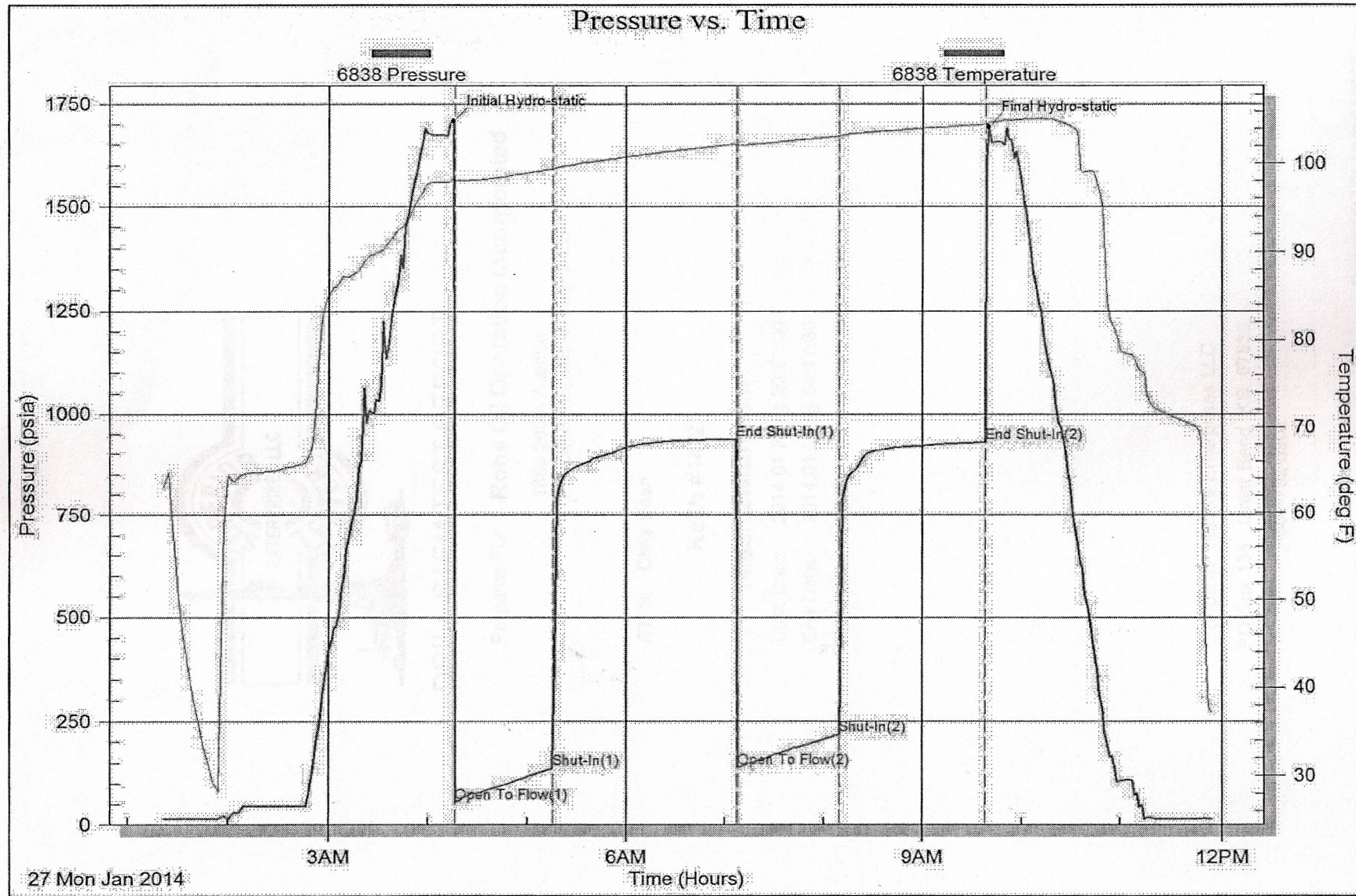


Serial #: 6838

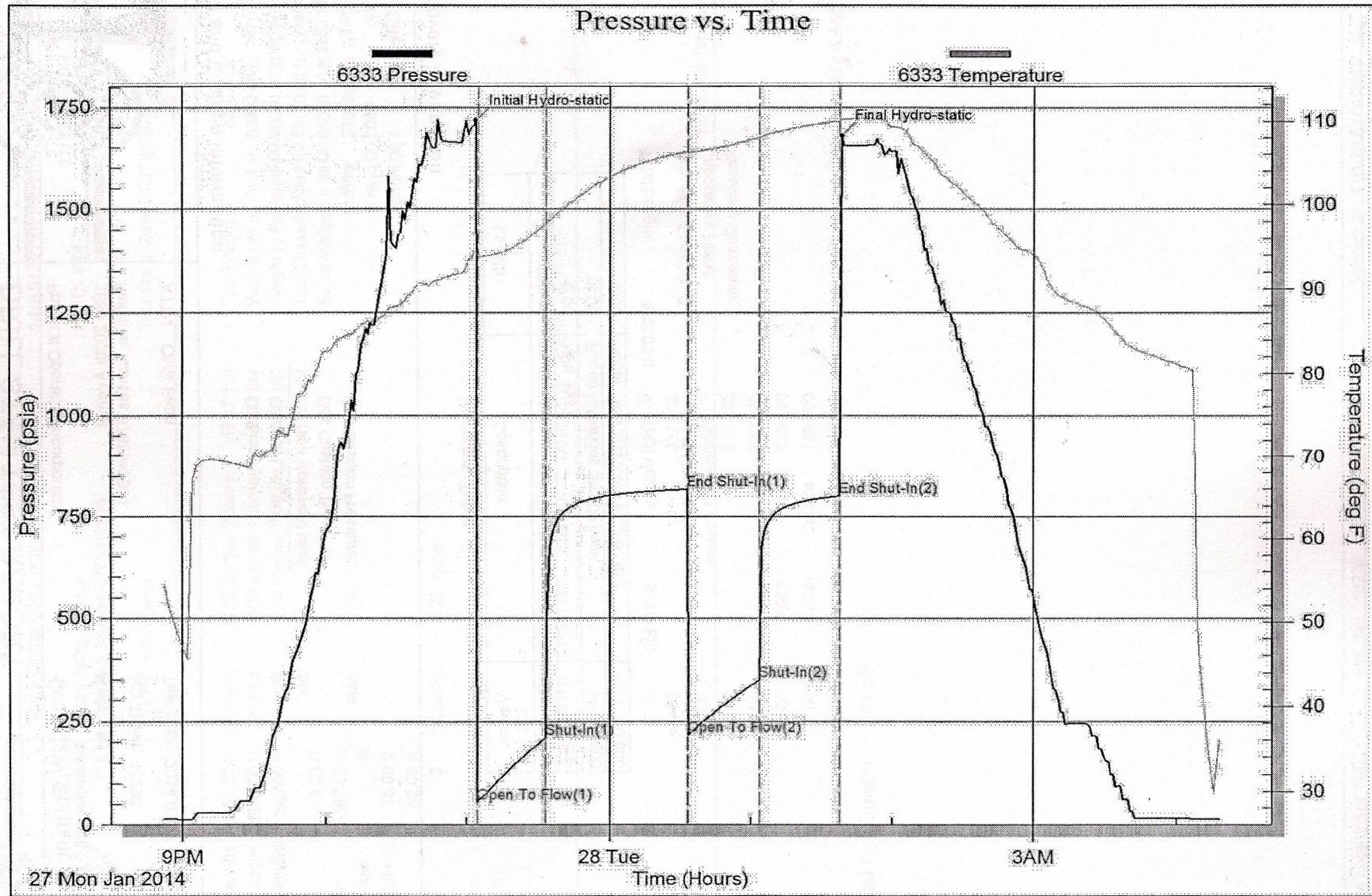
Outside: Rons Oil Operation Incorporated

Keith #14-2

DST Test Number: 2







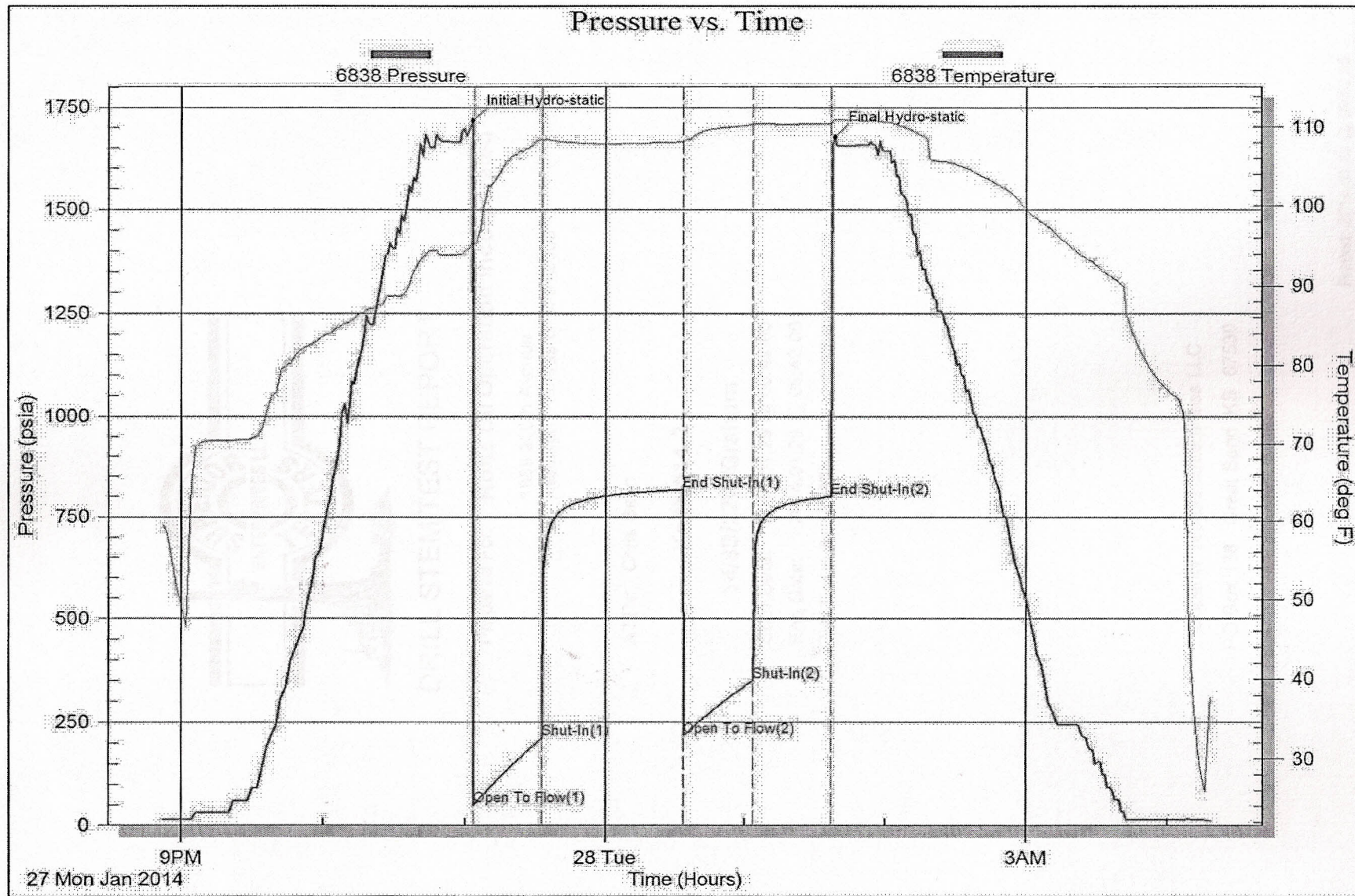


Serial #: 6838

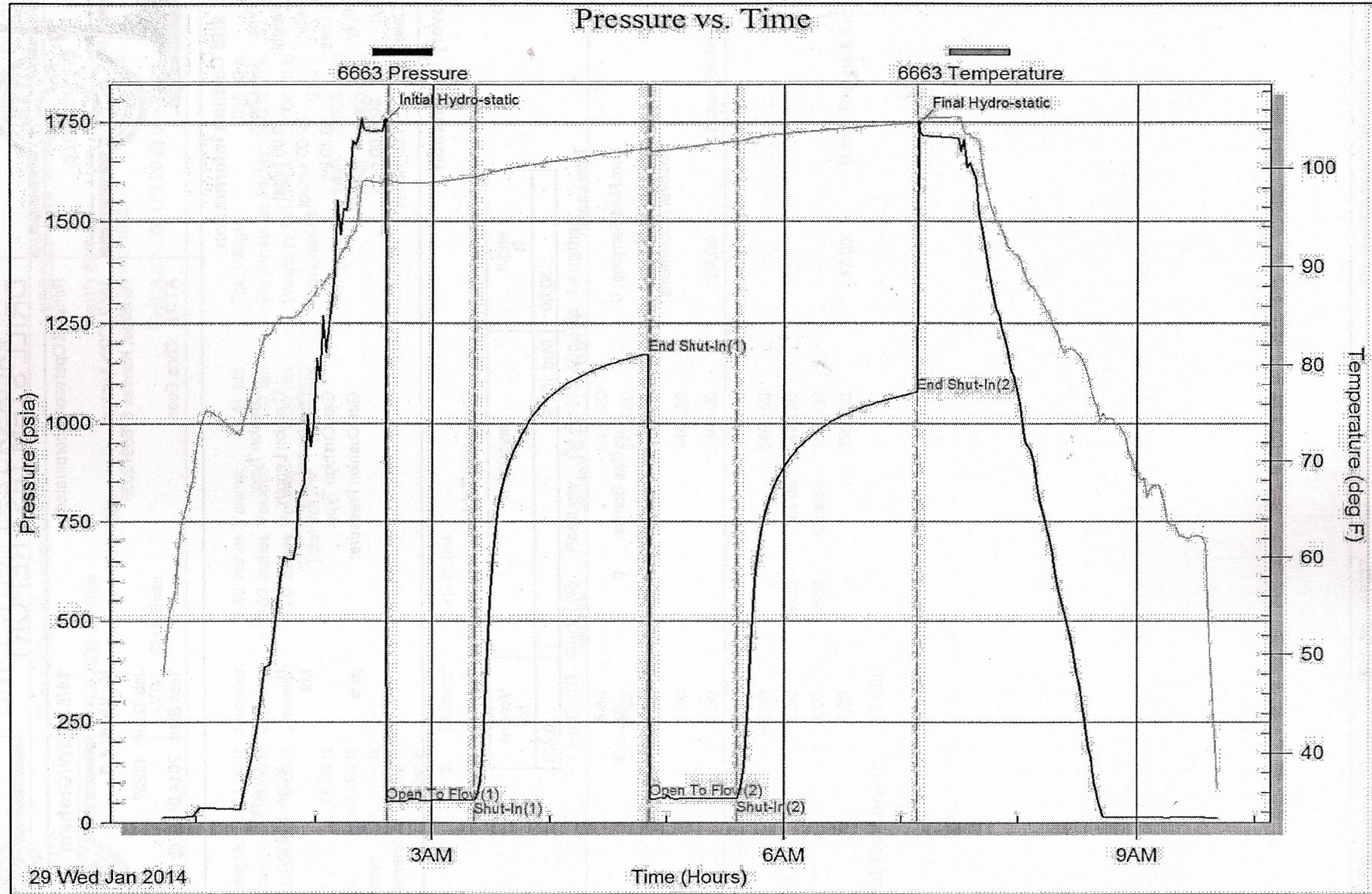
Outside Rons Oil Operation Incorporated

Keith #14-2

DST Test Number: 3







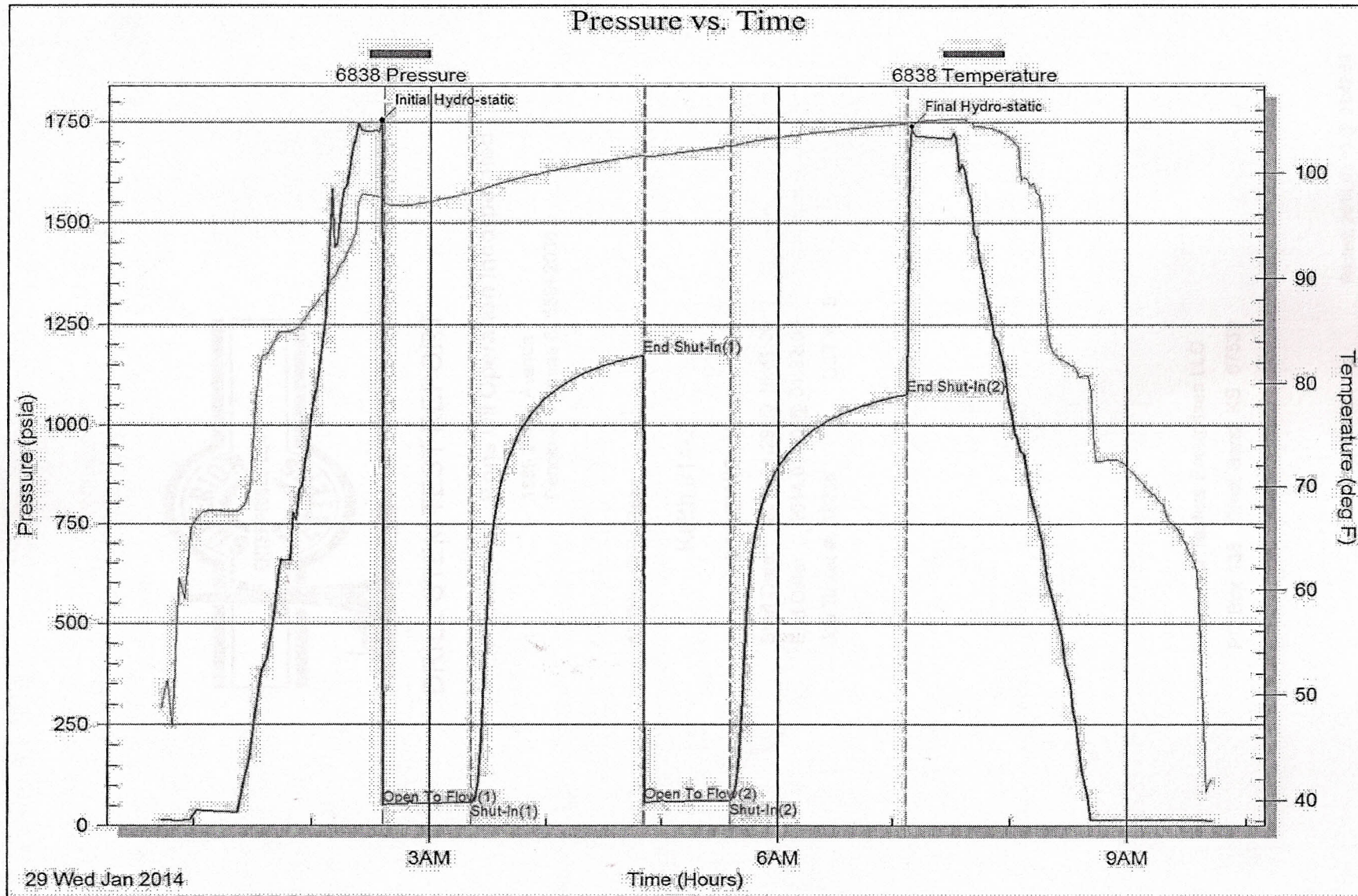


Serial #: 6838

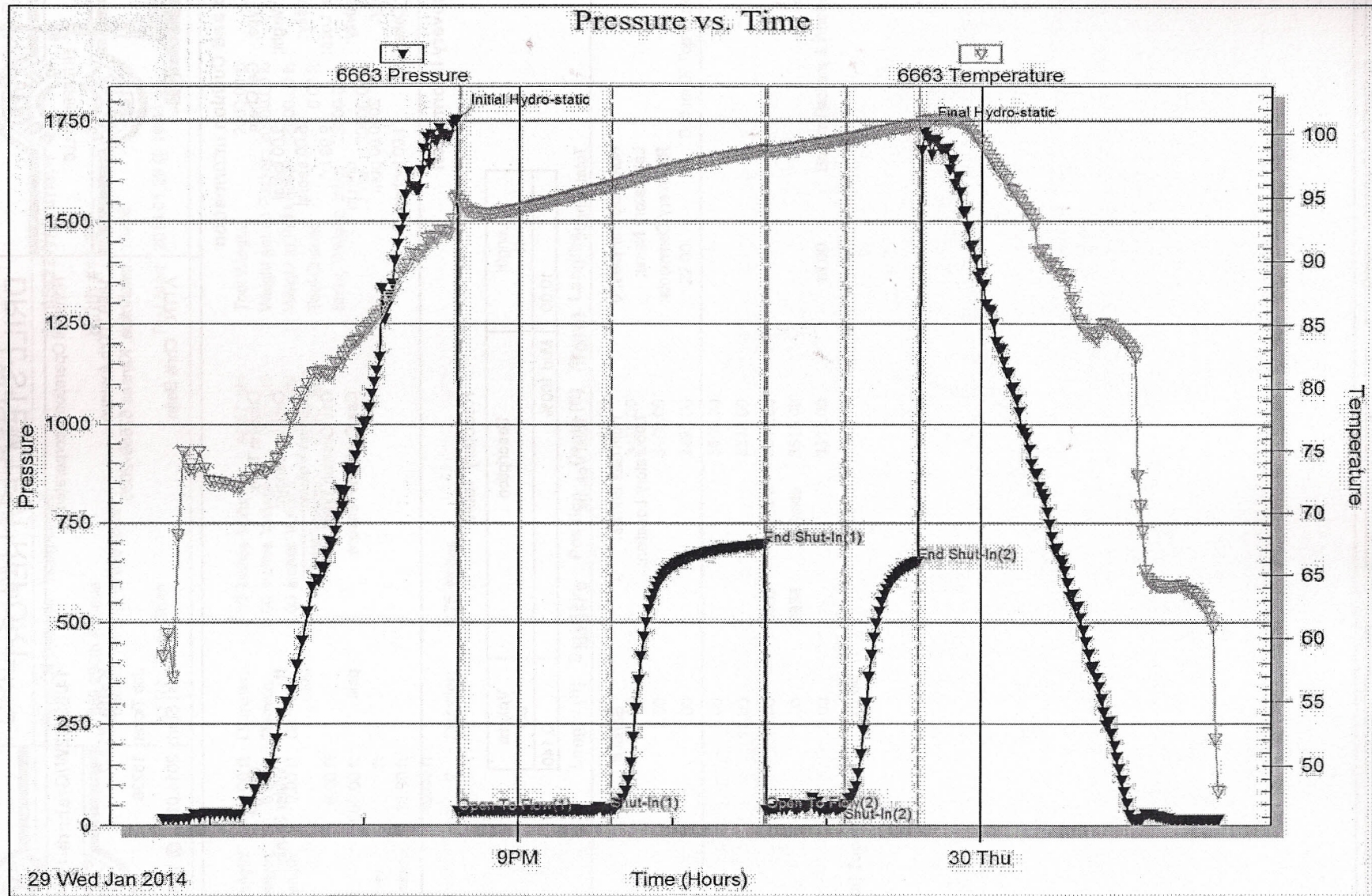
Outside: Rons Oil Operation Incorporated

Keith #14-2

DST Test Number: 4







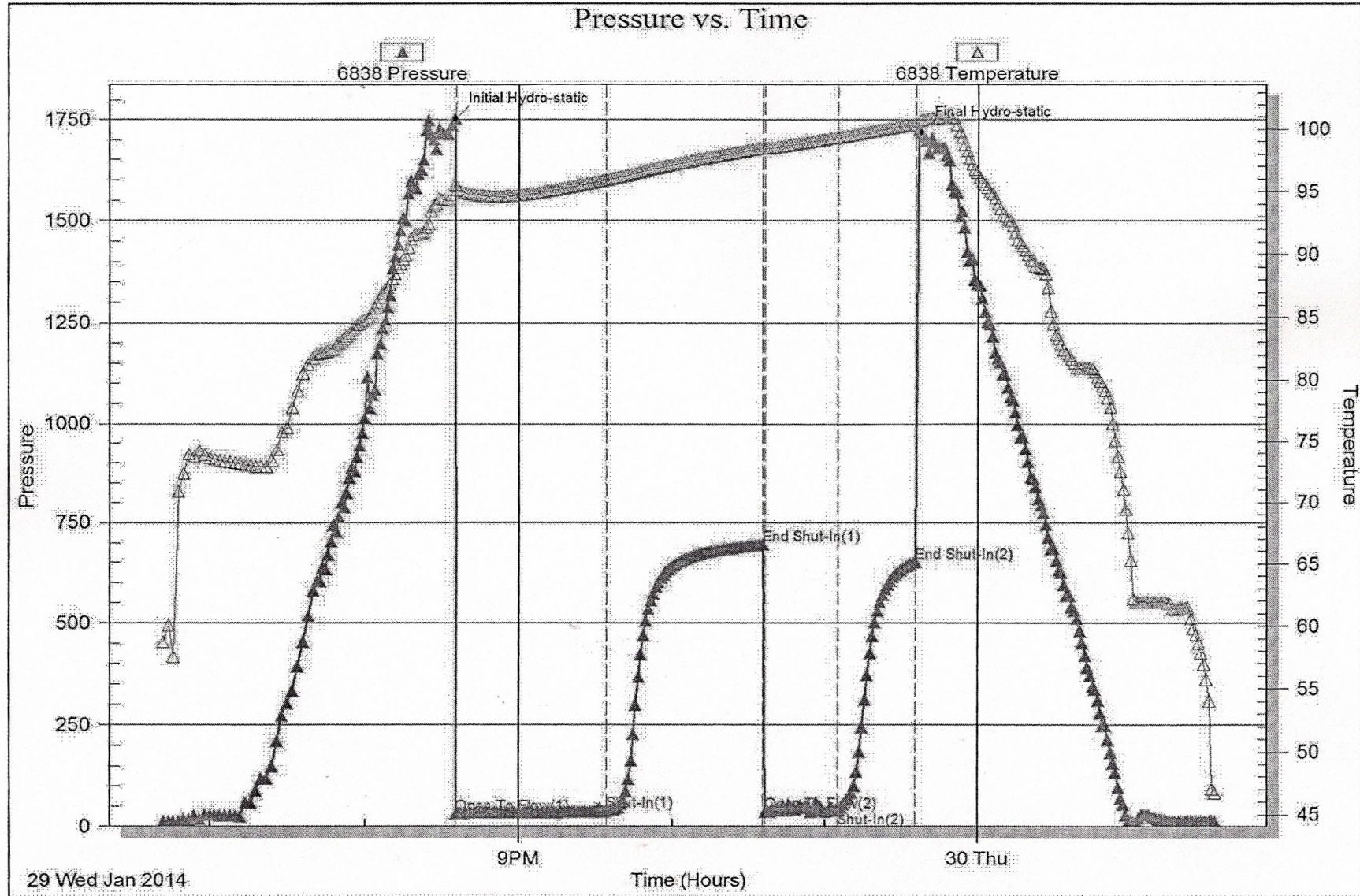


Serial #: 6838

Outside: Rons Oil Operation Incorporated

Keith #14-2

DST Test Number: 5





# ALLIED OIL & GAS SERVICES, LLC 055028

Federal Tax I.D.# 20-5976804

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Russell, KS

Keith 14-2

|  |                    |                           |                                |                 |             |                          |                           |
|--|--------------------|---------------------------|--------------------------------|-----------------|-------------|--------------------------|---------------------------|
| DATE <u>1.31.14</u>                                      | SEC. <u>14</u>     | TWP. <u>8</u>             | RANGE <u>22</u>                | CALLED OUT      | ON LOCATION | JOB START <u>9:00 pm</u> | JOB FINISH <u>9:30 pm</u> |
| LEASE <u>Keith</u>                                       | WELL # <u>14-2</u> | LOCATION <u>Bogue, KS</u> | COUNTY <u>Graham</u>           | STATE <u>KS</u> |             |                          |                           |
| OLD OR <input checked="" type="radio"/> NEW (Circle one) |                    |                           | <u>S to Prd 2 1/2 w n into</u> |                 |             |                          |                           |

|  |                    |
|--|--------------------|
| CONTRACTOR <u>Anderson Exploration</u> | OWNER              |
| TYPE OF JOB <u>PTA</u>                 |                    |
| HOLE SIZE <u>7 7/8</u>                 | T.D.               |
| CASING SIZE                            | DEPTH              |
| TUBING SIZE                            | DEPTH              |
| DRILL PIPE <u>4 1/2</u>                | DEPTH <u>3621'</u> |
| TOOL                                   | DEPTH              |
| PRES. MAX                              | MINIMUM            |
| MEAS. LINE                             | SHOE JOINT         |
| CEMENT LEFT IN CSG.                    |                    |
| PERFS.                                 |                    |
| DISPLACEMENT                           |                    |

|  |                                |
|--|--------------------------------|
| CEMENT AMOUNT ORDERED <u>225 SK</u>    |                                |
| <u>60/40 + 41.9 gel + 1/4 Flo-Seal</u> |                                |
| COMMON <u>130 SK</u>                   | @ <u>17.9</u> \$ <u>2327.</u>  |
| POZMIX <u>90 SK</u>                    | @ <u>9.35</u> \$ <u>841.50</u> |
| GEL <u>7.74 SK</u>                     | @ <u>23.4</u> \$ <u>181.12</u> |
| CHLORIDE                               | @                              |
| ASC                                    | @                              |
|  | @                              |
| <u>F10-Seal 250</u>                    | @                              |
| <u>#50</u>                             | @ <u>2.97</u> \$ <u>148.50</u> |
|  | @                              |
|  | @                              |
|  | @                              |
|  | @                              |
| HANDLING <u>236.23 #3</u>              | @ <u>2.48</u> \$ <u>585.86</u> |
| MILEAGE <u>492.6 T/m</u>               | <u>2.60</u> \$ <u>1,280.76</u> |

REMARKS:

See Cementing Job log!

SERVICE

|                           |                               |
|---------------------------|-------------------------------|
| DEPTH OF JOB              | <u>3621'</u>                  |
| PUMP TRUCK CHARGE         | \$ <u>2600.47</u>             |
| EXTRA FOOTAGE             | @                             |
| MILEAGE <u>Heavy 50m</u>  | @ <u>7.7</u> \$ <u>970.00</u> |
| MANIFOLD <u>light 50m</u> | @ <u>4.4</u> \$ <u>220.00</u> |
|                           | @                             |
|                           | @                             |

TOTAL \$ 3590.47

CHARGE TO: Pro's Oil Company  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

|                             |   |          |                  |
|-----------------------------|---|----------|------------------|
| <u>1x 8 5/8 Wooden Plug</u> | @ | <u>—</u> | \$ <u>107.64</u> |
|                             | @ |          |                  |
|                             | @ |          |                  |
|                             | @ |          |                  |
|                             | @ |          |                  |

TOTAL \$ 107.64

To: Allied Oil & Gas Services, LLC.  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \$ 9,062.94  
DISCOUNT \$ 2,238.80 IF PAID IN 30 DAYS  
net 6824.04

PRINTED NAME \_\_\_\_\_  
SIGNATURE Daniel Anderson