



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1217265  
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
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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: \_\_\_\_\_

1217265

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**TRILOBITE  
TESTING, INC**

## DRILL STEM TEST REPORT

Weigel Family Partnership LLC

17-13s-15w Russell, KS

PO Box 219  
Gorham KS 67640

**Bosch #3**

Job Ticket: 59274

**DST#: 2**

ATTN: Roger Fisher

Test Start: 2014.07.20 @ 03:05:00

### GENERAL INFORMATION:

Formation: **LKC "H - J"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:52:00

Time Test Ended: 07:27:00

Test Type: Conventional Bottom Hole (Reset)

Tester: Jim Svaty

Unit No: 76

Interval: **3141.00 ft (KB) To 3219.00 ft (KB) (TVD)**

Total Depth: 3219.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1846.00 ft (KB)

1838.00 ft (CF)

KB to GR/CF: 8.00 ft

**Serial #: 8289** Outside

Press@RunDepth: 22.70 psig @ 3153.00 ft (KB)

Start Date: 2014.07.20 End Date: 2014.07.20

Start Time: 03:05:02 End Time: 07:27:15

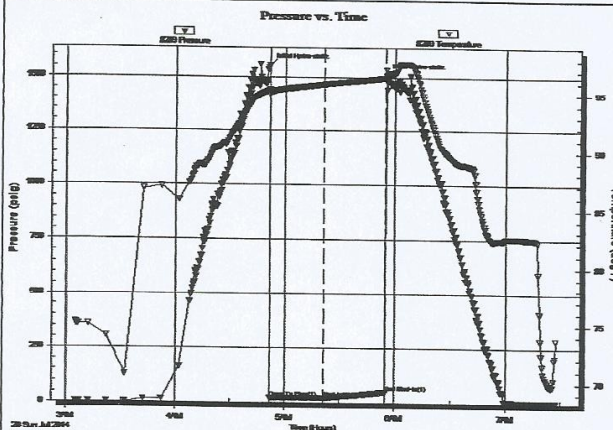
Capacity: 8000.00 psig

Last Calib.: 2014.07.20

Time On Btm: 2014.07.20 @ 04:51:45

Time Off Btm: 2014.07.20 @ 05:55:15

TEST COMMENT: 30-IFP- 1/4". Blow Died in 20 min.  
30-ISIP- No Blow  
Pulled



### PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1550.01	95.43	Initial Hydro-static
1	20.87	95.01	Open To Flow (1)
30	22.70	95.89	Shut-In(1)
64	50.37	96.46	End Shut-In(1)
64	1504.81	97.18	Final Hydro-static

### Recovery

Length (ft)	Description	Volume (bbl)
2.00	Mud 100%	0.01

\* Recovery from multiple tests

### Gas Rates

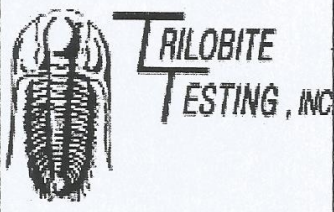
Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

Trilobite Testing, Inc

Ref. No: 59274

Printed: 2014.07.21 @ 10:54:10





# DRILL STEM TEST REPORT

Weigel Family Partnership LLC

17-13s-15w Russe II, KS

PO Box 219  
Gorham KS 67640

**Bosch #3**

Job Ticket: 59273      DST#: 1

ATTN: Roger Fisher

Test Start: 2014.07.19 @ 10:14:00

## GENERAL INFORMATION:

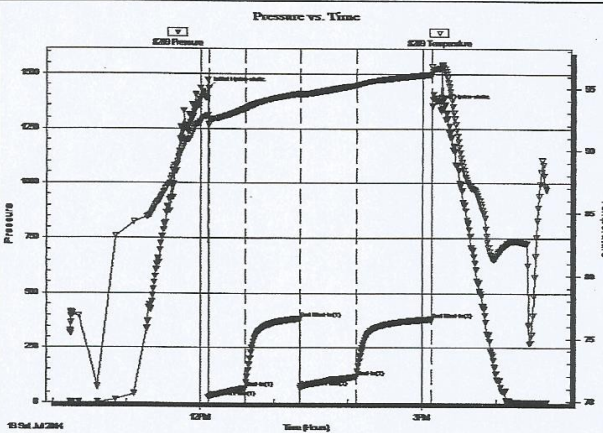
Formation: **Toronto - LKC " D "**  
 Deviated: No Whipstock: ft (KB)  
 Time Tool Opened: 12:06:30      Test Type: Conventional Bottom Hole (Initial)  
 Time Test Ended: 16:40:00      Tester: Jim Svaty  
 Unit No: 76  
 Interval: **2971.00 ft (KB) To 3082.00 ft (KB) (TVD)**      Reference Elevations: 1846.00 ft (KB)  
 Total Depth: 3082.00 ft (KB) (TVD)      1838.00 ft (CF)  
 Hole Diameter: 7.88 inches Hole Condition: Fair      KB to GR/CF: 8.00 ft

## Serial #: 8289

Outside

Press@RunDepth: 118.62 psig @ 2985.00 ft (KB)      Capacity: 8000.00 psig  
 Start Date: 2014.07.19      End Date: 2014.07.19      Last Calib.: 2014.07.19  
 Start Time: 10:14:00      End Time: 16:40:30      Time On Btm: 2014.07.19 @ 12:06:15  
 Time Off Btm: 2014.07.19 @ 15:07:45

TEST COMMENT: 30-IFP- BOB in 9 min.  
 45-ISIP- Weak Surface Blow Died in 32 min.  
 45-FFP- BOB in 14 min.  
 60-FSIP- No Blow



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1431.29	92.84	Initial Hydro-static
1	25.46	92.06	Open To Flow (1)
31	68.58	93.36	Shut-In(1)
75	384.85	94.56	End Shut-In(1)
76	70.28	94.41	Open To Flow (2)
120	118.62	95.22	Shut-In(2)
182	381.81	96.13	End Shut-In(2)
182	1350.70	96.75	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
188.00	Mud 100%	1.38
0.00	GIP 122	0.00

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



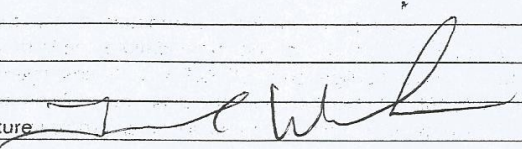
# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

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

No. 091

Date	7-16-14	Sec.	17	Twp.	13	Range	15	County	Russell	State	Ks	On Location	Finish	11:30 AM	
								Location <u>Gocham, Ks - 1E, 3N, 1/4 W, 5th</u>							
Lease	<u>Bosch</u>			Well No.	<u>3</u>		Owner								
Contractor	<u>Discovery #2</u>			To Quality Oilwell Cementing, Inc.											
Type Job	<u>Surface</u>			You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Hole Size	<u>12 1/4"</u>			T.D.	<u>713'</u>		Charge To <u>U. Francis Weigel Family Partnership LLC</u>								
Csg.	<u>8 5/8"</u>			Depth	<u>713'</u>		Street								
Tbg. Size				Depth			City								
Tool				Depth			State								
Cement Left in Csg.	<u>40'</u>			Shoe Joint	<u>40'</u>		The above was done to satisfaction and supervision of owner agent or contractor.								
Meas Line				Displace	<u>42 1/2 BLS</u>		Cement Amount Ordered <u>300 Com 3% CC 2% Gel</u>								
<b>EQUIPMENT</b>										Common <u>300</u>					
Pumptrk	<u>16</u>	No.	Cementer	<u>Billy</u>		Poz. Mix									
			Helper												
Bulktrk	<u>13</u>	No.	Driver	<u>Ryan</u>		Gel. <u>6</u>									
			Driver												
Bulktrk	<u>p.u.</u>	No.	Driver	<u>Rick</u>		Calcium <u>11</u>									
			Driver												
<b>JOB SERVICES &amp; REMARKS</b>										Hulls					
Remarks:	<u>Cement did Circulate</u>										Salt				
Rat Hole											Flowseal				
Mouse Hole											Kol-Seal				
Centralizers											Mud CLR 48				
Baskets											CFL-117 or CD110 CAF 38				
D/V or Port Collar											Sand				
											Handling <u>317</u>				
											Mileage				
<b>FLOAT EQUIPMENT</b>															
											<del>Guide Shoe</del> <u>Rubber plug</u>				
											Centralizer				
											Baskets				
											AFU Inserts				
											Float Shoe				
											Latch Down				
											Pumptrk Charge <u>Long Surface</u>				
											Mileage <u>11</u>				
										Tax					
X Signature										Discount					
										Total Charge					