

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1217361

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 #			API No. 15		
Name:			Spot Description:		
Address 1:			Sec	TwpS. R	East West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from I	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long: _	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	/ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW □ SIGW	Elevation: Ground:	Kelly Bushing:	:
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total C	Depth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore, Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		Feet
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	•	NHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
☐ Plug Back	Conv. to G		(Data must be collected from the		
Commingled	Pormit #:		Chloride content:	ppm Fluid volume	e: bbls
Dual Completion			Dewatering method used: _		
SWD			Location of fluid disposal if	hauled offsite	
☐ ENHR			1		
GSW	Permit #:		Operator Name:		
_ _			Lease Name:	License #:_	
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East _ West
Recompletion Date		Recompletion Date	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 III Approved by: Date:



Operator Name:			Lease Name: _	Well #:										
Sec Twp	S. R	East West	County:											
open and closed, flow	ring and shut-in pressu	ormations penetrated. Cures, whether shut-in prediction of the pre	essure reached stat	ic level, hydrosta	tic pressures, bot									
		otain Geophysical Data a or newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log							
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth ar		Sample							
Samples Sent to Geol	logical Survey	Yes No	Nam	ie		Тор	Datum							
Cores Taken Electric Log Run		Yes No												
List All E. Logs Run:														
		CASING	RECORD N	ew Used										
		Report all strings set-			ion, 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 / SQI	JEEZE RECORD	<u> </u>	1								
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives								
Perforate Protect Casing Plug Back TD Plug Off Zone														
	ulic fracturing treatment of	n this well? aulic fracturing treatment ex	roed 350 000 gallons	Yes		p questions 2 ar	nd 3)							
		submitted to the chemical of	=	Yes	= ' '	out Page Three	of the ACO-1)							
Shots Per Foot		N RECORD - Bridge Plug ootage of Each Interval Per			cture, Shot, Cement		d Depth							
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:										
TODING RECORD.	OILG.	Jet At.	i aunei Al.		Yes No									
Date of First, Resumed	Production, SWD or ENF	HR. Producing Meth	nod:	Gas Lift C	Other (Explain)									
Estimated Production Per 24 Hours	Oil B	bbls. Gas	Mcf Wat	er B	bls. C	as-Oil Ratio	Gravity							
DISPOSITION Vented Sold	ON OF GAS:	N Open Hole	METHOD OF COMPL		mmingled	PRODUCTIO	DN INTERVAL:							
	bmit ACO-18.)	Other (Specify)	(Submit		mit ACO-4)									

Form	ACO1 - Well Completion
Operator	Indian Oil Co., Inc.
Well Name	Blackstock 3
Doc ID	1217361

Tops

Name	Тор	Datum					
HUSHPUCK	4519	-3157					
ВКС	4569	-3207					
PAWN	4673	-3311					
CHRK GROUP	4720	-3358					
MISS	4772	-3410					
KIND	5030	-3668					
MISENER	5130	-3768					
VIOLA	5142	-3780					

Form	ACO1 - Well Completion
Operator	Indian Oil Co., Inc.
Well Name	Blackstock 3
Doc ID	1217361

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
SURFACE	12.25	8.625	23	268	CLASS A	175	
PRODUC TION	7.875	5.5	15.50	5190	CLASS A	100	KOLSEAL

HYDRAULIC FRACTURING FLUID PRODUCT COMPONENT INFORMATION DISCLOSURE

Fracture Date:	6/12/2014	
County:	Barber	
Operator Name:	Indian Oil Company	
Well Name and Number:	Blackstock #3	
Total Base Fluid Volume (gal)*:	462400	

Hydraulic Fracturing Fluid Composition:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS#)	Maximum Ingredient Concentration in Additive (% by mass)**	Maximum Ingredient Concentration in HF Fluid (% by mass)**
Plexslick 957	Chemplex	Friction Reducer	Petroleum Hydrotreated Light Distillate	64742-47-8	25%	0.0242147%
Plexsurf 580 ME	Chemplex	Product Stabalizer	Methyl Alcohol	67-56-1	10%	0.0025087%
Plexsurf 580 ME	Chemplex	Product Stabalizer	2-Butoxyethanol	111-76-2	50%	0.0023087%
Claymax	Chemplex	Clay Stabalizer	No hazardous ingredient	N/A	0%	0.0000000%
Plexcide B7	Chemplex	Biocide	Sodium Hydroxide	1310-73-2	5%	0.0002500%
Plexcide B7	Chemplex	Biocide	Alkaline Bromide Salts	N/A	0%	0.0002300%
Plexed Breaker XPA		Breaker/Slickwater	Hydrogen Peroxide	7722-84-1	7%	0.0014110%
•	Chemplex	•				
Plexset 730	Chemplex	Activator	Methanol	67-56-1	50%	0.7500000%
Plexset 730	Chemplex	Activator	Alcohol Ethoxylates	Mixture	60%	0.9000000%
Frac Sand	Uniman	Propant	Crystalline Silica in the form of Quartz	14808-60-7	60%	26.4%
Plexgel 907L-EB Plexgel Breaker 10L	Chemplex Chemplex	Gelling Agent Breaker/Gel	Hydrocarbons No Hazardous Ingredient	68476-34-6 N/A	100%	0.5000000% 0.0000000%

062963 SERVICES, LLC ALLIED OIL & GAS SER

P.O. BOX 93999 SOUTHLAKE, TEXAS 76092 REMIT TO

 σ

SERVICE POINT:

						7	
5-13-18	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START JOB FINISH	JOB FINISH
Xv.S.S.Tx.S SE	WELL#	7	LOCATION Make Land Ledges - 185	Logor Land		COUNTY	STATE
OR NEW (Circ	ircle one)		3/10	N. Land			

03

DATE OF CO.	1 COAM SISOAM 7 COAM
LOCATION	Level Lodos - 18.5. Barren
OLD OR NEW (Circle one)	Winter
CONTRACTOR Val	OWNER
18 San 12.	——————————————————————————————————————
HOLE SIZE 13.74 T.D. 4.70	CEMENT
DEPTH	
	e.
SOF MINIMUM ICO	COMMON
MEAS. LINE SHOE JOINT 48, 146	POZMIX
CEMENT LEFT IN CSG, (1.3. "4)(
PERFS.	CHLORIDE @
DISPLACEMENT IN SK	
FOIIIPMENT	
	(e)
A supplied by the supplied by	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
EK MANAGER	(a)
# COT CO HELPER TANKS CONTRACT	
ULK IRUCK	(a)
# CARLY SOUTH TO CONTROL	(e)
ULK TRUCK	©
# DRIVER	HANDLING (a)
PFMARKS.	
SWINTS	IOIAL
1 2 1 Con	
10 10 10 10 10 10 10 10 10 10 10 10 10 1	SERVICE
Starting of the Party of the said	
025 55 CT 6365 55	- DEPTH OF JOB スプラ
	PIIMPTRIICK CHARGE
STORES OF THE STORES	EXTRA FOOTAGE
	- MANIFULD
de .	() () () () () () () () () ()
CHARGE TO TO NOT TO TO	
	IATOT
STREET	IOIAL I
ZIATE ZID	
The second secon	PLUG & FLOAT EQUIPMENT
TO THE THE PARTY OF THE PARTY O	
	Best book & Song
	(a) A A A A A A A A A A A A A A A A A A A
To: Allied Oil & Gas Services LLC	(a)
IV. Alliva VIII & Vas DVI VIVVS, ELEV.	13 3 13 1 1 1 1 0
You are nereby requested to rent cementing equipment	(a)
J. C., i. L	D

IF PAID IN 30 DAYS

TOTAL

SALES TAX (If Any)

TERMS AND CONDITIONS" listed on the reverse side. contractor. I have read and understand the "GENERAL

PRINTED NAME

SIGNATURE

contractor to do work as is listed. The above work was

done to satisfaction and supervision of owner agent or

and furnish cementer and helper(s) to assist owner or

TOTAL CHARGES

DISCOUNT

062266 SERVICES, LLC & GAS ALLIED JIL

Federal Tax I.D. # 20-8651475

SERVICE POINT:

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092

HSI LEASE (\$4200) 7555 OLD OR NEW (Ci 1. -... 1. -... 1. -... 1. -... 1. -... DATE

H.	COUNTY STATE		Transmiss of		RDERED IN	Vice ACT By the Act of		(0)			(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(0)	(a)	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c		IVECT	SEDVICE		DEPTH OF JOB PUMP TRUCK CHARGE	OTAGE		(a) (b)	TOTAL	Tively will of the O vi o Oil Id	FLUG & FLUAT EQUIPMENT	POR STUDENT	(a)	(a)	TOTAL	X (If Any)		PANCIOS NI CIPO EI
RANGE CALLED OUT	LOCATION KNOWN JON TO SEE	STATE 73 THE P	OWNER	CEMENT			DEPTH		GEL	FCL MPTER ASC		PR1000	i "	12 June 2	HANDLING	MILEAGE	Section Process Posts Process	2012	200	EXTRA FOOTAGE MILEAGE	MANIFOLD			ZIP		* 3 3	nces, LLC. to rent cementing equipment	helper(s) to assist owner or slisted. The above work was		٠.	TOTAL CHARGES	
DATE TO SEC. TWP.	(2)	OLD OR NEW (Circle one)	يع	TYPE OF JOB PROSECULAR T.D.	CASING SIZE S /2 DEPTH		TOOL DEPTH PRES. MAX MINIM		CEMENT LEFT IN CSG. Z i FF. PERFS.	DISPLACEMENT 125 8815 19	EQUIPMENT	PUMP TRUCK CEMENTER Sastra	TIPLI IN THE STATE OF THE STATE	ULK TRUCK	# DRIVER	REMARKS:	PRESSUE THEY HAVE COURT HE	14 13 6 15 1 4 10 18 15 15 15 15 15 15 15 15 15 15 15 15 15	STATE TO BUY OF BU	1,000,000		CUADGE TO. Per Alexander		CITYSTATE				helper(s s listed.	upervisic nd unders	TERMS AND CONDITIONS" listed on the reverse side.	PRINTED NAME	

SIGNATURE