



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1218875
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: _____

1218875

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 <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 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: 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

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: _____ _____
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ALLIED OIL & GAS SERVICES, LLC 062061

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oak Hills
6.7

DATE <u>9-2-17</u>	SEC. <u>23</u>	TWP. <u>14</u>	RANGE <u>41W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30 AM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>2180</u>	WELL # <u>1-35</u>	LOCATION <u>Franklinville Hwy 218</u>			COUNTY <u>Wilmer</u>	STATE <u>TX</u>	
OLD OR NEW (Circle one) <u>NEW</u>		Location with 2000 ft. to					

CONTRACTOR <u>with energy</u>	
TYPE OF JOB <u>Septum</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>405</u>
CASING SIZE <u>8 1/2</u>	DEPTH <u>399</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>150</u>	
PERFS.	
DISPLACEMENT <u>27.5</u>	

OWNER	
CEMENT	
AMOUNT ORDERED	<u>27.5</u>
<u>20.6</u>	

COMMON	<u>270.00</u>	@	<u>17.90</u>	<u>4833.00</u>
POZMIX		@		
GEL	<u>500</u>	@	<u>23.40</u>	<u>117.00</u>
CHLORIDE	<u>1000</u>	@	<u>64.00</u>	<u>640.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>291.90</u>	@	<u>2.74</u>	<u>724.06</u>
MILEAGE	<u>12.69 hrs x 20.00</u>	@	<u>2.00</u>	<u>2309.00</u>
TOTAL				<u>8622.00</u>

EQUIPMENT

PUMP TRUCK	CEMENTER <u>1</u>
#	HELPER <u>1</u>
BULK TRUCK	
#	DRIVER <u>1</u>
BULK TRUCK	
#	DRIVER

REMARKS:

Septum 270 on 2000 ft. project
12 1/4 casing 8 1/2 tubing
150 cement left in casing
27.5 displacement
Thank you

SERVICE

DEPTH OF JOB	<u>405</u>
PUMP TRUCK CHARGE	<u>2151.00</u>
EXTRA FOOTAGE	@
MILEAGE	<u>12.69 hrs x 20.00</u> @ <u>7.00</u> <u>527.00</u>
MANIFOLD	<u>1</u> @ <u>270.00</u> <u>270.00</u>
	@ <u>2.00</u> <u>408.00</u>
	@
TOTAL <u>2634.00</u>	

CHARGE TO: Red Oak Energy Int.
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>270</u>	@	<u>2.74</u>	<u>724.06</u>
<u>12.69 hrs x 20.00</u>	@	<u>2.00</u>	<u>2309.00</u>
<u>270 Centralizer</u>	@	<u>75.00</u>	<u>75.00</u>
	@		
	@		

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or



Services, Inc.

CHARGE TO: Ked Oak Energy
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET 20199
 PAGE 1 OF 2

1. SERVICE LOCATIONS: Lim City KS WELL/PROJECT NO: 1-35 LEASE: S/PW Unit COUNTY/PARISH: Wallace STATE: KS CITY: Sharon Springs DATE: 29 APR 14 OWNER: _____
 2. TICKET TYPE: SERVICE CONTRACTOR: _____ RIG NAME/NO.: _____ SHIPPED: YES DELIVERED TO: Location ORDER NO.: _____
 3. WELL TYPE: _____ WELL CATEGORY: WELLBPT JOB PURPOSE: Development - cement log string WELL PERMIT NO.: _____ WELL LOCATION: 35-14-41
 4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
579					WELL RIG	1	ea	10	ea	2000.00	2000.00
575					Pump Changes	1	ea	10	ea	700.00	700.00
402					Control Valve	5 1/2	in	2	ea	300.00	600.00
403					Cement Basket	5 1/2	in	1	ea	375.00	375.00
407					Insert Flats - shoe w/ AUTO FILL	5 1/2	in	1	ea	3550.00	3550.00
408					DV Tool	5 1/2	in	1	ea	200.00	200.00
417					DV latchdown Plug & Gaffle	5 1/2	in	1	ea	200.00	200.00
419					Rotating head sealers	5 1/2	in	1	ea	200.00	200.00
580					Additional hours	1	hr			200.00	200.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
YOUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL: 1
 TOTAL: 24,870.21

DATE SIGNED: _____ TIME SIGNED: _____
 SWIFT OPERATOR: _____ APPROVAL: _____
 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this invoice.
 Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

LUCKE CONTINUATION

INVOICE No. 26149

CUSTOMER *Red Oak Energy*

WELL *S/PRU W 1*

DATE *29 APR 14*

PAGE *21* OF *2*

LINE	DESCRIPTION	QUANTITY	UNIT	PRICE	AMOUNT	DATE
330	SMD cement	1	SK	18.50	55.50	
336	STANDARD cement (40-51-5)	1	SK	14.50	25.37	
284	calsoad	1	8 SK	35.00	280.00	
283	SADT	1	900 lb	0.20	180.00	
292	haled-322	1	125 lb	8.00	1000.00	
276	Flavelo	1	125 lb	2.50	312.50	
281	multiflush	1	500 gal	1.25	625.00	
221	KCC Liquid	1	4 gal	25.00	100.00	
<p>SERVICE CHARGE</p> <p>TOTAL WEIGHT <i>48178</i> LOADED MILES <i>150</i> CUBIC FEET <i>475</i> TON MILES <i>3613.35</i></p> <p>TOTAL <i>200</i> TOTAL <i>950.00</i></p> <p>TOTAL <i>100</i> TOTAL <i>3613.35</i></p>						

REVENUE *16198.35*

JOB LOG

SWIFT Services, Inc.

DATE 29 APR 14 PAGE 1

CUSTOMER Red Oak	WELL NO. 1-35	LEASE S/PW UNIT	JOB TYPE cement long string	TICKET NO. 26149
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								1755k EA-2 cement w/ 1/2 floccules 3005k SMD cement w/ 1/2 floccules 5 1/2" x 15.5" casing total pipe 5199' TD 5200' DV tool w/ 57 290' Shoe 42' Baskets 47 & 57 Concentrators 1, 3, 5, 7, 9, 11, 13, 15, 56, 58
	1800							on loc TRK 114
	1835							Start 5 1/2" x 15.5" casing in well
	1840							attach DV tool - circulate well 5 min
	1830							Drop ball - circulate - ROTATE
		4	12				200	Pump 500 gal mud flush
		4	20				200	Pump 20 bbl KCL flush
	1830	4	42				200	Mix EA-2 cement 175 gal @ 15.3000g wash out pump & line to pit
	1855							Drop latch down plug (1st stage)
		6	60				200	Displace plug w/ H ₂ O
		6					300	Switch to mud
	1921	4 1/2	123				1500	Land plug (1st stage) Release pressure to truck - air up
	1929							Drop bomb wash truck
	1945						1200	open DV tool
	1947							circulate well
	2115	4	20				200	Pump 20 bbl KCL flush
			7					Plug RH - MH 305k - 205k
	2130	4	140				200	Mix SMD cement 250 gal @ 11.2000g wash out pump & line to pit
								Drop latch down plug (2nd stage)
	2132	5					200	Displace plug
		5	41					— cement to surface — {edsk to pit}
		5	62				400	
	2242	5	66				1300	Land plug - close DV tool Release pressure to truck - air up
	2245							wash truck Pack up
								job complete
	2325							Take Blaine Plot, in case of issue