

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1219346

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:	SecTwp S. R				
Address 2:	Feet from North / South Line of Section				
City: State: Zip:+	Feet from _ East / _ West Line of Section				
Contact Person:	Footages Calculated from Nearest Outside Section Corner:				
Phone: ()	□NE □NW □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: Well #:				
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:				
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:	Producing Formation: Elevation: Ground: Kelly Bushing: Feet Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet				
Operator:	If Alternate II completion, cement circulated from:				
Well Name:	feet depth to:w/sx cmt.				
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 #:	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:				
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name:				
Connection Connection	Lease Name: License #:				
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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:				



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 Yes No (Attach Additional Sheets)					on (Top), Depth ar		Sample
Samples Sent to Geol	logical Survey	Yes No	Nam	ie		Тор	Datum
Cores Taken ☐ Yes ☐ No 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			Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		ADDITIONAL	. CEMENTING / SQI	JEEZE RECORD	I	1	
Purpose: Depth Top Bottom		Type of Cement # Sacks Used		Type and Percent Additives			
Protect Casing Plug Back TD Plug Off Zone							
	ulic fracturing treatment or	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 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				
TURING DECORD.	Size:	Sot At:	Packer A+	Linor Pun			
TUBING RECORD: Size: Set At: Packer At: Liner Run:							
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 OF GAS: METHOD OF COMPL Vented Sold Used on Lease Open Hole Perf. Duall			LETION: PRODUCTION INTERVAL:			
Vented Sold Used on Lease Open Hole Peri. Submit ACO-18.)					mit ACO-4)		

Form	ACO1 - Well Completion			
Operator	White Exploration, Inc.			
Well Name	Spring Valley Ranch 1-14			
Doc ID	1219346			

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Type and Percent Additives
Surface	17.5	13.375	53.5	330	Common	3% CC 2% gel



Rayin 3737

TICKET NUMBER_LOCATION FORFMAN

TOTAL

DATE_

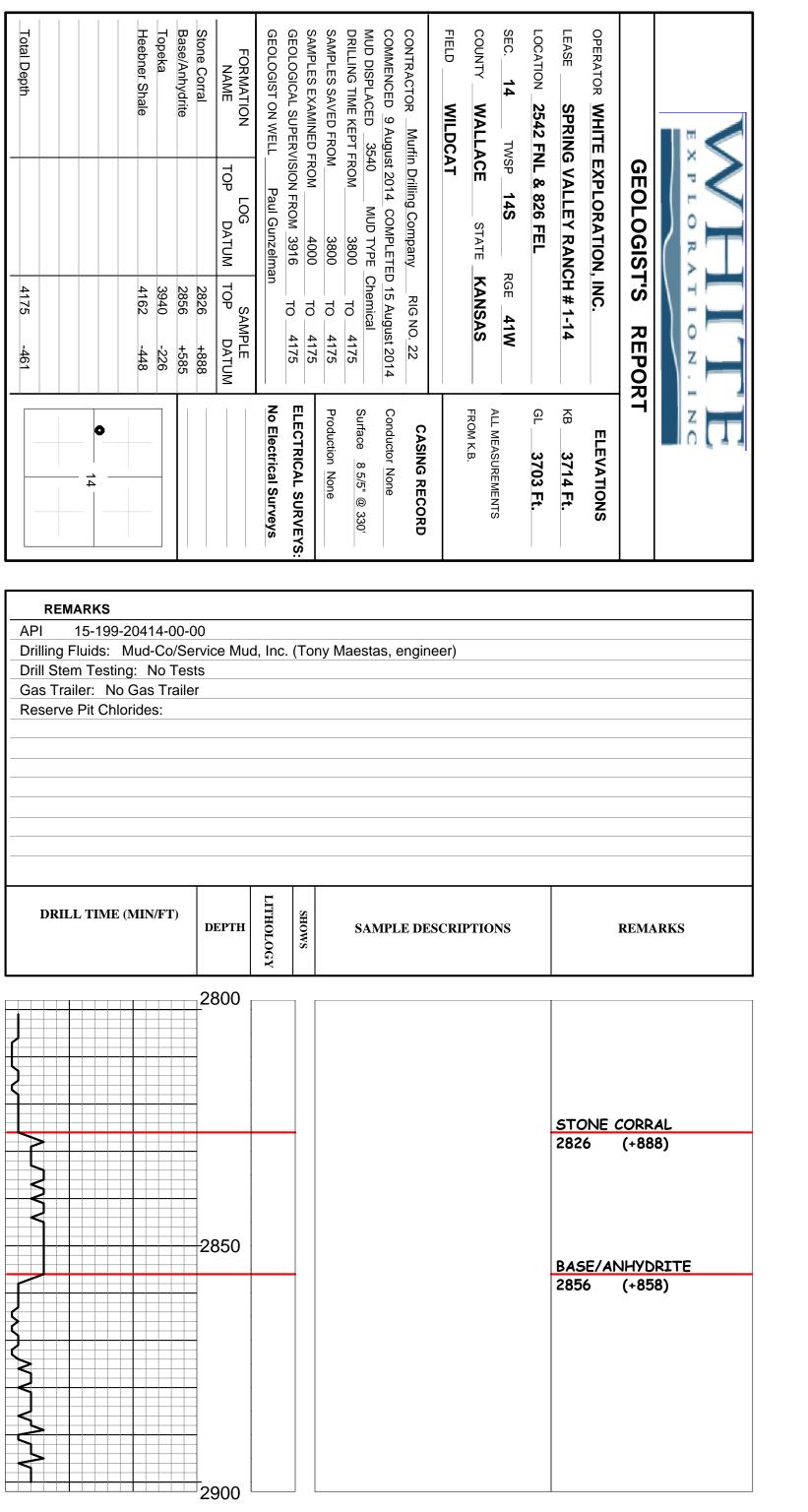
iox 884, Un 131-9210 o	anute, KS 6672 r 800-467-8676	.0		CEMEN	TMENT REP T			KS
DATE	CUSTOMER#	WELL	NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
-9-14	8860	Sacian	ally Ranc	h 1-14	14	145	4/6	Wallace
STOMER	()] - [1		Sharon Spos		200	TRUCK#	DRIVER
	White	t xp		-15540 but	IRUCK#	DRIVER	TRUCK#	DRIVER
ILING ADDRE	SS			मार्ह क	731 530-7129	Jereny R		
		STATE	ZIP CODE	Ninto	35051121	Lance IR		
Y		SIAIE		10,100				
			174	UOLE DERTI	H <u>330</u>	CASING SIZE & W	EIGHT /.33	18 545
	C 72	HOLE SIZE		_ HOLE DEP II	n		OTHER	
SING DEPTH	111 7	DRILL PIPE SLURRY VOL_	1.24	WATER gal/s		CEMENT LEFT in		7
URRY WEIGH	1100 1 1 1	DISPLACEMEN		MIX PSI	<u> </u>	RATE		
SPLACEMENT		,		Martin 22	2 book Ci	-culation v	1 1 th 0 10 t	see hoo
MARKS:	· · · · · · · · · · · · · · · · · · ·	ling + rig	up on e	ach don	300 + 12 + 1 =	3% CC +29	6 Gel west	upras
3 track	, , , , , , , , , , , , , , , , , , ,		John Cle	13574 CCM	& approx	1/266/10	ait	
44 4/8/	66/ fresh w	p+cr2-514		_/· CAAT	B splice			
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ACCOUNT	OLIANITY	or UNITS	1 .	DESCRIPTION	of SERVICES or PF	RODUCT	UNIT PRICE	TOTAL
CODE	QOARTT					· · · · · · · · · · · · · · · · · · ·	115000	115000
5401 ⁵		_	PUMP CHAR	RGE			7-25	34125
5406	6	<u> </u>	MILEAGE		1 1.		175	17/34
<u>54074</u>		<u>, /2</u>	ton m	ilenge o	e coery		 / 	7702.
							1855	6/2/3
11045	33			class A	1		94	8743
1102	93	3 <i>C</i>	Calica	m closi	<u>.e</u>		ZZ	11.73
11185	62	<u> 20</u>	gel					16/-
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						·····	SALES TAX	396.
	1			·			ESTIMATED	

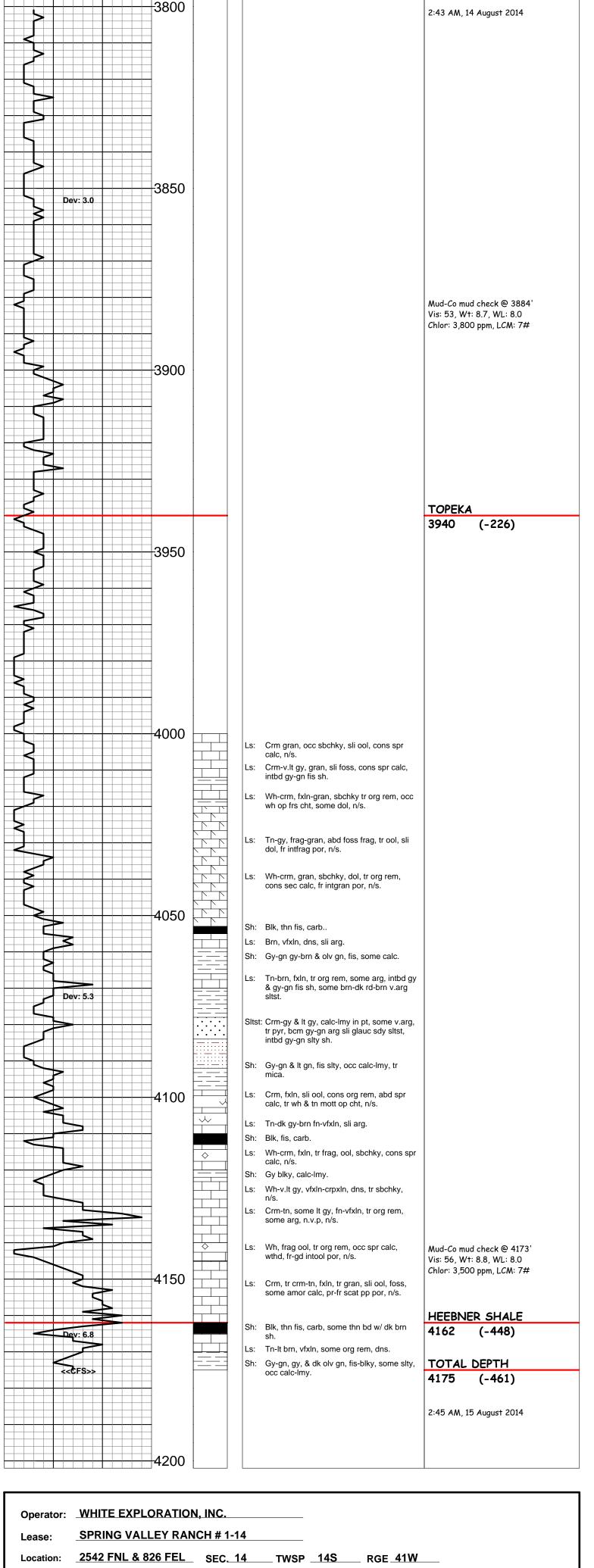
AUTHORIZTION MUMU I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

TITLE_

ALLIED OIL & GAS SERVICES, LLC 064130 Federal Tax I.D. # 20-8551475

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092	SERVICE POINT: (8-15-14) Oakley KS				
DATE OF TO 17 TI TI TI	ALLED OUT ON LOCATION JOB START JOB FINISH 12:30 pm. 12:30 pm. 1:30 cm				
Dering Volley LEASE Ranch WELL# 1-14 LOCATION Sharon					
131 131 187 N = Wiff 17010 Ann) [*317					
CONTRACTOR MONEY DO	owner Same				
HOLESIZE 778 T.D. 41.60	CEMENT				
CASING SIZE DEPTH	AMOUNT ORDERED 2555KS 60/40				
TUBING SIZE DEPTH DRILL PIPE 472 DEPTH 2350	4.1. ge) 1/0 = F/p-seci				
700					
PRES. MAX MINIMUM	COMMON				
MEAS. LINE SHOE JOINT	COMMON@ POZMIX @				
CEMENT LEFT IN CSG.	GEL @				
PERFS.	CHLORIDE @				
DISPLACEMENT 516/ Long 28 42661 mod	ASC@				
EQUIPMENT	6 1837 1834.60				
PUMPTRUCK CEMENTER TOUR POWY	Flo-see 64 = 2.97 190.08				
#403/281 HELPER MCam Driese	The local to the same				
BULKTRUCK	11/0/01/01/10/06 5014.68				
#373/368 DRIVER TUAN M. (TWS)	(//50./3/338				
# DRIVER					
# DAIVER	HANDLING 274.14 643 @ 2.48 679.87				
	MILEAGE 1144 fonv 65 m x 2.75 2044 90				
REMARKS:	TOTAL				
mix 50 sks@ 2850 Despectuland	•				
min 100 sts @ 1872. Display in mad	SERVICE				
mik 10 sks 6 40'	DEPTH OF JOB				
mix 30 sks in m.H	PUMP TRUCK CHARGE 2483,59				
	EXTRA FOOTAGE @ MILEAGE MILEAGE WILL US @ 7170 500.50				
Thank Pro	MANIFOLD @				
D. 14.15.	mily: 65 @ 4.40 226.00				
mystin Dolg.	@				
CHARGE TO: TOTAL CONTROL OF	(0.00.21/25-5)				
STREET	(2098.00/353) TOTAL <u>5,991.86</u>				
CITYSTATEZIP	PLUG & FLOAT EQUIPMENT				
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	TOTAL				
contractor. I have read and understand the "GENERAL					
TERMS AND CONDITIONS" listed on the reverse side.	SALES TAX (If Any)				
	TOTAL CHARGES 11,009.59				
PRINTED NAME	DISCOUNT 3, 7,5333/35 F PAID IN 30 DAYS				
SIGNATURE SACTION FARTA	7,156.20Net				





WALLACE State: KANSAS County: