



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1220006
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: _____

1220006

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. <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Hurricane Services, Inc.
 104 Prairie Plaza Parkway
 Garnett, KS 66032
 Office # 785-448-3100
 Toll Free # 855-718-8027



Ticket N^o 50257
 Location _____
 Foreman Dwayne / Joe

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
5/6/14		Eagle 10-14	31 / 25 / 14	wo.
Customer Daystar Petro Inc.		Mailing Address PO Box 560	City EUREKA KS	State KS
			Zip 67045	

Job Type:

Truck #	Driver
231	Tom
24	Scott
111	Tyler
109	Alex
110	AMOS
25	Dwayne

Quantity Or Units	Description of Services or Product	Pump charge	
37	Mileage Cement Pump	\$3.25/Mile	120 ⁰⁰
37	Foreman Pickup	1.50 mi.	55 ⁰⁰
192 Sacks	60/40 Poz mix	12 ⁰⁰ SK	2304 ⁰⁰
330 Lbs	Prem Gel 2%	130 Lb	99 ⁰⁰
200 Lbs	Prem Gel Flush	130 Lb	60 ⁰⁰
48 Lbs	FloSeal 1/4 lb per sack	2.15 Lb	103 ²⁰
6950 Gal	Water	1.36 gal	90 ⁰⁹
4 hr	Water TRUCK unit 109	84 hr	336
4 hr	Water TRUCK unit 111	84 hr	336
2.5 hr	Water TRUCK unit 110	84 hr	210
8.25 Tons	Bulk Truck Cement Delivery	\$130/Mile	396 ⁸²
1	Plugs 2 7/8 Rubber Plug	25 ⁰⁰	25 ⁰⁰
		Subtotal	4925 ⁸⁶
		Sales Tax	
		Estimated Total	

Remarks: Hooked onto casing EST. Circulation - Pump 10 BBL
 Gel Followed By 15 BBL Pad with Dye Marker Followed By
 192 Sacks 60/40 Poz cement. Stop and Flush Pump.
 Then Pump wiper Plug to Bottom and Shut IN 700 PSI

Not on location

Customer Signature



ORNISH
WIRELINE
SERVICES, INC.
CHANUTE, KANSAS

**GAMMA RAY
NEUTRON
CEMENT BOND
COMPLETION LOG**

Company DAYSTAR PETROLEM, INC.
Well EAGLE #10-14
Field
County WOODSON
State KANSAS

Company DAYSTAR PETROLEM, INC.
Well EAGLE #10-14
Field
County WOODSON State KANSAS

Location: API #: SEC 31 TWP 25S RGE 14E
Permanent Datum GL Elevation 1003.93'
Log Measured From GL
Drilling Measured From GL
Other Services
Elevation
K.B.
D.F.
G.L. 1003.93'


Date	5-21-2014
Run Number	1 NW
Depth Driller	
Depth Logger	1376.6'
Top Log Interval	0
Bottom Logged Interval	1376.6'
Fluid Level	FULL
Type Fluid	WATER
Production Casing	2 7/8" @ TD @
Max. Recorded Temp.	
Estimated Cement Top	
Calculated Cement Top	
Amount & Type Cement	
Amount & Type Admix	
Drilling Contractor	
Equipment Number	105
Location	
Recorded By	GORMLEY, R.
Witnessed By	JOHN

<<< Fold Here >>>

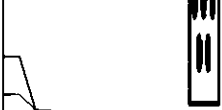
All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

THANK YOU

Sensor	Offset (ft)	Schematic	Description	Len (ft)	OD (in)	Wt (lb)
						
WVF3FT	4.42		CBLTEKCO-TEKCO2RCVR (TEKCO169) 1 11/16" TEKCO 2 RCVR DELWARE	9.75	1.69	50.00
WVF5FT	3.42					

WVFCAL 0.00
 WVFSYNC 0.00



Dataset: eagle #10-14.db: field/well/run1/pass2MERGE
 Total Length: 9.75 ft
 Total Weight: 50.00 lb
 O.D.: 1.69 in

Database File: eagle #10-14.db
 Dataset Pathname: pass2MERGE
 Presentation Format: scbl_dr
 Dataset Creation: Wed May 21 10:28:52 2014
 Charted by: Depth in Feet scaled 1:240

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150	gr (cps)	300

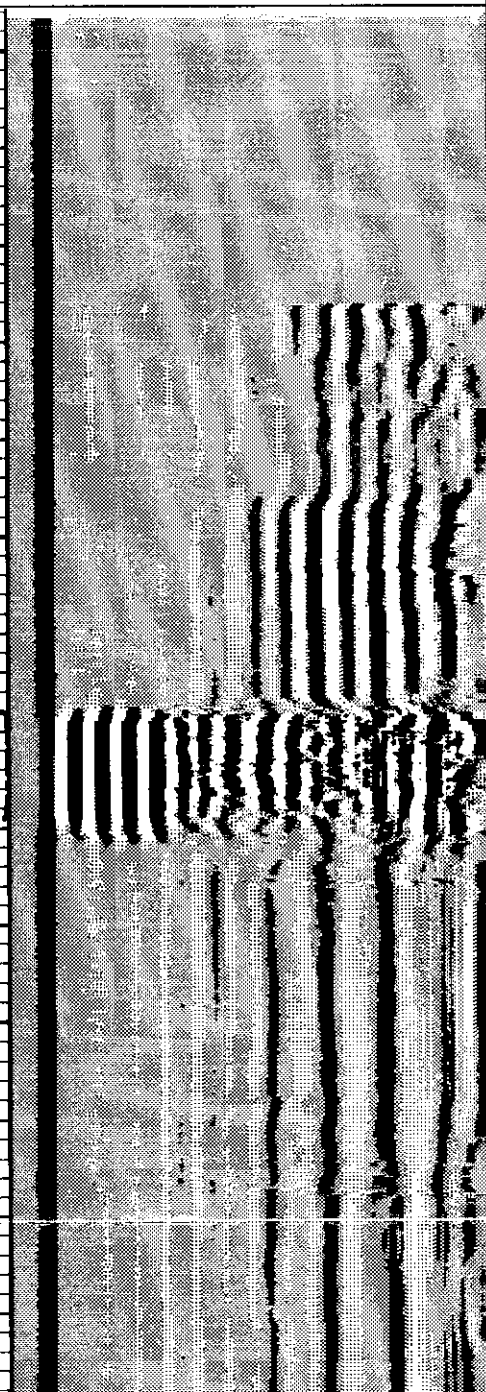
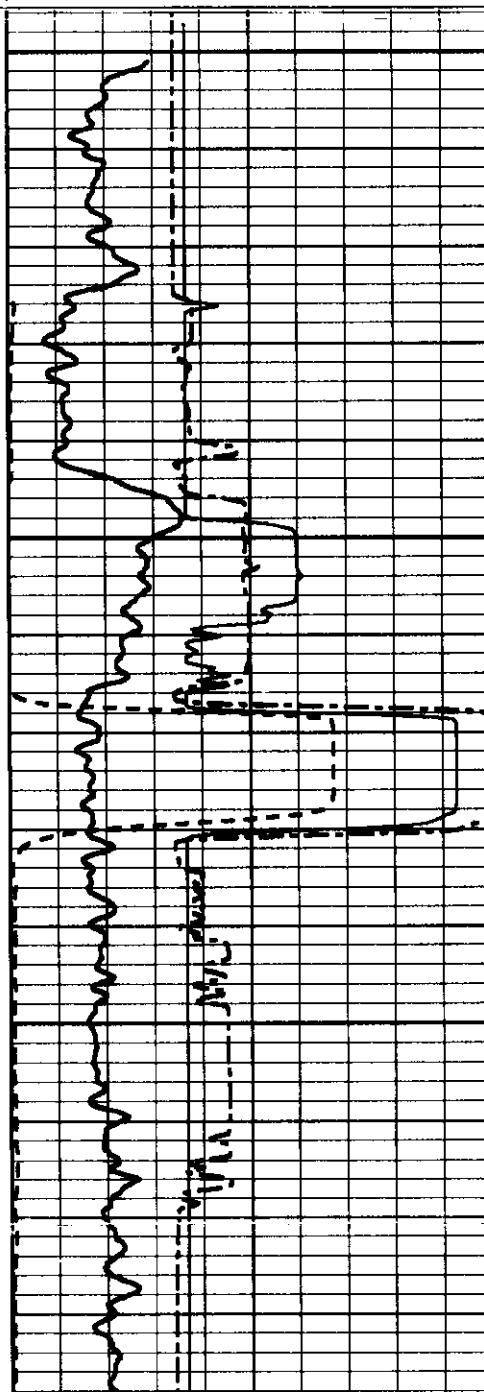
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1800	TT5FT (usec)	200			
100	NEU	1100			

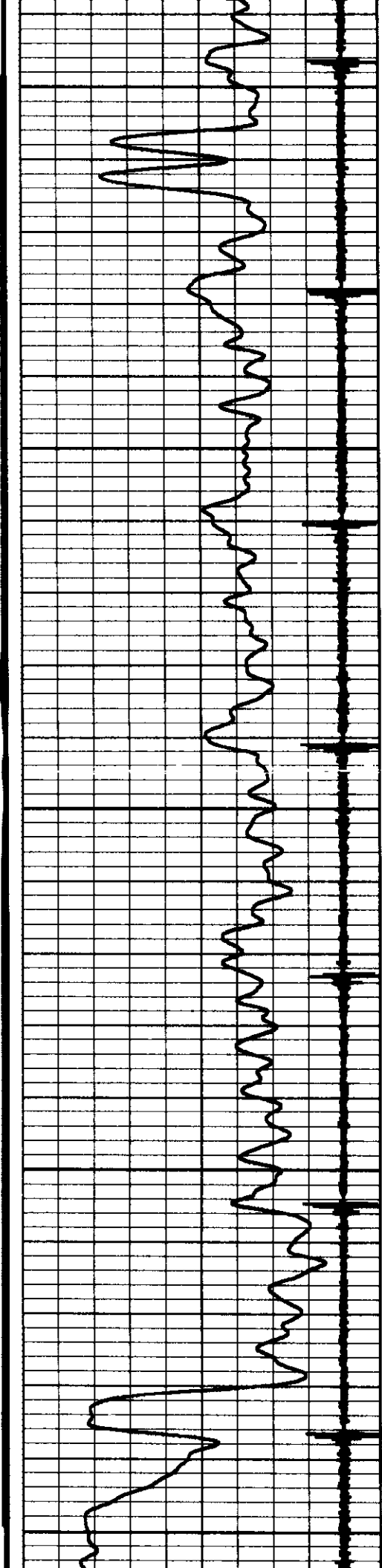


0

50

100





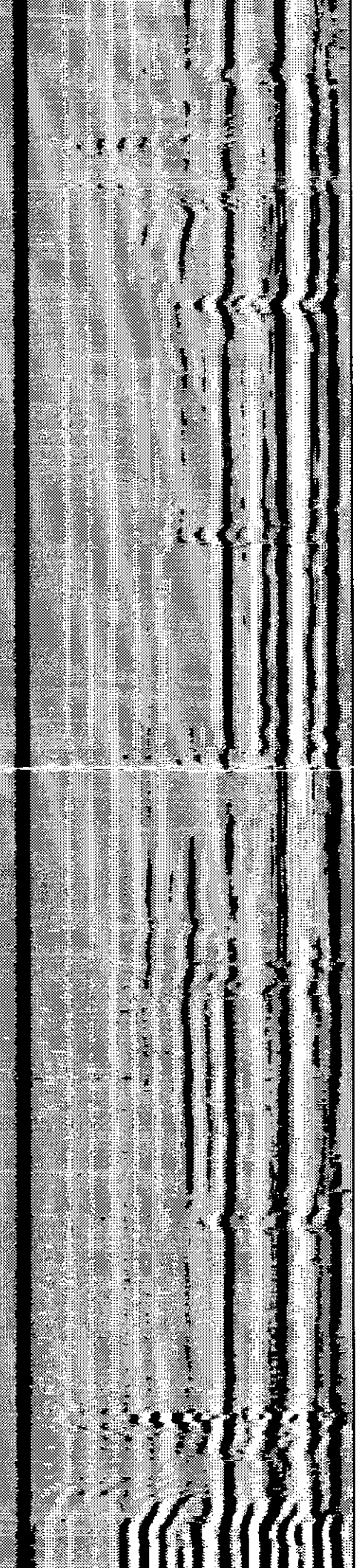
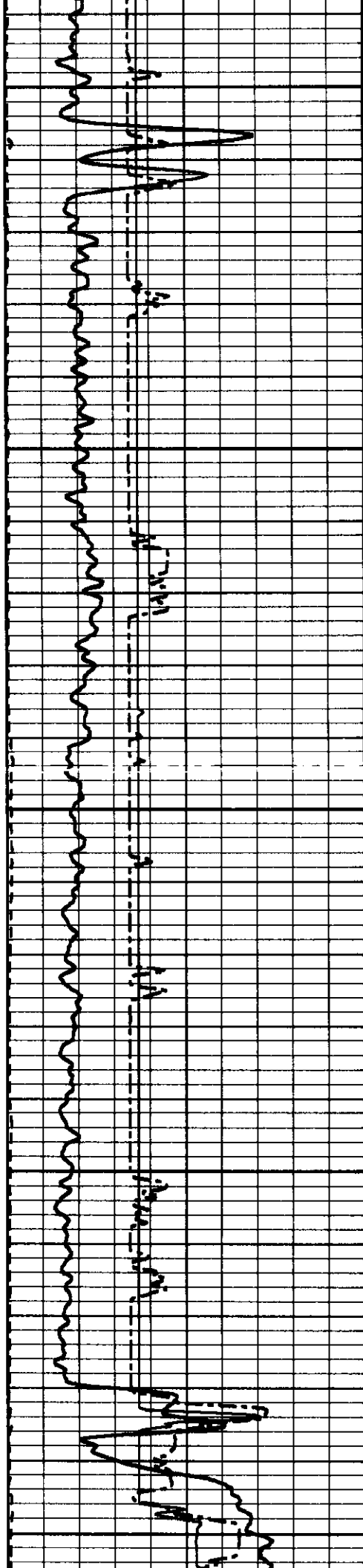
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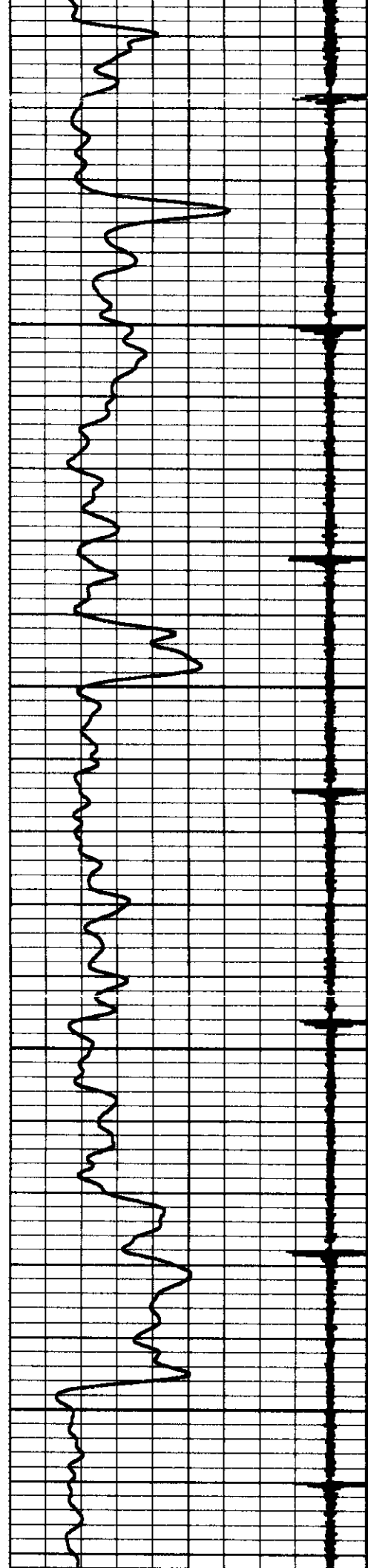
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250

300

350



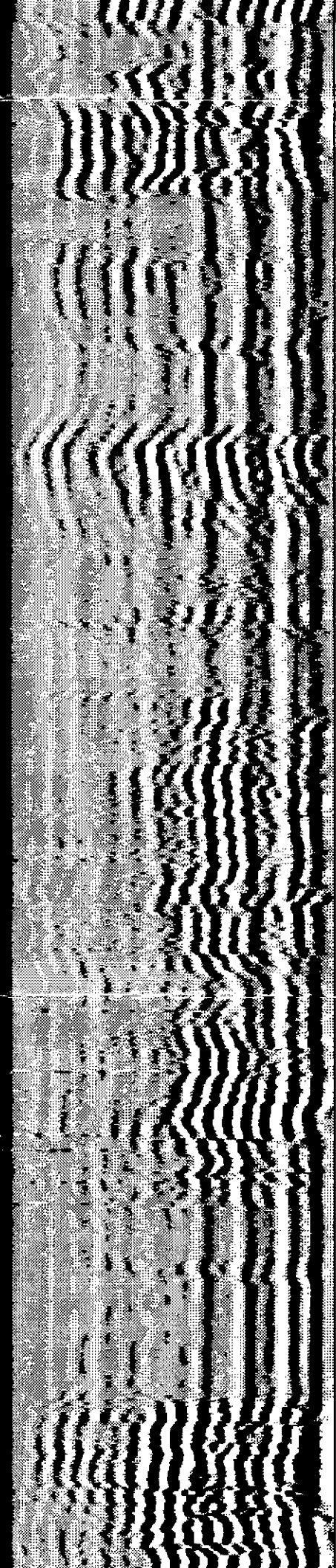
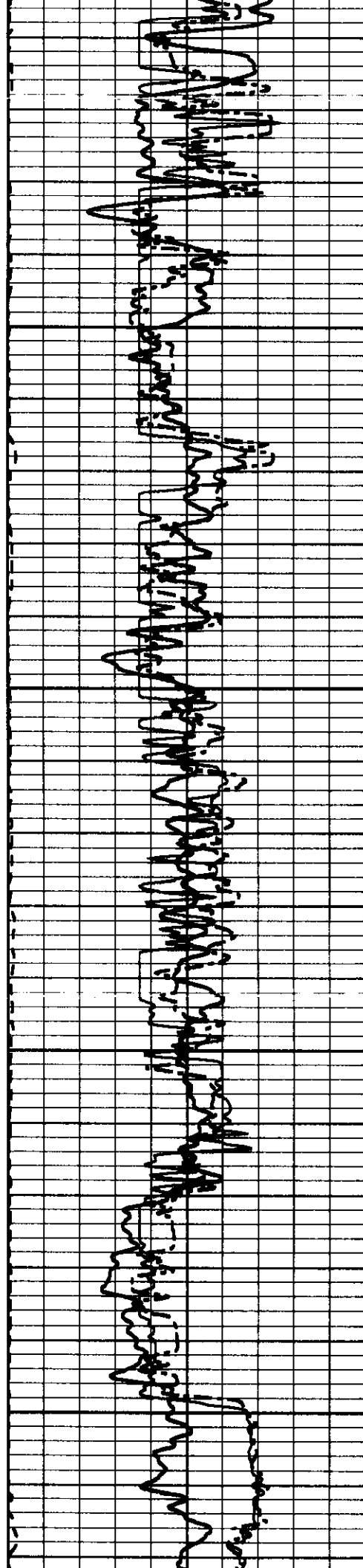


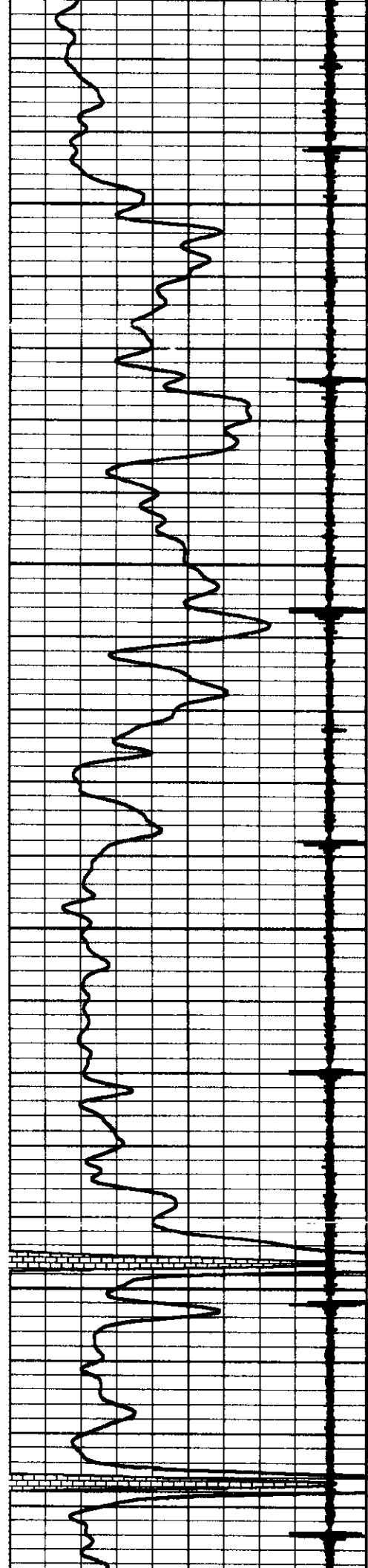
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450

500

550



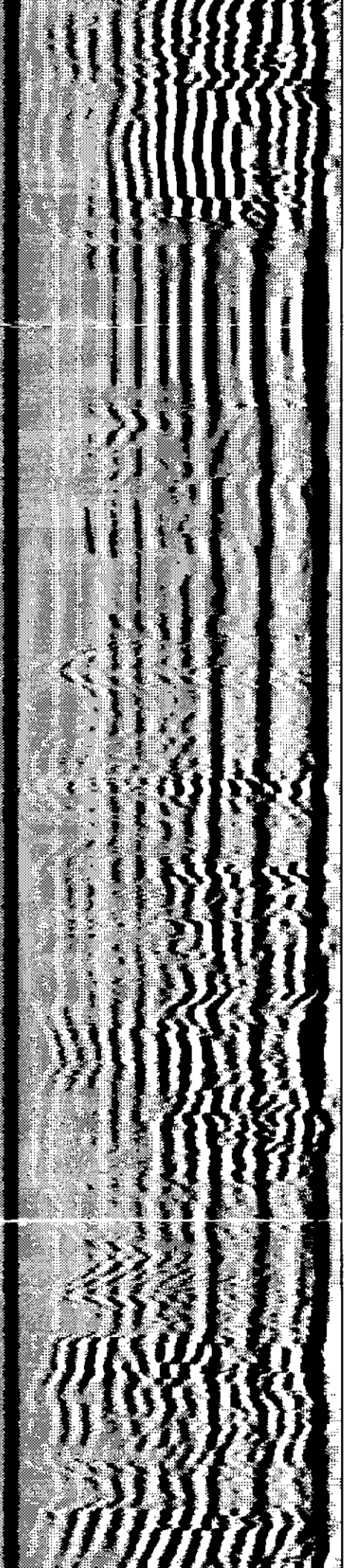
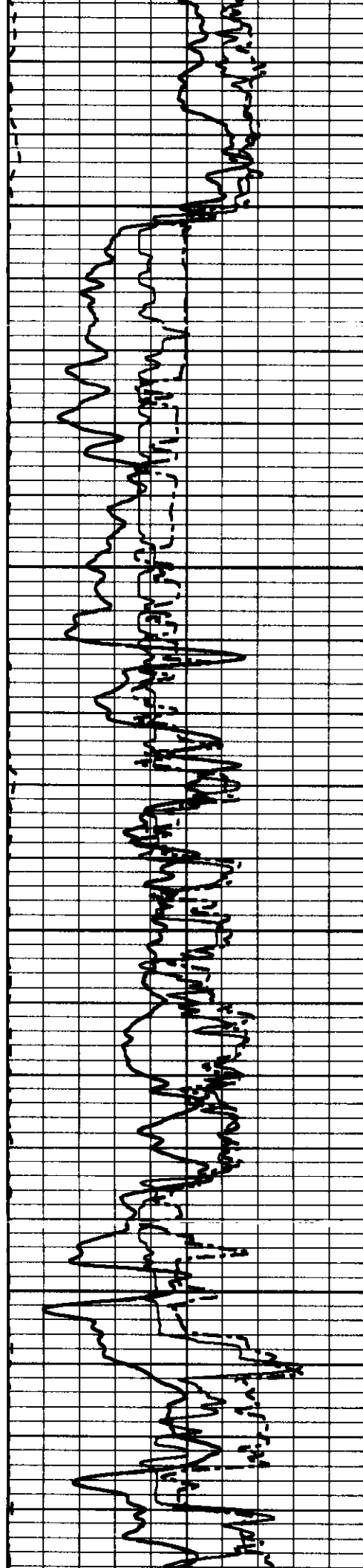


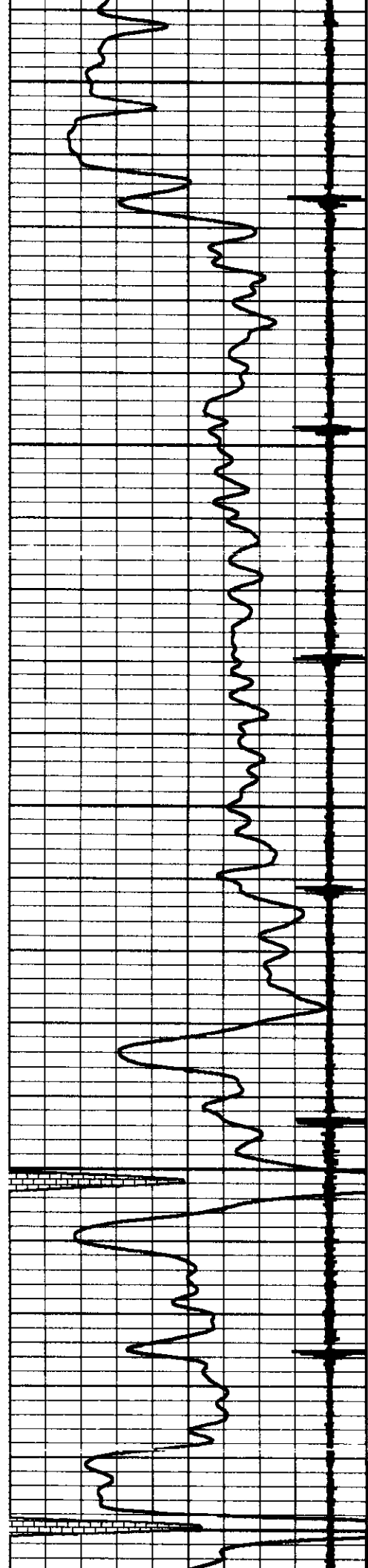
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650

700

750





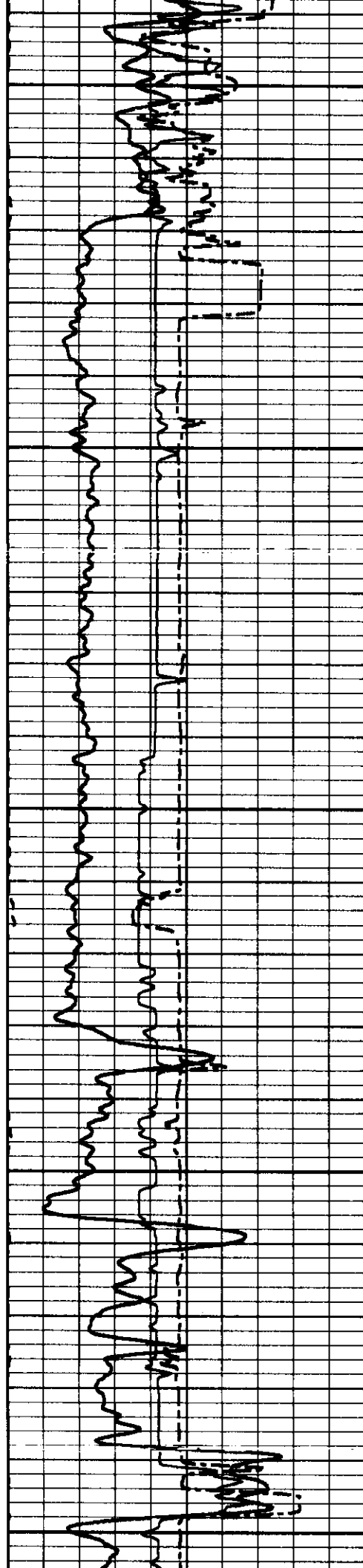
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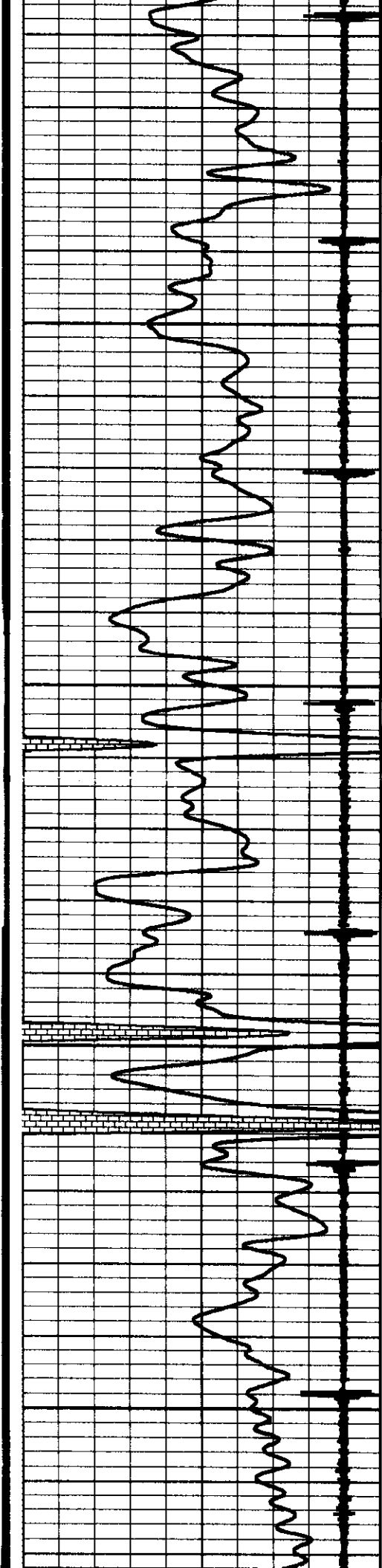
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900

950

1000



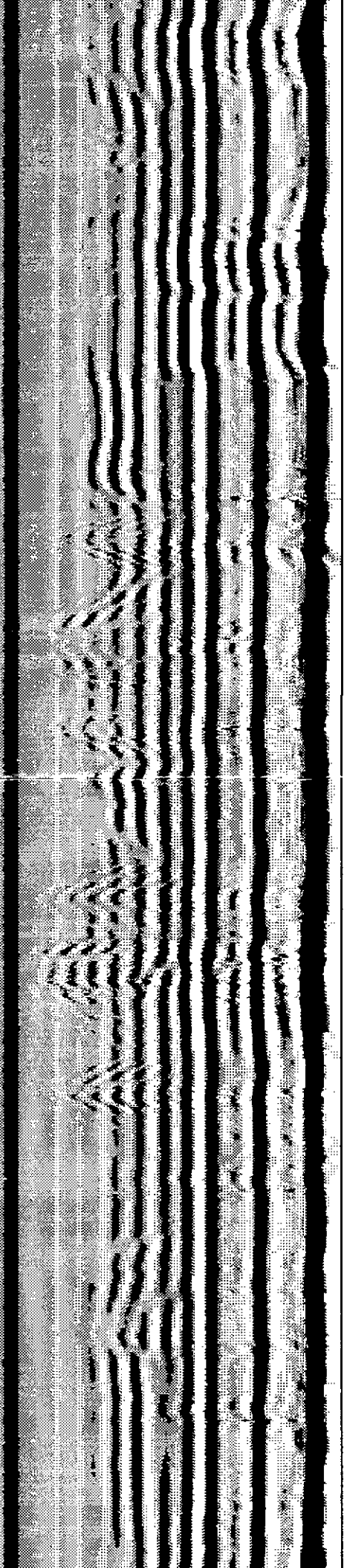
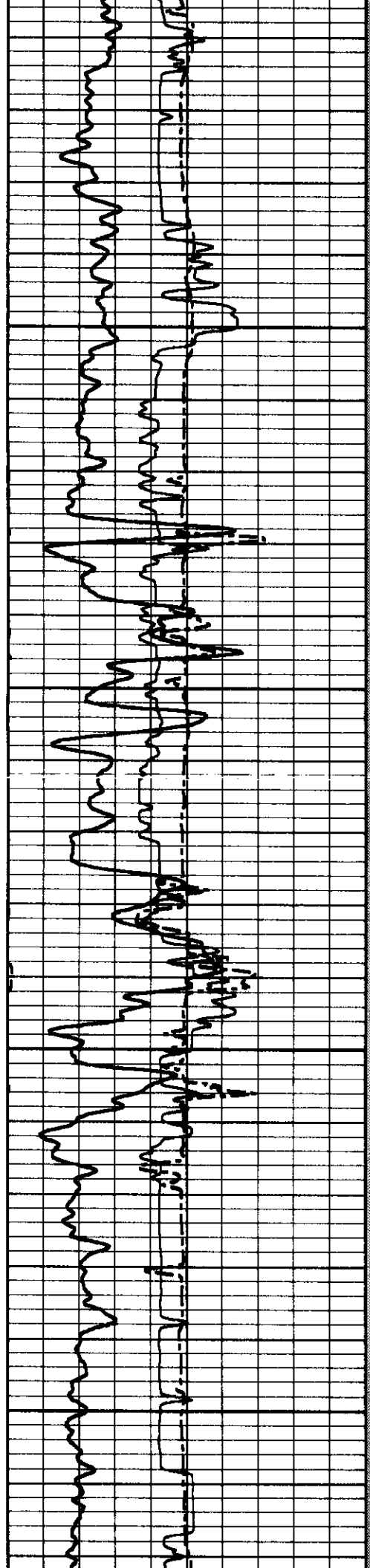


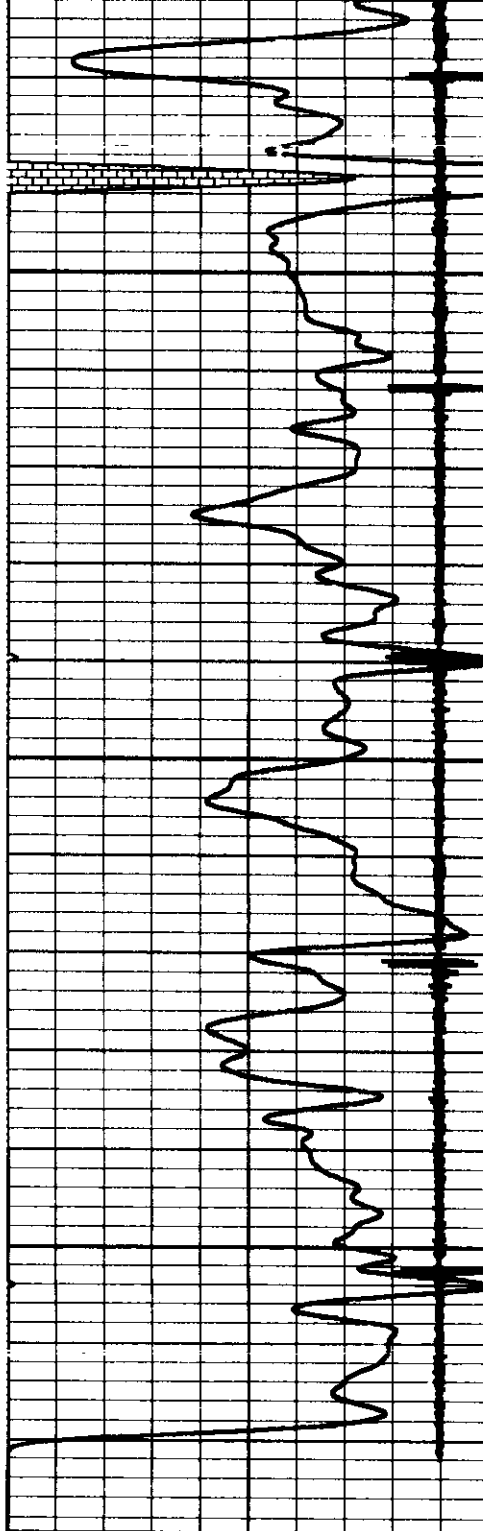
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1100

1150

1200

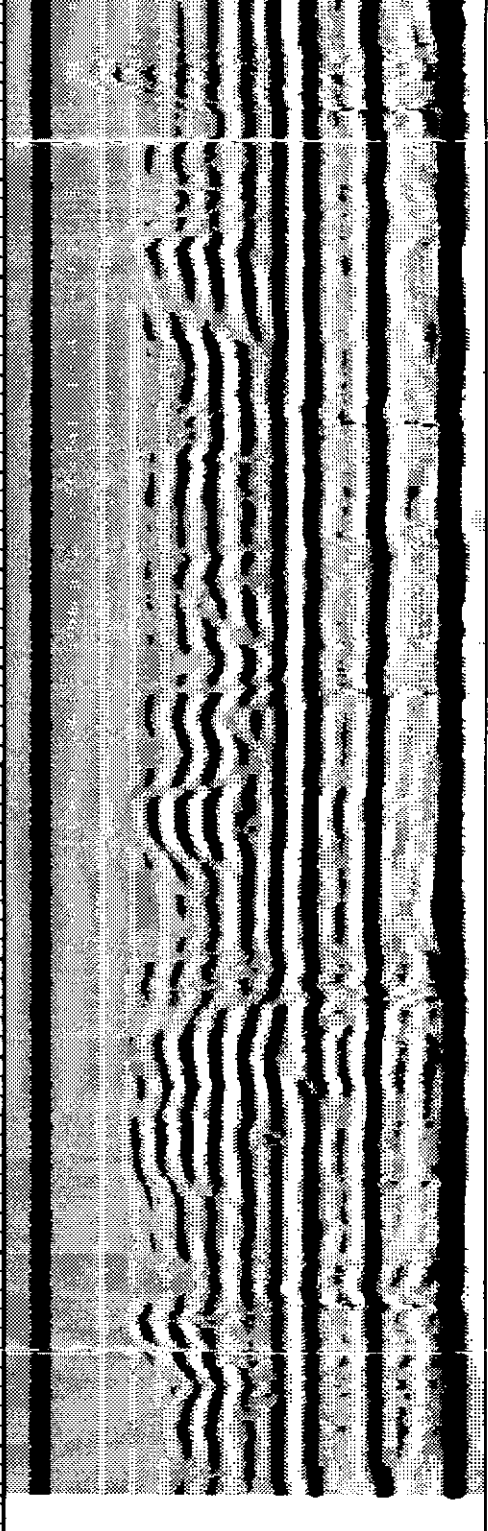
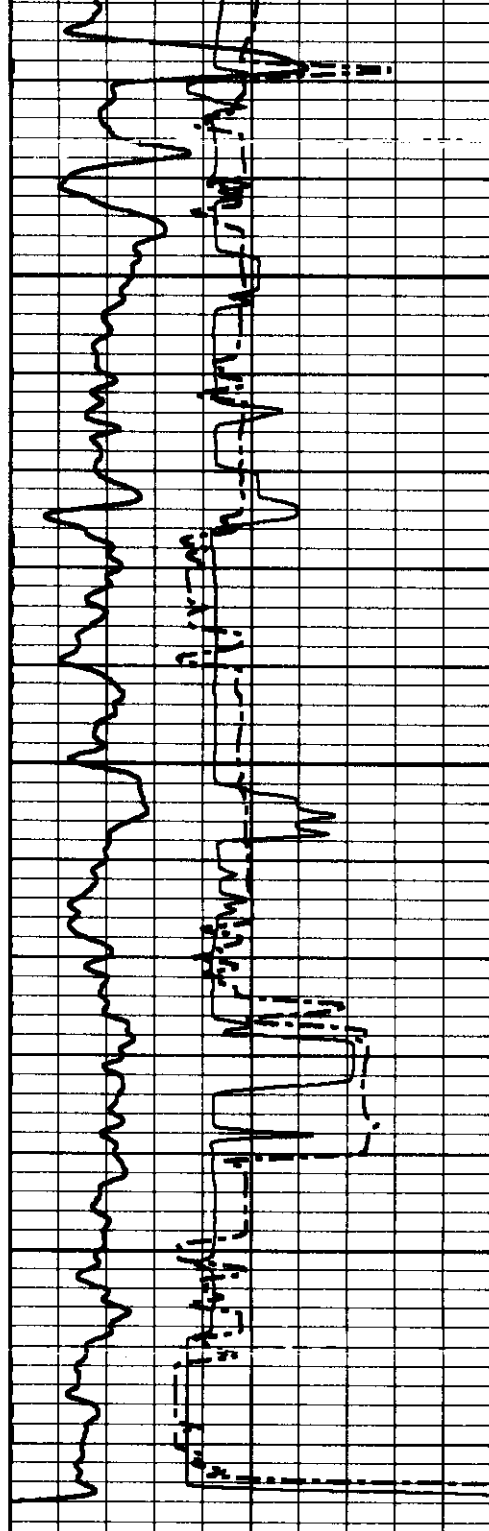




1250

1300

1350



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150	gr (cps)	300

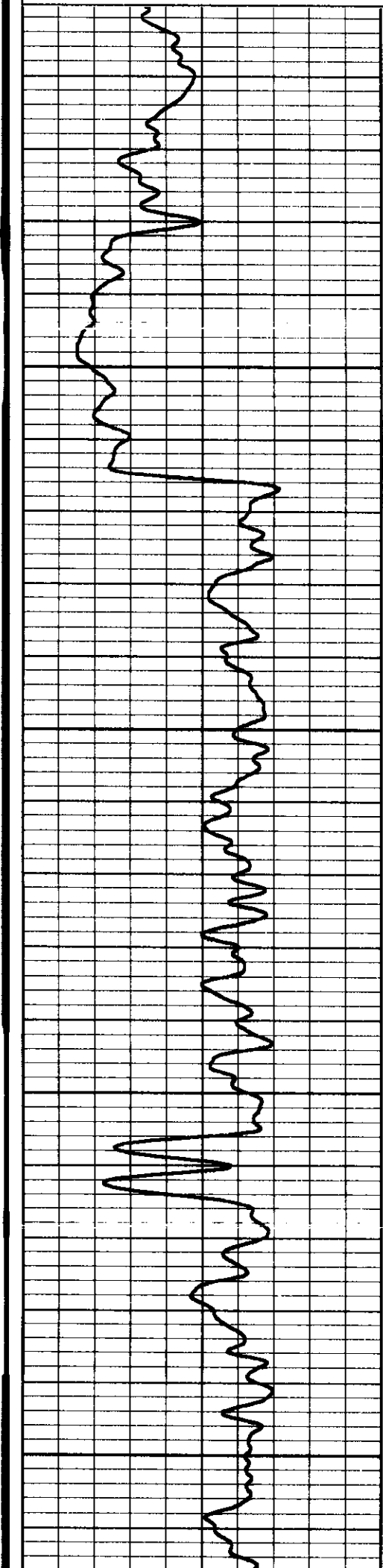
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1100	TT3FT (usec)	200
1800	TT5FT (usec)	200
100	NEU	1100

250	VDL	1200
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 Charted by: Depth in Feet scaled 1:240

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150	gr (cps)	300

100	NEU	1100
9	CCL	-1

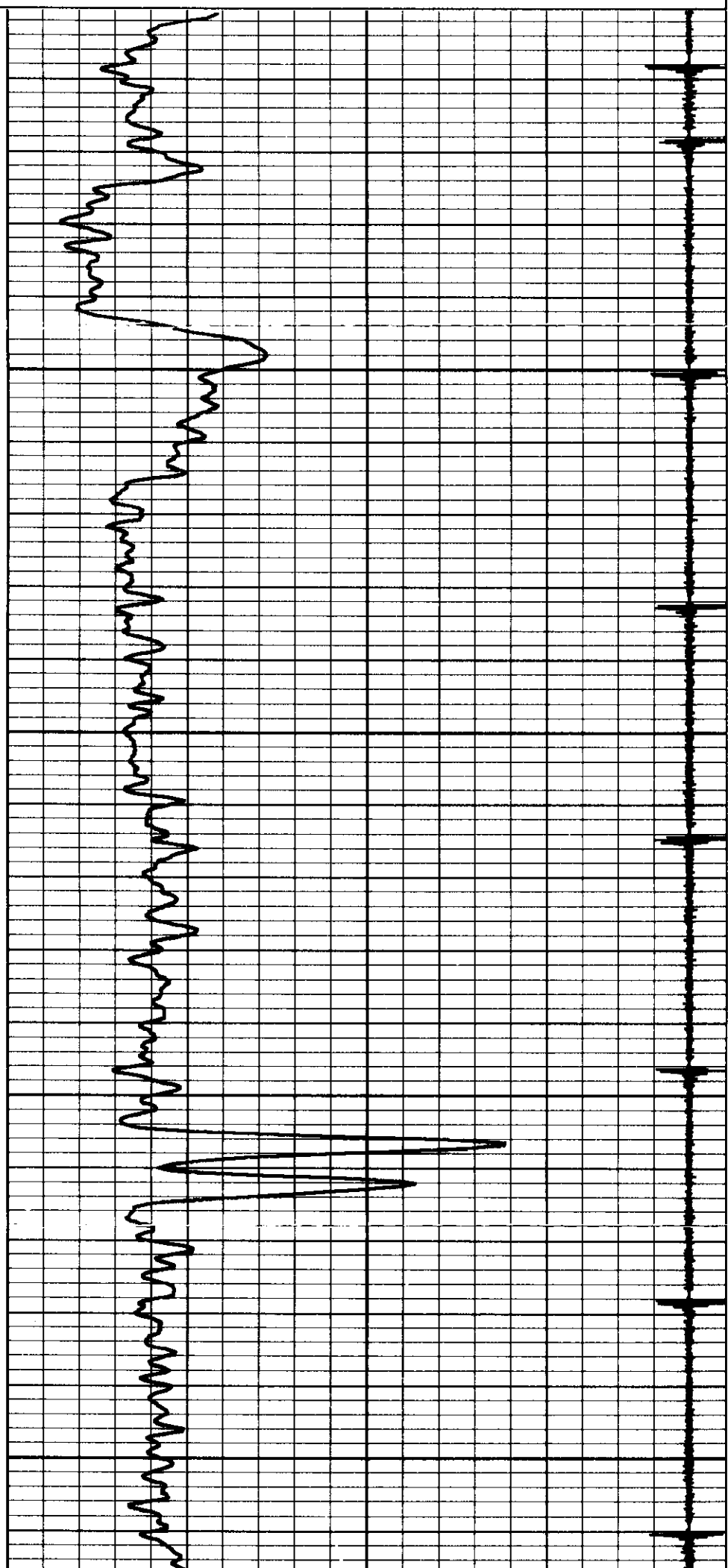


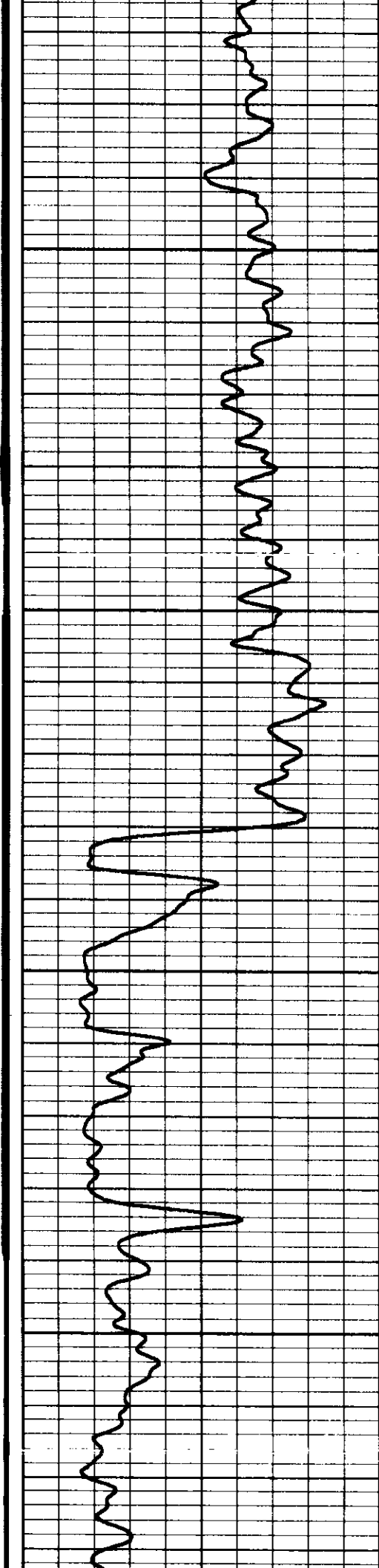
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150

200



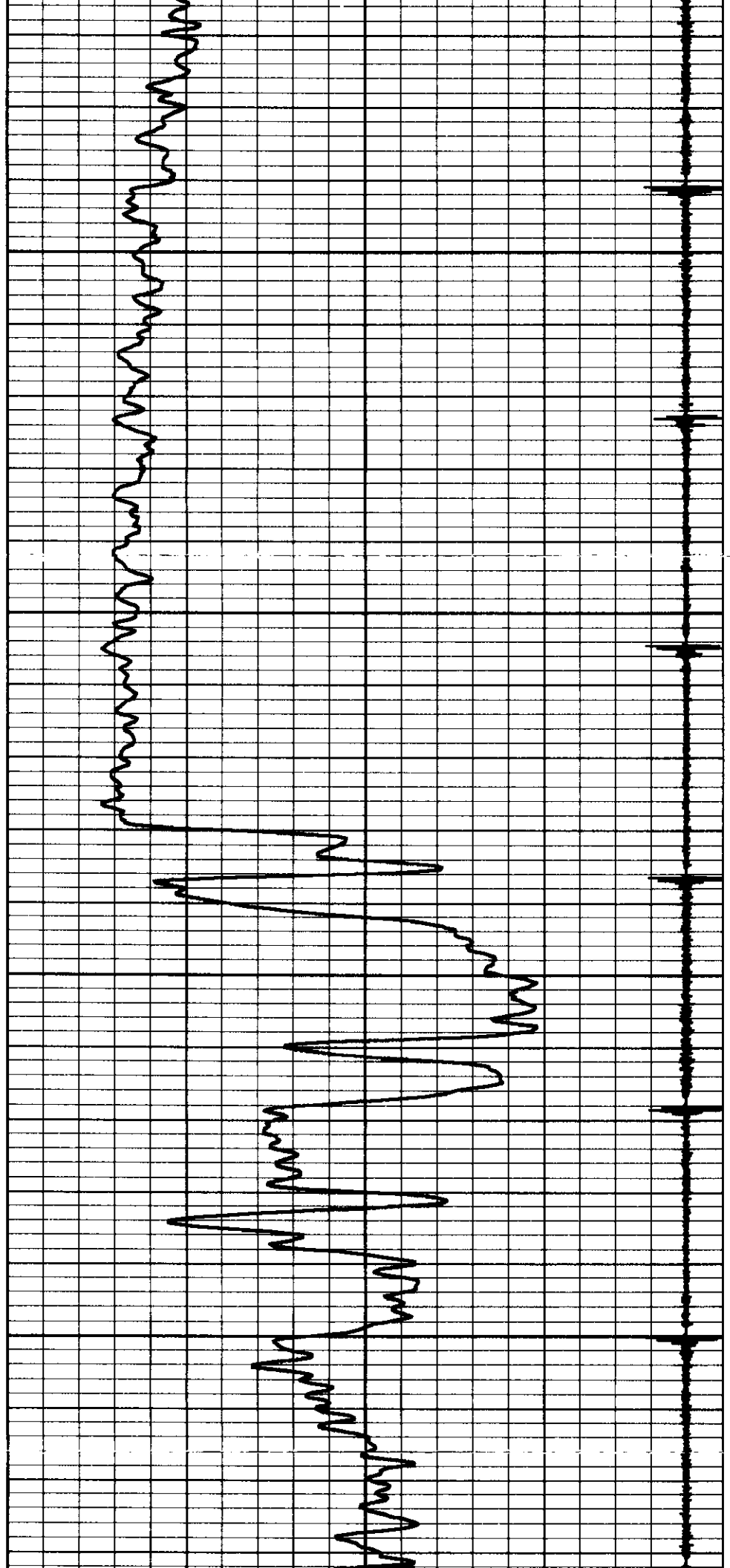


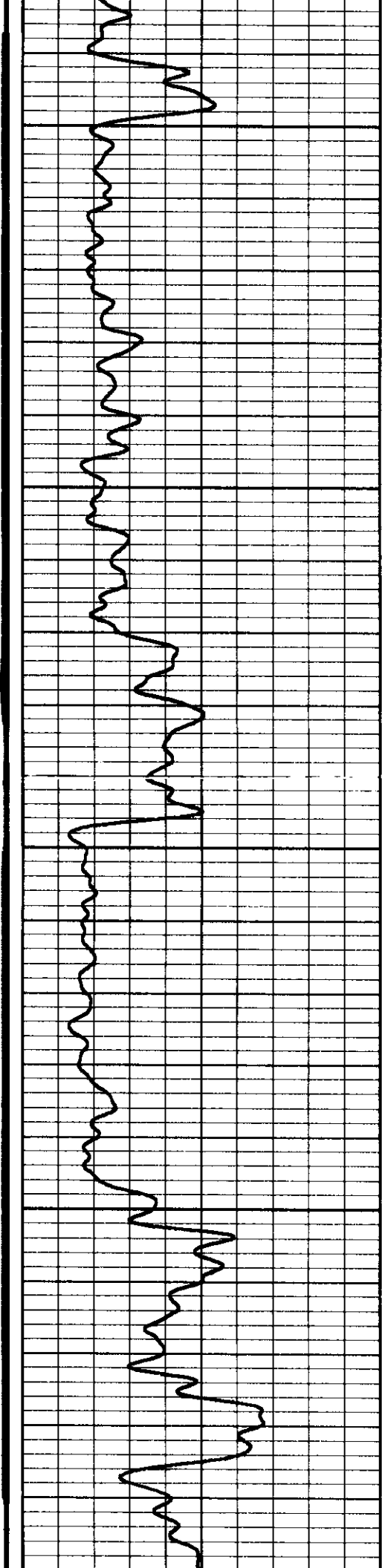
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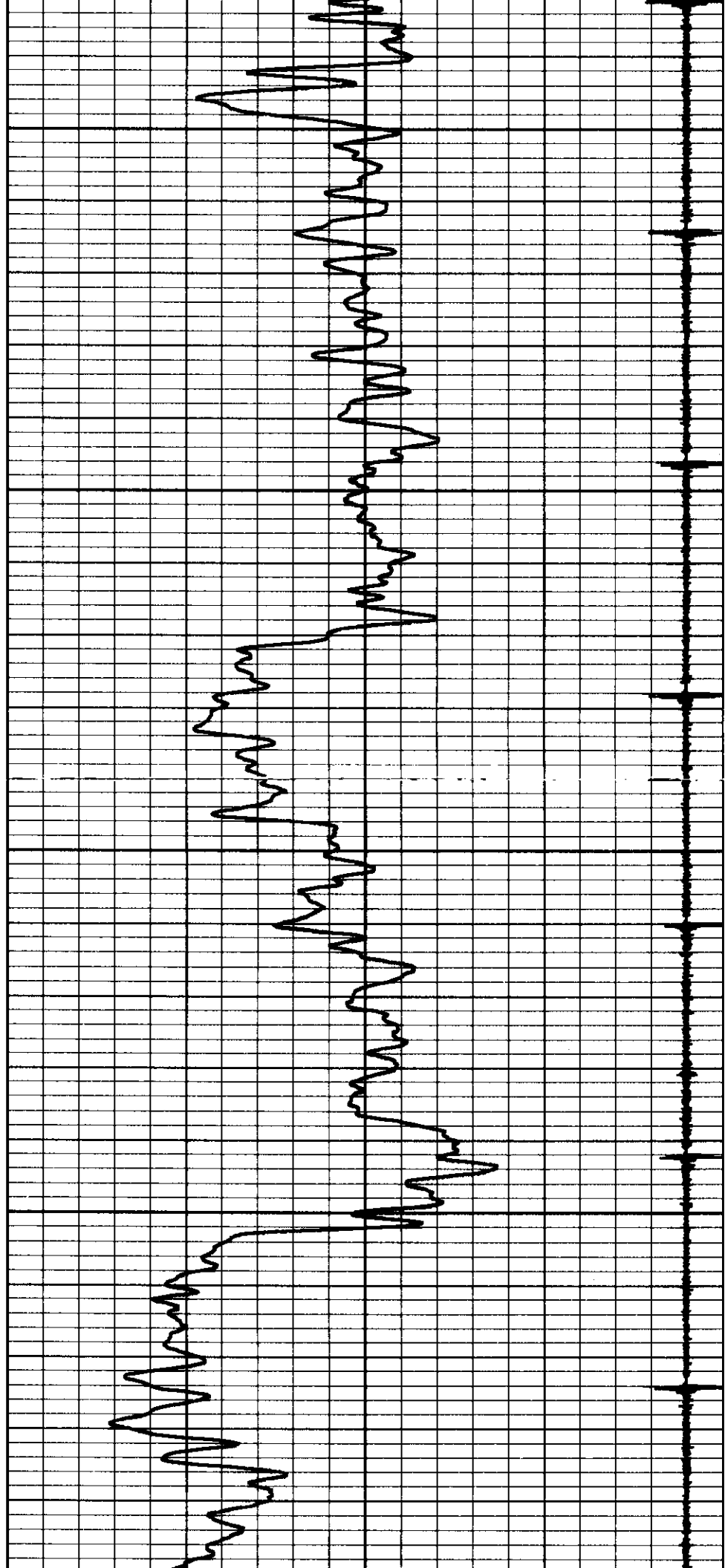
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600

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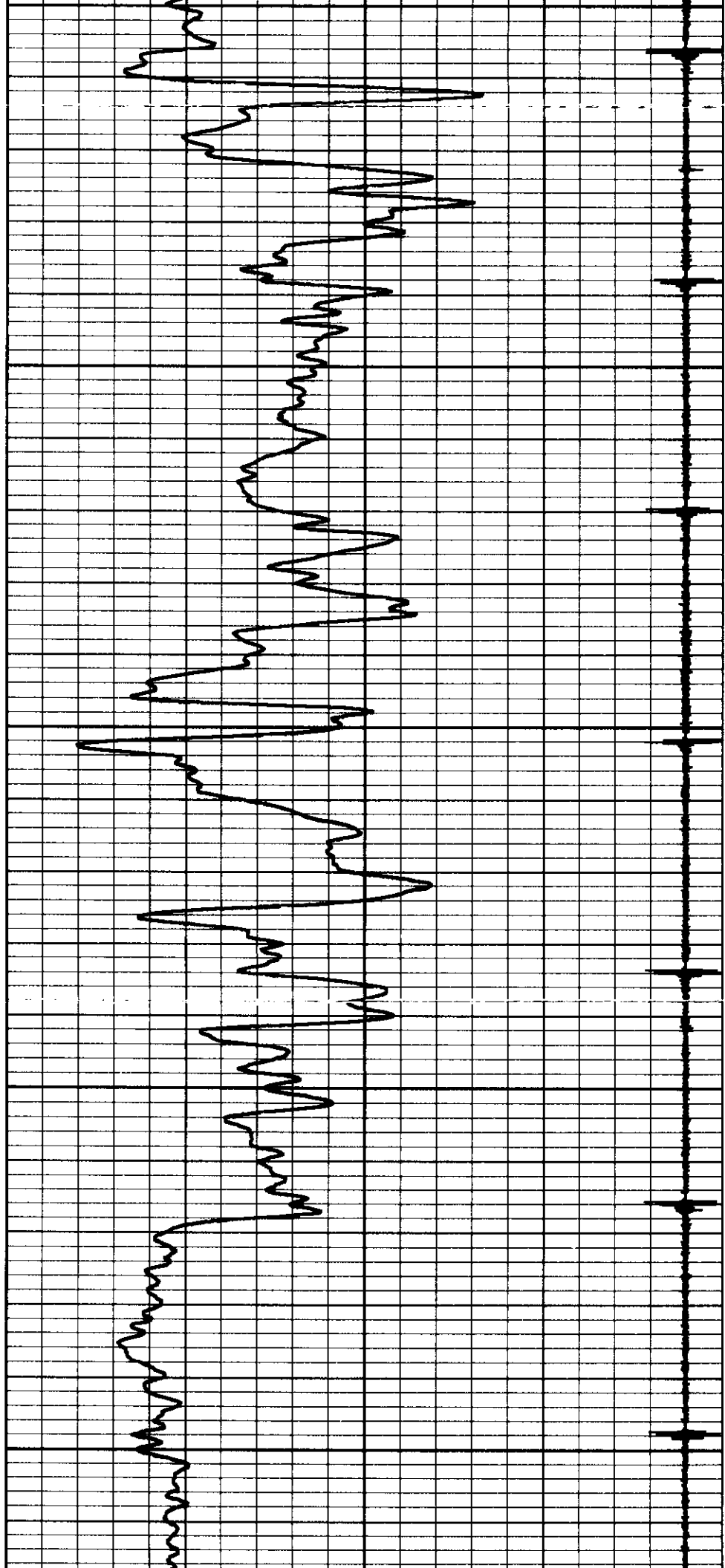
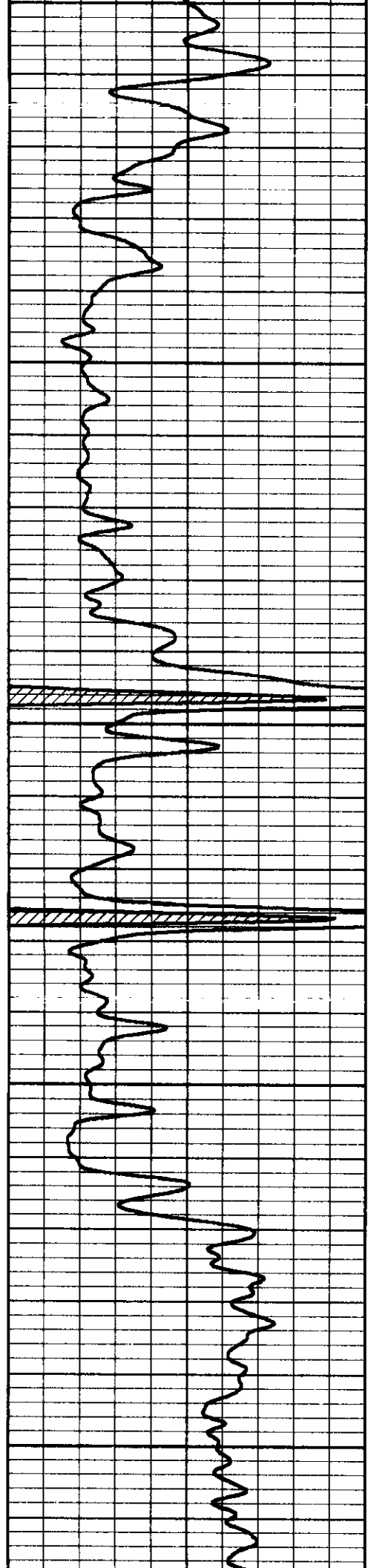
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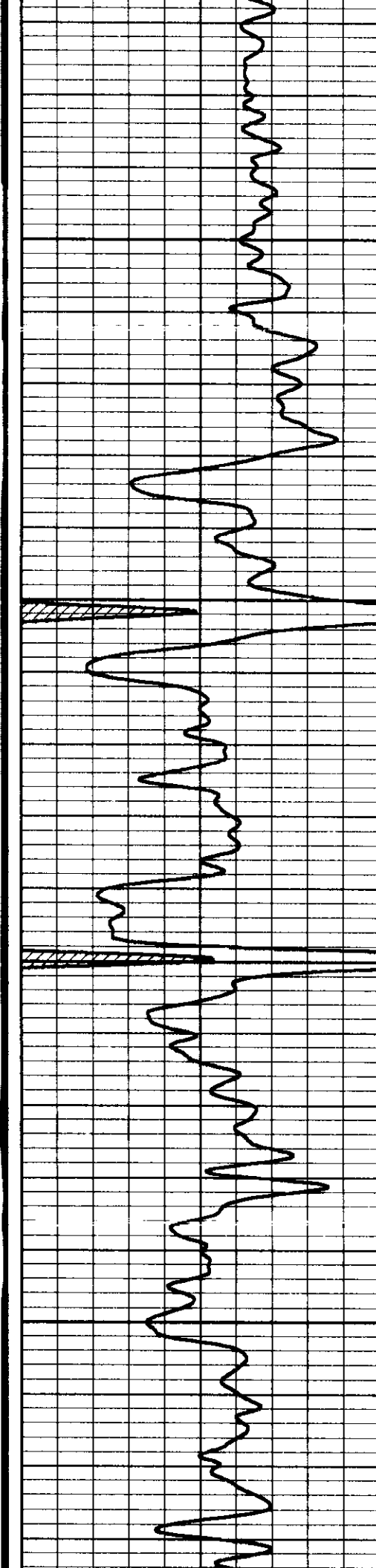
700

750

800

850



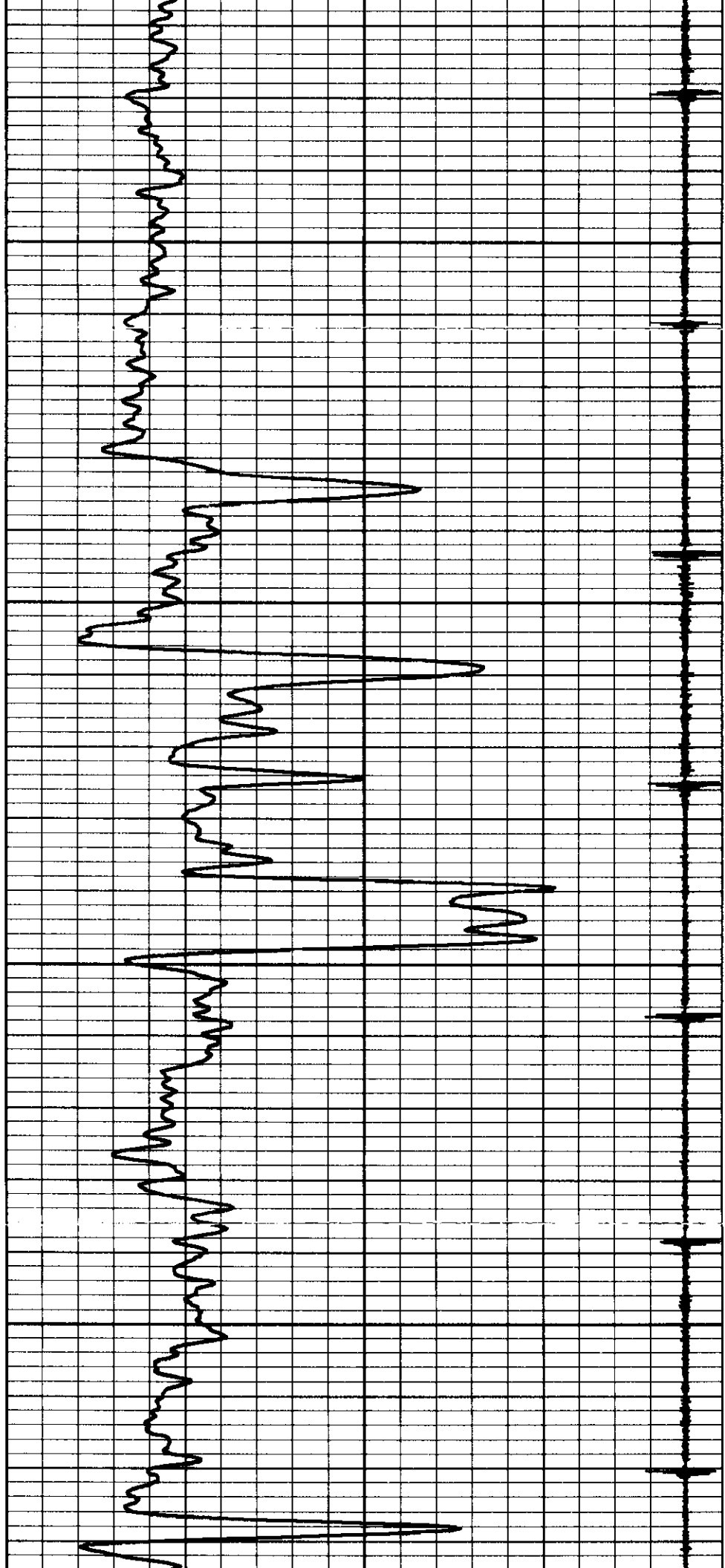


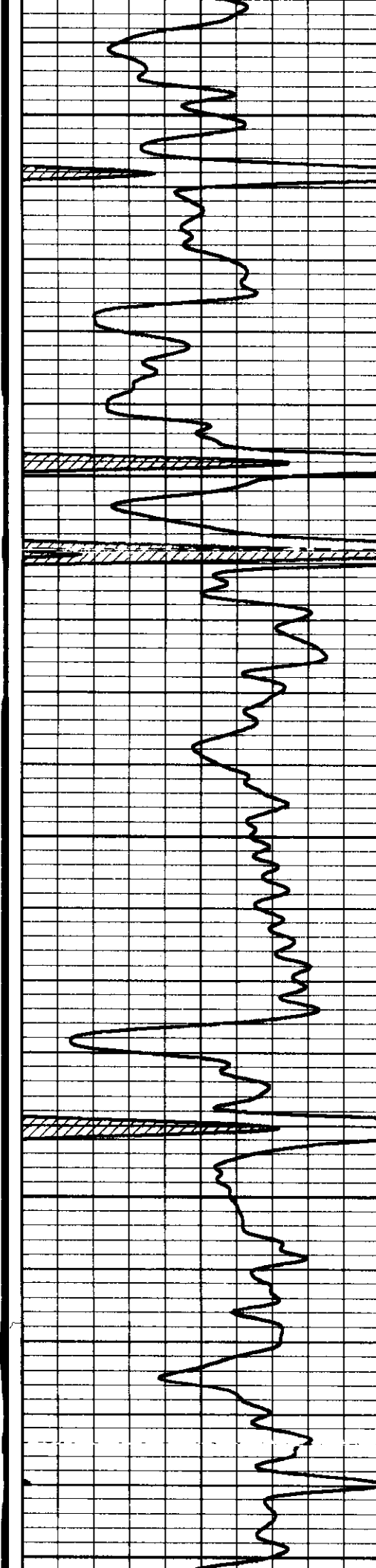
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1050





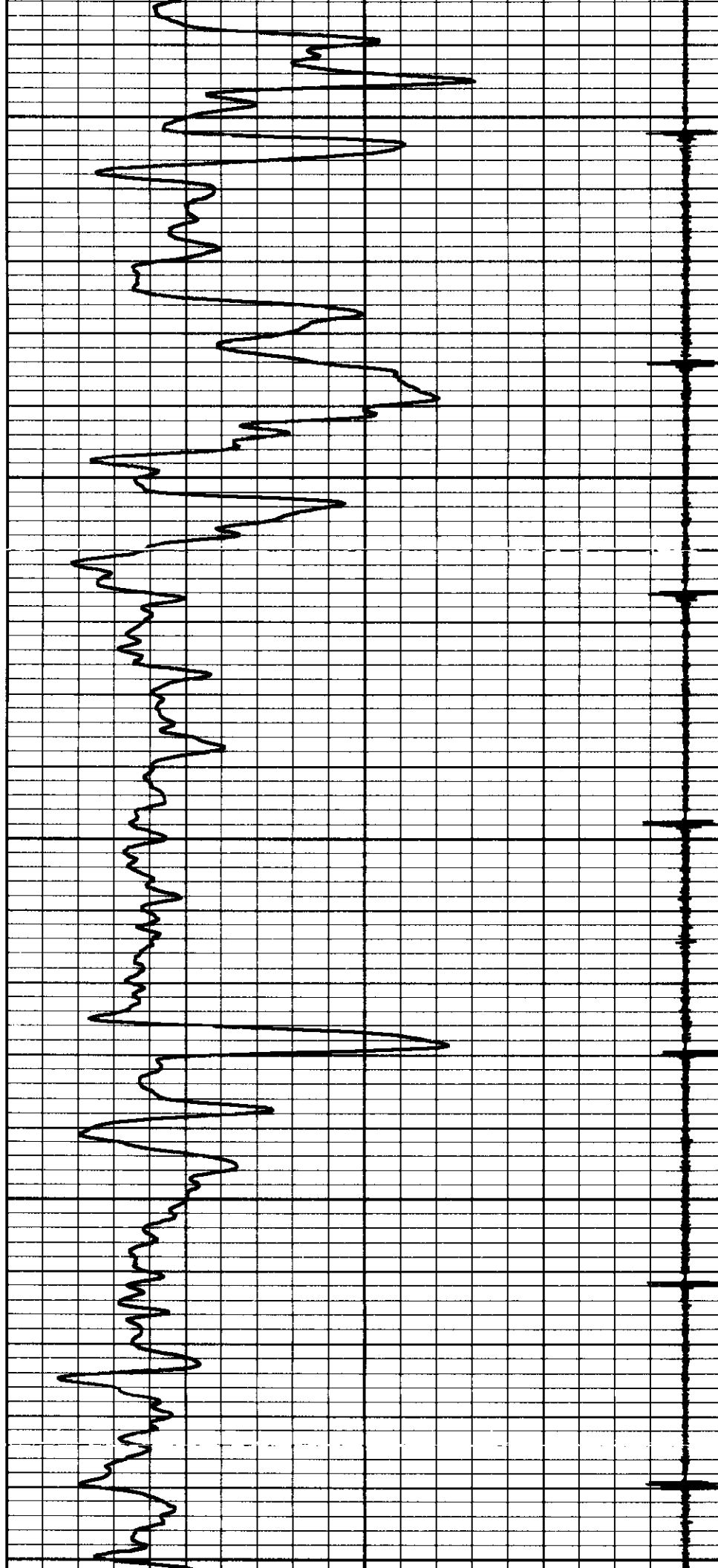
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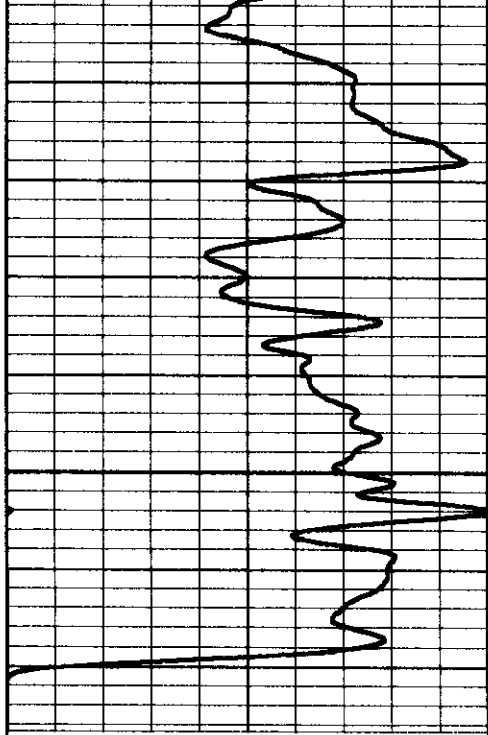
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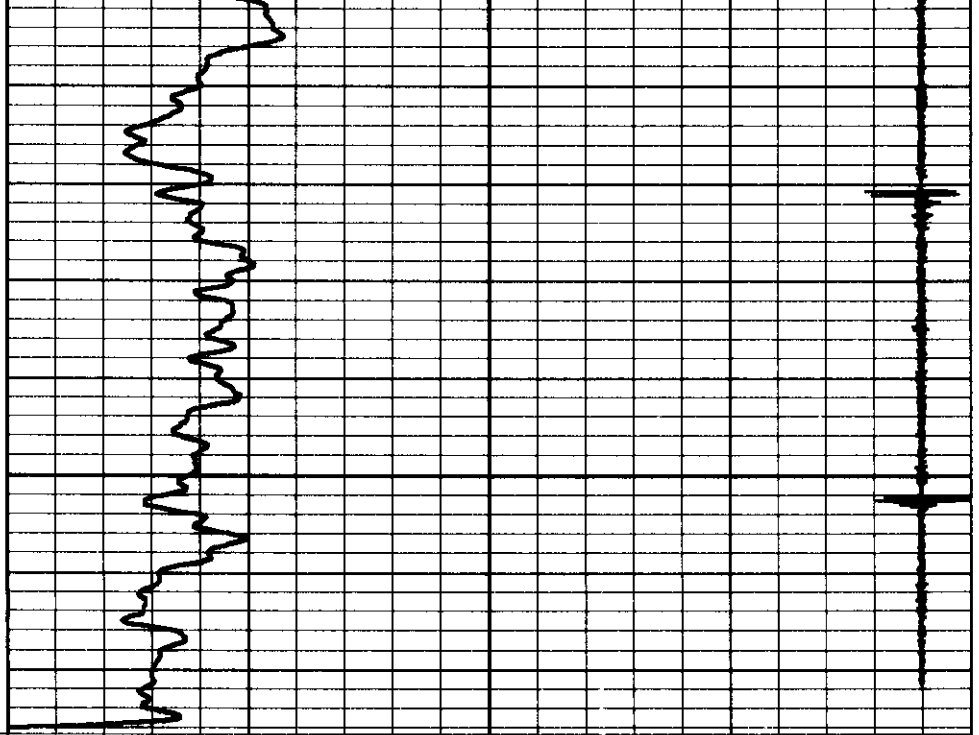
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1300





1350



0	GR (cps)	150
150	gr (cps)	300

100	NEU	1100
9	CCL	-1



Company	DAYSTAR PETROLEUM, INC.
Well	EAGLE #10-14
Field	
County	WOODSON SECTION 31 TWP25S RGE 14E
State	KANSAS
Date	5-21-2014

