



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1220269  
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: \_\_\_\_\_

1220269

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)*

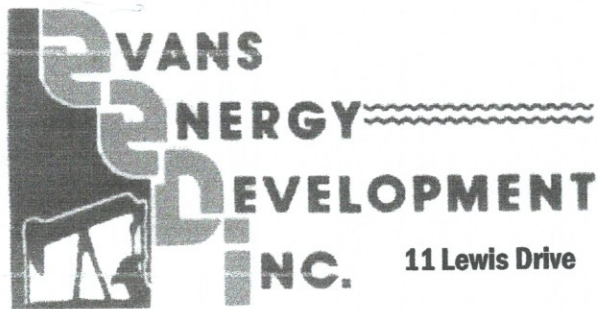
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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> _____					
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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11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling  
Water Wells  
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

**WELL LOG**

Hoehn Oil, LLC

Anderson #29

API #15-059-26,685

June 19 - June 20, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
4	soil & clay	4
8	sandy shale	12
6	shale	18
18	lime	36
90	shale	126
20	lime	146
24	shale	170
4	lime	174
38	shale	212
13	lime	225
17	shale	242
26	lime	268
10	shale	278
21	lime	299
4	shale	303
4	lime	307
2	shale	309
6	lime	315 base of the Kansas City
26	shale	341
2	sand	343 grey
3	silty shale	346
5	broken sand	351 40% green sand 60% shale (gassy)
69	shale	420
1	lime	421
12	sand	433 hard white & green sand (gassy)
32	shale	465
5	lime	470
3	shale	473
6	lime	479
33	shale	512
1	coal	513
5	shale	518
9	lime	527
13	shale	540
3	lime	543 brown, no oil
1	shale	544 black
1	coal	545
7	shale	552
3	lime	555
9	shale	564

2	limey sand	566
3	shale	569
2	broken limey sand	571 hard brown limey sand with thin shale seams
1	limey sand	572 brown hard ok oil show
2	limey sand	574 brown lime
3	broken limey sand	577 50% broken hard limey sand 50% shale ok bleeding
1	silty shale	578
1	broken sand	579 60% brown sand 40% green shale ok bleeding
2	oil sand	581 light brown sand good bleeding few very thin silty shale seams
1	broken sand	582 50% brown sand 50% shale ok bleeding
3	broken sand	585 20% brown sand 80% shale light bleeding
2	broken sand	587 60% brown sand 40% shale good bleeding
1	broken sand	588 15% brown sand 85% shale light bleeding
4	silty shale	592
30	shale	622
1	lime & shells	623
7	shale	630
1	lime & shells	631
2	broken sand	633 70% brown sand 30% shale ok bleeding
1	oil sand	634 brown sand ok bleeding very thin shale lamination
2	broken sand	636 90% brown sand 10% shale laminations light bleeding
1	broken sand	637 50% brown sand 50% shale ok bleeding
8	shale	645
1	oil sand	646 light brown sand good bleeding (gassy)
0.5	broken sand	646.5 70% light brown sand with grey shale light show
0.5	oil sand	647 light brown sand good bleeding
1	broken sand	648 90% light brown sand 10% laminated shale good bleeding (gassy)
2	oil sand	650 light brown sand good bleeding (gassy)
1	broken sand	651 40% brown sand 60% shale ok bleeding
16	shale	667
1	coal	668
12	shale	680
2	lime	682
9	shale	691
1	lime	692
8	shale	700 TD

Drilled a 9 7/8" hole to 21.2'  
Drilled a 5 5/8" hole to 700'

Set 21.2' of 7" surface casing with 5 sacks of cement.

Set 691' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
645		44
646		52
647		53
648		53
649		40
650		49
651		45
652		48
653		44
654		47
655		49
656		47
657		47
658		47
659		49
660		45
661		43
662		42
663		45
664		42



269030

TICKET NUMBER 47346

LOCATION Ottawa, KS

FOREMAN Cory Kennedy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT  
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6/20/14	3602	Anderson # 29	NW 6	17	21	FR
CUSTOMER <u>Hoehn Oil</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>40971 W. 247th</u>			<u>729</u>	<u>Casken</u>	<input checked="" type="checkbox"/>	<u>Safety Meeting</u>
CITY <u>Wellsville</u>	STATE <u>KS</u>	ZIP CODE <u>66092</u>	<u>666</u>	<u>Kei Car</u>	<input checked="" type="checkbox"/>	
			<u>548</u>	<u>Breman</u>	<input checked="" type="checkbox"/>	
			<u>369</u>	<u>Mikhaa</u>	<input checked="" type="checkbox"/>	
JOB TYPE <u>longstring</u>	HOLE SIZE <u>5 5/8"</u>	HOLE DEPTH <u>701'</u>	CASING SIZE & WEIGHT <u>2 7/8" EUE</u>			
CASING DEPTH <u>691'</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
DISPLACEMENT <u>4.00 bbls</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>5 bpm</u>			

REMARKS: held safety meetings, established circulation, mixed & pumped 200# Premium Gel followed by 10 bbls fresh water, mixed & pumped 101 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.00 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

BH

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00 ✓
5406	<del>5 mi</del>	MILEAGE		21.00 ✓
5402	691'	Casing footage		368.00 ✓
5407	minimum	for mileage		150.00 ✓
5502C	1.5 hrs	EO Vac		
1124	101 sks	50/50 Pozmix cement	11661.50 ✓	
1118B	370 #	Premium Gel	81.40 ✓	
		materials	1242.90	
		- 30%	372.87 ✓	
		subtotal		870.03 ✓
4402	1	2 1/2" rubber plug		29.50 ✓
			2993.74	
		7.65%	SALES TAX	68.82 ✓
			ESTIMATED TOTAL	2592.35 ✓

completed

Ravin 3737

AUTHORIZATION Jim Hoehn

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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.