

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1220874

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:			SecTwpS. R 🔲 East 🗌 West			
Address 2:			Feet from North / South Line of Section			
City: S	tate: Z	ip:+	Fe	eet from East / W	lest Line of Section	
Contact Person:			Footages Calculated from	Nearest Outside Section Cor	rner:	
Phone: ()			□ NE □ NW	V □SE □SW		
CONTRACTOR: License #			GPS Location: Lat:	, Long:		
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxxx)	
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84		
Purchaser:			County:			
Designate Type of Completion:			Lease Name:	Well	l #:	
	e-Entry	Workover	Field Name:			
	_	_	Producing Formation:			
☐ Oil ☐ WSW ☐ D&A	☐ SWD	□ SIOW □ SIGW	Elevation: Ground:	Kelly Bushing: _		
OG	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total Dep	oth:	
CM (Coal Bed Methane)	_ dow	тетір. дай.	Amount of Surface Pipe Se	et and Cemented at:	Feet	
Cathodic Other (Con	re, Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes N	No	
If Workover/Re-entry: Old Well In			If yes, show depth set:		Feet	
Operator:			If Alternate II completion, of	cement circulated from:		
Well Name:			feet depth to:	w/	sx cmt.	
Original Comp. Date:	Original T	otal Depth:				
Deepening Re-perf.	Conv. to E	NHR Conv. to SWD	Drilling Fluid Managemer	nt Plan		
☐ Plug Back	Conv. to G	SW Conv. to Producer	(Data must be collected from t			
Commingled	Dormit #		Chloride content:	ppm Fluid volume: _	bbls	
Dual Completion			Dewatering method used:			
SWD			Location of fluid disposal if	i hauled offsite:		
☐ ENHR			Loodiion of haid diopodal in	nation office.		
GSW	Permit #:		Operator Name:			
_ _				License #:		
Spud Date or Date Re	ached 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 II III Approved by: Date:	



Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow	ing and shut-in pressu	ormations penetrated. Eures, whether shut-in preith final chart(s). Attach	essure reached stati	c level, hydrosta	atic pressures, bott		
		tain Geophysical Data a r newer AND an image		gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth an		Sample
Samples Sent to Geol	logical Survey	☐ Yes ☐ No	Nam	е		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING	RECORD Ne	w 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 / SQL	JEEZE RECORD			
Purpose: Perforate Protect Casing Plug Back TD	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
Plug Off Zone							
Does the volume of the to		n this well? aulic fracturing treatment ex submitted to the chemical (_	Yes ? Yes Yes	No (If No, ski	p questions 2 ar p question 3) out Page Three	
Shots Per Foot	PERFORATIO	N RECORD - Bridge Plug	s Set/Type		cture, Shot, Cement		
	Specify Fo	ootage of Each Interval Per	forated	(A	mount and Kind of Ma	terial Used)	Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or ENH	IR. Producing Meth		Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf Wate	er B	bls. G	as-Oil Ratio	Gravity
DISPOSITIO	ON OF GAS:	Open Hole	METHOD OF COMPLE Perf. Dually (Submit)	Comp. Cor	mmingled	PRODUCTIO	ON INTERVAL:
(If vented, Sub	omit ACO-18.)	Other (Specify)	(Submit)	100-3) (SUB	omit ACO-4)		

Form	ACO1 - Well Completion
Operator	Bowman, William F. dba The Bill Bowman Oil Company
Well Name	Simminger SW 1
Doc ID	1220874

All Electric Logs Run

Dual Compensated Porosity Log
Dual Induction Log
Microresistivity Log
Computer Processed Interpretation

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Tops

Name	Тор	Datum
Anhydrite	2724	+230
Base of Anhydrite	2768	+186
Neva	3295	-341
Foraker	3422	-468
Tarkio	3511	-557
Topeka	3700	-755
Heebner	3828	-876
Lansing	3857	-903
Base of Kansas City	4130	-1176
Cherokee	4350	-1396
Arbuckle	4434	-1480
RTD	4458	

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Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
12	3919' - 3922'	1000 gals 15% MCA Acid	4093' - 4097'
12	3945' - 3948'	1000 gals 15% MCA Acid	4045' - 4048'
12	4016' - 4019'	250 gals 15% MCA Acid & 20 gals SDA- 95	4016' - 4019'
12	4045' - 4048'	1000 gals 15% NEFE Acid	3945' - 3948'
16	4093' - 4097'	1000 gals 15% MCA Acid	3945' - 3948'
		1000 gals 20% SDA- 95 Acid	3919' - 3922'
		250 gals 15% MCA Acid	3919' - 3922'

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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	261	Class A Common	225	3% CC, 2% Gel
Production	7.875	5.5	14	4431	ASC	150	10% Salt, 2% Gel, 6#'s Gilsonite

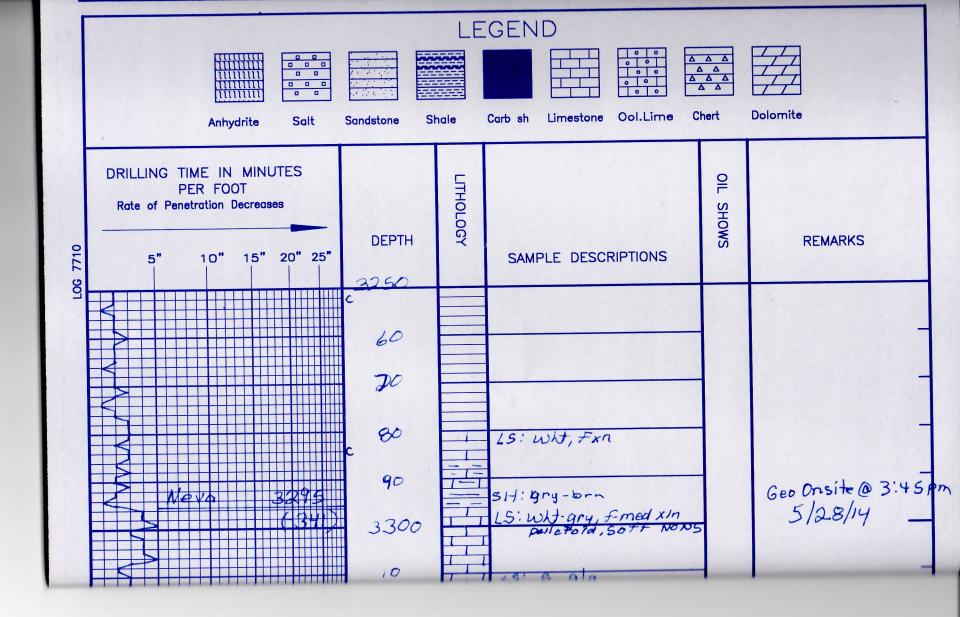
GEOLOGIC REPORT LOG

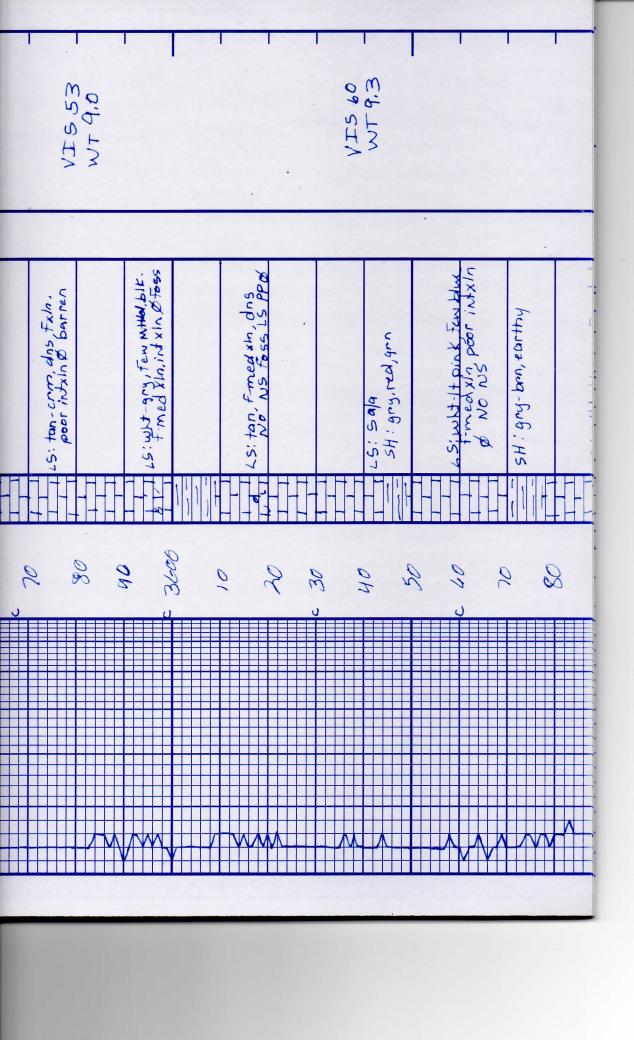
API: 15-153-21005-00-00

COMPANY The Bill Bowl Oil Company				
WELL Simminger SW	+1		9	
FIELD Wicke				
LOCATION		PRODUCTION		
SEC. 17 TWP. 15 RG	E. 32w	ELEVATION	KB_2	1954
COUNTY Rawlins			GL_2	949
STATE Kansas		Drilling Measured F		
31/112		Samples Saved From .		
annua II RII Banna	101100	Drilling Time From . Samples Examined Fr		
OPERATOR The Bill Bouman CONTRACTOR LUbite Knight	DOLATIC	Geological Supervis		
COMM: 5:24-2014 COMP: 5-3	1-2014	Wellsite Geologist .	Roger L.	Moses
, CASING RECORD	,	Electrical Surveys	Porosi	4
SURF: 8 5/8 26/ PROD: 5 1/2	@ 4431	Dual In		
TOTAL DEPTH DRILLERS: 4458'		Micro		000.000
TOTAL DEPTH LOG 4456		FIGHEE	Energy S	Diles
FORMATION TOPS	AND STR	JCTURAL POS	SITION	
FORMATION	SAMPLE TOP	ELECTRIC LOC	SUB-SEA DATUM	STRUCTURAL
Anhydrite	2724 (+23		(+230)	
Base/Anhydrite	2768 (+18	6 2766	(+188)	
Neva	3295 (-34	1 3292	(-338)	N/A
Foraker	3422 (-46	8 3416	(-462)	+ 12
Tarkio	3511(-557	1 3507	(-553)	+ 1
Heebner	3/00(-/30	3709	(-/53) (-8/8)	+ 6
Lansina	38.57(-90	3 3859	(-905)	+7
Base Kansas City	4130(-117		(-1172)	+.7
Cherokee '	4350(-139	6 4346	(-1392)	N/A
Arbuckle	4434648	0) 4428	(-1474)	N/A
DEFENDE WELL FOR OTHER	IDE ()	0.1		L
REFERENCE WELL FOR STRUCTU H.J. Wicke #1, SE-SU	JKE Hrg	354 Petrol	eum Com	pany
			-32w	
Rawlins County	Kansa	5		

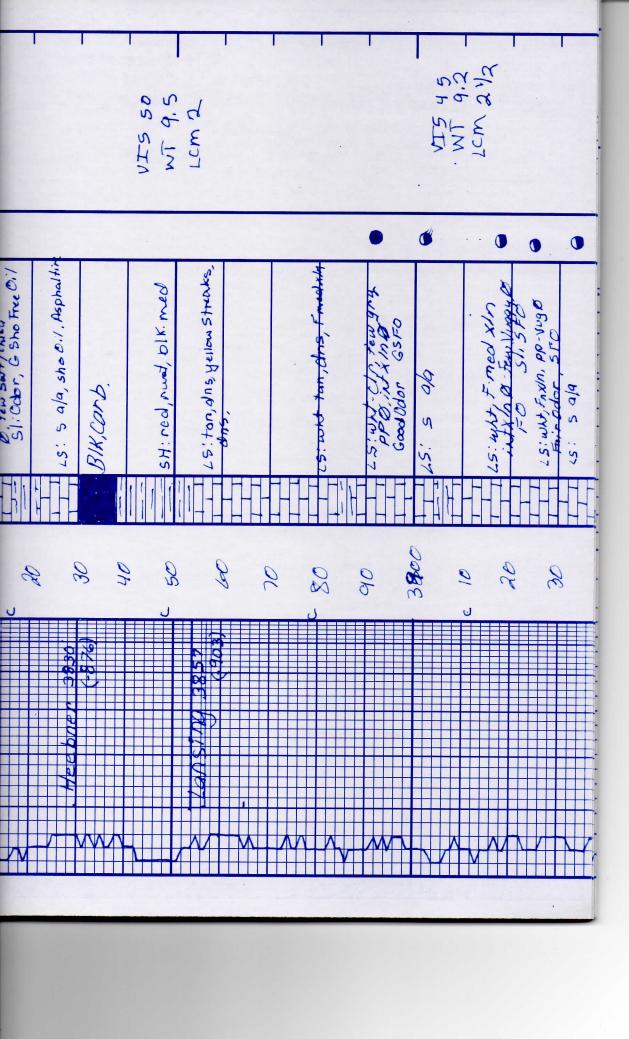
DAILY	PENETRATION					BITR	ECORD		
DATE	DEPTH		NO	SIZE	MAKE	TYPE	DEPTH OUT	FEET	HOUR
5-24-14	Spudded		1	12/4	RR		262	26	2' 34
5-25-14	262'		2	7 7/8	D5 3		2430	2168	3' 253
5-26-14	1300'		3	77/8			3504	1074	1 31 4
5-27-14	2470'		4	7 7/8	HEZI	137037	4458	954	403
5-28-14	3295								
5-29-14	3725'								
5-30-14	4245'								
5-31-14	Loggina								
	20]								
FORMATION	INTERVAL			DE	SCRIPTION OF	SHOW		LOG A	NALYSIS I S W
									SW
		1							

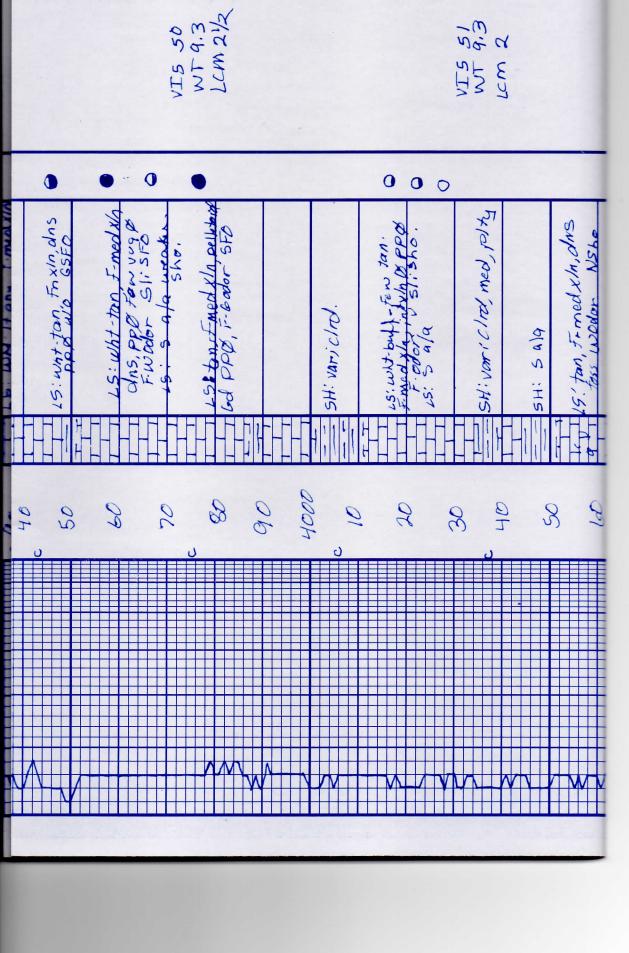
				DRILL S	TEM TES	515	
o.	Interval	IFP/Time	ISIP/Time	FFP/Time	FSIP/Time	ІНН-ЕНН	RECOVERY
		NO	DS	T'S	RAI		
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	1 2 3 3 3 3 3 3 3 3 3 3			MMM V	

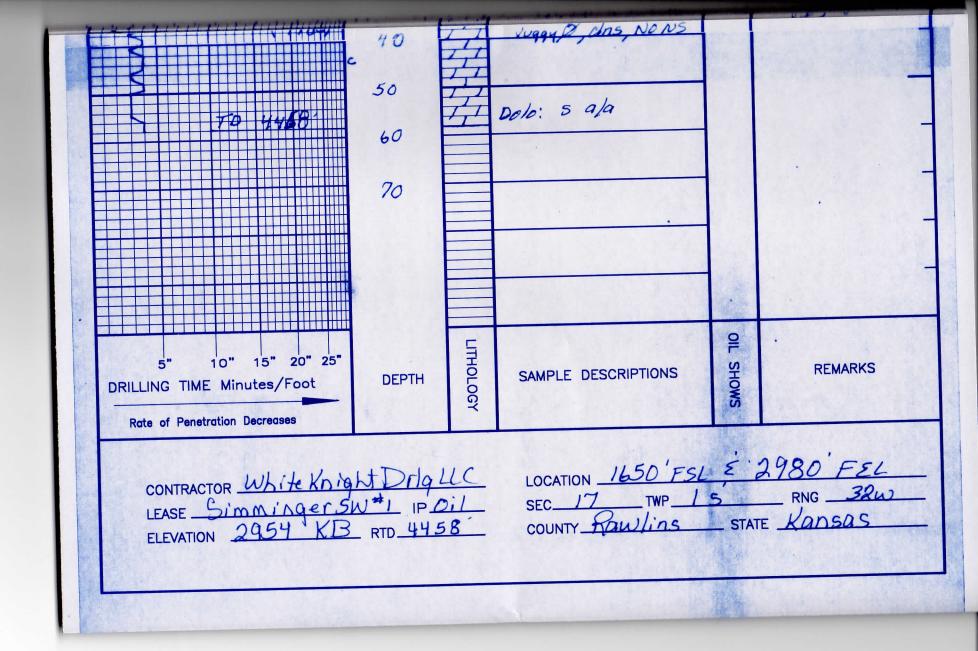




20	VFS 55 WF 9.4 LCM 21/2	VIS 45	1.7 mg 1.	175 50
	2H: gry-red, Med, P174	15:WH-but F-med xln 18xxln & ppd 651-0 15:WH-17gry, dns, 5xln	SH: dkgry, rd, br, med plty plty LS: wht foxfor dos LS: wht foxfor dos Docor indxin to No NS	SH. vari clrd, med blky
	J		0	
			8	

WT 9.4	-		UTS 50	WT 4.5					
LS: WHY - I thing F- mad	15: wht tan, tx/n tan A	1 (S: Wht, fxin, poor intah) (B) few chat ton	LS: ton-buff fmed xIn	1 LS; Wht-yen, Formed x In.	= SH: gry- Drn, med	15: WH-441) FXIN, ONG	5H: blk Carb.	= SH: red, rust-gry DIKy	Therming No NS
8 3	4200	ó 8	8	3 ,	25 29	2	8	26	002
	V	VV				WW			

SH: S 4/a LS: wit-tan, f-med xin SH: gry-red, med sorta SH: gry-red, med xin. SH: gry-red, med xin. SH: gry-brn SH: gry-brn SH: gry-brn SH: gry-brn	US: WIT, F-med XIn barron Dolo: WAT - TON, MEDIXIN,
	15: WIT, F-med XIn barren Dolo: WAT - FON, MEDIXI
8 8 9 8 9 2 8 9 7 2 8	





268437

TICKET NUMBER_	46937
	aklay Ks
FOREMAN	Daklay Ks

FIELD TICKET & TREATMENT REPORT

0-431-9210 or	800-467-8676	·		CEMENT				COLINITY
	CUSTOMER#	WELL	NAME & NU		SECTION	TOWNSHIP	RANGE	COUNTY
3-24-14	3395	Simmi	Moer	5W#1	17	13	32	Rodins
ISTOMER	0	-10	· ·	hudell	TRUCK#	DRIVER	TRUCK#	DRIVER
ISILL ILING ADDRES	BOWMAN	1 011 C	.0	1/42	731	Cordy D.		
ILING ADDRES				north to		JOFF K		
Y		STATE	ZIP CODE	- Rel AA	20.1	1 2 1 1 1 1		
		prostut -		26+027 - 1H-3/4W				
B TYPE SU	· Fara	HOLE SIZE	1214	HOLE DEPTH		CASING SIZE & W	/EIGHT <u>85/</u>	3-23#
SING DEPTH_	1	DRILL PIPE		TUBING			OTHER	-1-
SING DEPTH_ URRY WEIGHT		SLURRY VOL_			sk	CEMENT LEFT in	CO-CS-CS-CS-CS-CS-CS-CS-CS-CS-CS-CS-CS-CS-	-20'
	1-1/1	DIODI ACEMENI	T DEI	MIX PSI		RATE_5 B	YLL	11
MARKS: 5		.4	1	on Whit	e Knight	- Dela C	we on be	ttom
MIXED	255 -	sks com.	3% CC	-2% Col.	Displac	0 15 14BBI	150	
				7		Thonk >	lou	
						Waltt	ered	Т
ACCOUNT	QUANIT	Y or UNITS		DESCRIPTION C	of SERVICES or P	RODUCT	UNIT PRICE	TOTAL
CODE 54015	,		PUMP CH	ARGE			1,150,00	1,15000
54013 5406	60)	MILEAGE				5-25	31500
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11183	<u> </u>	36 #	The second secon	Honito			121	114 40
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						WVI		7 4473
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10 July 1 40			+		ess 10%	O DISC		1.716
III III			4				SALES TAX	347.45
							ESTIMATED	
avin 3737			~				TOTAL	7063,44
	-	.//	1				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.

ONLY INPAID ON OR BEFORE
Lun 30, 2014

ALLIED OIL & GAS SERVICES, LLC 063329

Federal Tax I.D. # 20-8651475

REMITTO P.O. BOX 93999	2	SER	VICE POINT:	
SOUTHLAKE, TEXAS 76092			Oakle	K.
DATE 5/3//04 SEC TWP. RANGE	CALLED OUT	ON LOCATION	JOB START	TOD ENTIELL
DATE 5/3//64 17 1 32	0.10000	ON EOCHION	200	JOB FINISH
SIMMINGER WELL #5W / LOCATION / w/2//	. 0 11	1-7-11	COUNTY,	STATE
The state of the s	NONFO	25 TO AA	hess mo	
OLD OR NEW (Circle one) 2E / N U	atrice			TUDE OFS
CONTRACTOR White Knight	N. Committee	_	TT To print to	
	OWNER	ane		
Tal-	~~~			
V/.	CEMENT	.150.4		
001111 1/00		DERED 450 A		Such
	150 130	1000 Salt	20000	6-
1	G-710N	9	0	
PRES. MAX MINIMUM	/ war	Ares non	-95	
MEAS, LINE SHOE JOINT 4/3	DOZINI	FLW 9505	<u> </u>	-2/22
CEMENT LEFT IN CSG. 42	POZMIX GEL		_@`	
PERFS.	CHLORIDE_	Color	_@	
DISPLACEMENT BOTHON 40 Had 68 Must	"	50 5K	@ 20 30 @ 20 30	2128-00
TOO 67 HO DEQUIPMENT	WERTL	12 001		3013
100 6 / DY OF COLLEGE	-VVIII-	1001	-@58 <u>20</u>	109:00
1 108 108 11 1	Silperit	2 90016	_@ _@ <i>98</i>	02, 20
PUMPTRUCK CEMENTER Pla KIGIT	211001	1 JUUID	@ 10	800
#423-281 HELPER Dees LYGN	Selt	16514	0 3/235	1111 06
BULK TRUCK	11/1/1/1	-10-71	@ @ <i>@</i>	32/
# 393 DRIVER English (TWS)	Flo Seu	8 112	@272	23561
BULK TRUCK	11 Poster	20 786	10 1112	100900
#891 DRIVER AND - INSE	-HANDLING	507:103 CA	Co 211	1746 06
108	MILEAGE	Tarlade 2	19.40970N	5734
REMARKS:	1/1 70	a callana	TOTAL	1111111111
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W40 881 150 68 DAI D. M. W.	and a	SERVI	CE	
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Mix 450 5/ Barn 511 Was I truth	EXTRA FOOT		@ 5 50	(9)
BERGE Pho w/67 BRLHAD Consol	MILEAGE		6520	022 50
Den a 2000- pol Closed This KV	_MANIFOLD	2 2000	@ ,42	3360
12000	Litelphice	e >5 miles	776/	23700
Over Will Country	CAR PROPERTY	7 11900	@ /	330
CHARGE TO: BOWMEN DI	discolar.	Land I	1	0.38 (1.34
307 2	1251	1.4.71.200	1	Luan.19
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Apple		31170	- 011170	CMINN-HUL
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T-, Alli-101 0 C-, C-, 1 77 C	12	ST SILVE !		((0)
To: Allied Oil & Gas Services, LLC.	Bris Wat	i I		395 00
You are hereby requested to rent cementing equipment	(massul	peri 7	@ 57 = @	290
and furnish cementer and helper(s) to assist owner or	evy us	1000	<u> </u>	3//
contractor to do work as is listed. The above work was		161		1921/1
done to satisfaction and supervision of owner agent or			TOTAL	4.27.0
contractor. I have read and understand the "GENERAL	041 50 51 51	ardu E	STATE A CLASS	T THE TO
TERMS AND CONDITIONS" listed on the reverse side.	SALES TAX (If Any)	30	evaluation
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PRINTED NAME / Della	DISCOUNT 2	ard to Al C	IF PAI	D IN 30 DAYS
//		a6,112.31	Malau	
SIGNATURE		de, II dol	111 2 1.	

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