



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1221747  
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: \_\_\_\_\_



1221747

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

<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**OWENS PETROLEUM SERVICES, LLC  
DRILLER'S LOG**

Operator: Red Cloud Kevin Sylla

Lease / Well #: Weber 2-10

API #: 15-207-2769-0000 19-25-16

	Date		Date		Date		Date
Spud/Surface	8-31-10	Drilled to TD	9-7-10	Logged		1" / pump	
Set Surface	8-31-10	Run/Casing	9-22-10	Perforated		Lead Line/Elec	
Spud/Casing	9-01-10	Cemented LS	9-27-10	Frac		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	9 5/8	7"		40'	monarch	20	
Casing:	5 5/8						
Frac:							

Driller's TD:	900 ft	Seat Nipple:	795 ft	Pipe TD:	861 ft	Fluid Volume:	400 bbls
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Surface Bit and Subs: 3.70'  
 Kelly: Top of Groove to Square: 22.60'  
 Footage Above Ground Level: 1 Total

FOOTAGE:                      FORMATION:

Bit and Sub	1.9	top soil - 2	clay
1st Collar	19.9		clay
2nd Collar	20.0	41.8	slate
Joints 20.7'	62.5		shale
	83.2		L 103
	103.9		L -
	124.6	- 133	L 134
	145.3		L
	166.0		L
	186.7		L - 204
	207.4	L 205 - 206	blk shale 216 - 217 L - 228
	228.1	L 234 & shale streaks	
	248.8	L 252 - 253	L 258 - 260
	269.5	L 271 - 272	L 274 - 275
	290.2		L
	310.9		L
	331.6	L - 345	blk shale 345 - 348 L 348 -
	352.3	- 355	L 357
	373.0	L - 384	blk shale 385 - 387 L - 392
	393.7	L 394 -	L 405 L 407
	414.4	L - 420	slate
	435.1		S
	455.8		S
	476.5		S
	497.2		S
	517.9		S
	538.6		S

3 changes

OPERATOR Red Hook

LEASE/WELL# Ueber L-10

	FOOTAGE:	FORMATION:
20	559.3	<del>580</del> S L578
20	580.0	-581 L591-592 L593-594 L596-599
27	600.7	L600-605 L631-
28	621.4	-640 S
28	642.1	L649-650 L657-658
20	662.8	L674-678 cont L689
27	683.5	L712
22	704.2	-709 L709-714 cont 716
28	724.9	L730-732 <del>733-734</del> 734 737 cont
24	745.6	738-739 ad. 740 L763
28	766.3	L 7-
26	787.0	L799-802 802-803 ad. 803-805 750
27	807.7	805-807 heading up 807-809 809-811 mostly shale
28	828.4	S
28	849.1	S
40	869.8	S
41	890.5	S
42	911.2	S
40	931.9	S
41	952.6	S
40	973.3	S
46	994.0	S
47	1014.7	S
48	1035.4	S
48	1056.1	S
50	1076.8	S
Bit change	1097.5	1116
52	1118.2	
53	1138.9	
54	1159.6	
55	1180.3	
56	1201.0	
57	1221.7	
58	1242.4	
59	1263.1	
60	1283.8	
61	1304.5	
62	1325.2	
63	1345.9	
64	1366.6	
65	1387.3	
66	1408.0	
67	1428.7	
68	1449.4	
69	1470.1	
70	1490.8	

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Hooked onto 2 7/8" casing. Established circulation with 1 barrels of water. 3 GEL. 1 METSO, COTTONSEED ahead, blended 105 sacks of OWC cement, dropped rubber plug, and pumped 5 barrels of water

<b>Total</b>	<b>\$2,436.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$2,436.00</b>

**Kepley Well Service, LLC**  
 19245 Ford Road  
 Chanute, KS 66720

<b>Date</b>	<b>Invoice #</b>
9/24/2010	A-45274

### Cement Treatment Report

Red Cloud Exploration Operating LLC  
 ATTN: Kevin Sylla  
 161 St. Andrews Drive, 3rd Floor  
 Lawrence, KS 66047

(x) Landed Plug on Bottom at 700 PSI  
 ( ) Shut in Pressure 700  
 (x) Good Cement Returns  
 ( ) Topped off well with \_\_\_\_\_ sacks  
 (x) Shut in  
 TYPE OF TREATMENT: Production Casing  
 HOLE SIZE: 5 5/8"  
 TOTAL DEPTH: 900

Well Name	Terms	Due Date	
Weber	Net 15 days	10/9/2010	
Service or Product	Qty	Per Foot / Per Sack / Pricing	Amount
Cement in 2 7/8"	861	3.00	2,583.00
Sales Tax		7.30%	0.00

Weber #2-10  
 Woodson County  
 Section: 19  
 Township: 25  
 Range: 16

*Still have a credit off \$284.00*

Hooked onto 2 7/8" casing. Established circulation with 6 barrels of water. 4 GEL. 1 METSO, COTTONSEED ahead, blended 95 sacks of OWC cement, dropped rubber plug, and pumped 5 barrels of water

<b>Total</b>	<b>\$2,583.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$2,583.00</b>