



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1221752  
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: \_\_\_\_\_



1221752

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:  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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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COMPANY: Red Cloud Exp. Op.  
ADDRESS: 1611 St Andrews

LEASE: Greenwood  
COUNTY: GW  
LOCATION 330' FNL/2180' FWL  
16/22/11

COMMENCED: 4/14/2010  
COMPLETED: 4/29/2010  
WELL #: 1-10  
API#: 15-073-24,134  
STATUS: Oil Well  
TOTAL DEPTH: 2082'-6 3/4"  
CASING: 40' 8 5/8" Cmt w/ 20 spheritland  
1998'-4 1/2" Consol Cmt

DRILLER'S LOG

10	SOIL AND CLAY	1710	Ls w/ sgh brks
21	Shale (SH)	1785	SH
32	Limestone (LS)	1796	Ls
51	Sh	1870	SH
123	Ls w/ sh strks	1879	Sa /Fair Odor
215	Sh	1940	Sh w/ sa sh
234	Ls w/ sh strks	1945	Sh (blk)
305	Sh	1986	SH
372	Ls w/ sh strks	1988	Co
455	SH	2042	Sh
481	LS	2082	Ls ( Miss.)
502	Sh		
510	LS	2082	T.D.
607	Sh w/ ls strks		
612	LS		
630	Sh		
656	LS		
850	SH		
853	Ls		
993	Sa		
1145	Ls w/ sh brks		
1239	Sh w/ ls strks		
1409	Ls		
1537	Sh w/ sa sh		

INVOICE #: 20505  
 COMPANY: Red Cloud Exploration Op. LLC  
 ADDRESS: 1611 St Andrews Dr. 3 rd Flr  
 Lawrence Ks 66047

DATE: 4/29/2010  
 LEASE: Greenwood  
 COUNTY: GW  
 WELL #: 1-10  
 API #: 15-073-14134

ORDERED BKevin

SERVICE	RATE	UNITS	
Location Pit Charge		1	N/C
Set Surface Csg.	\$350.00 Per Hr	4	N/C
Cement Surface/W.O.C.	\$350.00 Per Hr	8	N/C
Drilling Charge	\$10.00 Per Ft	2082'	\$20,820.00
Circulating	\$350.00 Per Hr	4	N/C
Drill Stem Test	\$350.00 Per Hr		N/C
Logging	\$350.00 Per Hr	6	\$1,050.00
Core Samples	\$500.00 Per Run		N/C
Water Hauling	\$40.00 Per Hr	1	N/C
Bit Charge (Lime W/O)	Cost + 10%		N/C
Drill Stem Lost	\$28.00 Per Ft		N/C
Trucking	\$40. per hr + \$1./ mi		N/C
Roustabout	\$23.00 Per Man Hr		N/C
Running Casing	\$350.00 Per Hr	1.5	\$525.00
Rigging Up	\$350.00 Per Hr	1	N/C
Rigging Down	\$350.00 Per Hr	1	N/C
Other			
Fuel Assess.			
Move Rig			
Day Work (Drig LS)			
Material Provided:			
Cement	\$8.00 Per Sx	20	\$160.00
Sample Bags	\$28.00 Per Box		\$0.00

TOTAL AMOUNT **\$22,555.00**

REMIT TO: **RIG 6 DRILLING, INC**  
**PO BOX 227**  
**IOLA, KS 66749**

**THANK YOU !!! WE APPRECIATE YOUR BUSINESS !!!**

Tammy Green <TGreen@cowb.bz>  
 "bidwell@redcloudexploration.com" <bidwell@redcloudexploration.com>  
 2010 cement job

1 Attachment: 61 KE

the only well i can find under 2010 is for this lease which is the greenwood



**ENTERED**

TICKET NUMBER 24384  
 LOCATION Eureka  
 FOREMAN Troy Strick

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
4-30-10	1039	Greenwood # 1-10	16	22	11E	G.W
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Red Cloud Operating			463	Shannon	436	Troy
MAILING ADDRESS			439	Allen		
1611 St. Anthonis Dr 3rd A			515	Chris		
CITY	STATE	ZIP CODE	437	Jim		
Chanute	KS	66017				

JOB TYPE Logging HOLE SIZE 6 3/4" HOLE DEPTH 2082' CASING SIZE & WEIGHT 4 1/2" 10.5#  
 CASING DEPTH 1998' KB DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.2# SLURRY VOL 17.2 Bbl WATER gal/sk 8° CEMENT LEFT in CASING 0'  
 DISPLACEMENT 31.75 Bbl DISPLACEMENT PSI / \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break Circulation w/ 10 Bbl  
Fresh water. Mixed 60sk Thick Set Cement w/ 1/4" Floerle 1 1/2 @  
13.2# Perfor. Wash out Pump + liner. Release Plug. Displace w/ 31.75 Bbl  
Fresh water. Final Pumping Pressure 300 PSI Pump Plug to 800 PSI.  
Pressure Bounced From 200 PSI to 700 PSI in first 10 Bbl of Displacement. Pressure  
levelled out last 20 Bbl. Good Circulation @ all times while Cementing.

Job Complete.

(Casing hung in hole.)

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	900.00	900.00
5406	30	MILEAGE	3.55	106.50
1126A	60sk	Thick Set Cement	16.50	990.00
1107	15#	Floerle 1/4"/sk	2.00#	30.00
5407		Ton-mileage Bulk Trucks	m/c	500.00
5502C	12hrs	80 Bbl Vac Trucks (6hrs each)	96.00/hr	1152.00
1123	3000gal	City Water	14.50/1000	43.50
4404	1	4 1/2" Top Rubber Plug	44.00	44.00
		Paid CH # 5263		
		Paid CH # 5700.00		

		- 3835.77		
		1864.23 Credit		
		Thank You	Sub Total	3766.00
		6.3%	SALES TAX	69.77
		234011	ESTIMATED TOTAL	3835.77

Form 3737

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_