



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1222349
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: _____



1222349

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> _____
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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. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

CEMENT

FIELD TICKET & TREATMENT REPORT

TICKET NUMBER 16341
LOCATION 180
FOREMAN Jacob Storm

269458

DATE	7-16-14	4897	AYRES #2
CUSTOMER #			
WELL NAME & NUMBER			
SECTION	26	255	1W
TOWNSHIP			
RANGE			
COUNTY			
CUSTOMER	Lechmanmer oil		
MAILING ADDRESS	PO Box 526		
CITY	Newton	STATE	KS
ZIP CODE	67114		

JOB TYPE Longstring B HOLE SIZE 7 7/8 HOLE DEPTH 3860 CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH 3705 DRILL PIPE 2 7/8 TUBING OTHER
 SLURRY WEIGHT 15.2 SLURRY VOL 6728 WATER gal/ck 300 MIX PSI 300
 DISPLACEMENT PSI 1900 RATE 6.6 bpm
 REMARKS: Softly meeting centerline on 13, 5, 10, 16, 21, 26, 31, 39
 Baskets on 21, 30 land pipe calcareous hole with
 mud for 30 min open shoe pump 5 bbl water - 50 gal
 displaced with 88.23 bbl landing plug at 1250 ft
 with 200 SKS Base mix 8 1/2 x 11 seal
 plug at 1250 ft
 with 25 SKS Base mix

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 plug at 1250 ft
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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	25	MILEAGE	4.20	105.00
5402	1	min bulk delivery	368.00	368.00
5402	12.00	footage	276.00	276.00
11045	225	CLASS 54	3532.50	3532.50
1102	350	Calcium chloride	273.00	273.00
1118 B	700	gcl	154.00	154.00
1110A	1800	0 Koi-seal	828.00	828.00
11446	500	DV 100	550.00	550.00
4114	3	5/8 Baskets	290.00	870.00
4136	9	5/8 weatherboard 5 band	75.75	681.75
4253	1	5/8 packer shoe	1663.00	1663.00
4454	1	5/8 later down plug	266.75	266.75
4310	1	5/8 12 ft + 2 collars	210.00	210.00
4301	1	2" Ball valve	80.00	80.00
4310	1	2" nipple and ball plug	65.00	65.00
		Subtotal	11008.00	11008.00
		SALES TAX	541.46	541.46
		ESTIMATED TOTAL		9948.21

AUTHORIZATION _____ 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.



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Lachenmayr Oil, LLC.

26-25s-1w Sedgwick, KS

PO Box 526
New ton, KS 67114

Ayers #2

Job Ticket: 54155 **DST#: 1**

ATTN: Doug Davis

Test Start: 2014.07.14 @ 22:03:36

GENERAL INFORMATION:

Formation: **Hunton**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 23:31:36

Time Test Ended: 03:09:36

Test Type: Conventional Bottom Hole (Initial)

Tester: Ryan Reynolds

Unit No: 68

Interval: **3508.00 ft (KB) To 3597.00 ft (KB) (TVD)**

Reference Elevations: 1367.00 ft (KB)

Total Depth: 3597.00 ft (KB) (TVD)

1362.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 8790

Inside

Press@RunDepth: 711.43 psig @ 3515.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.07.14

End Date: 2014.07.15

Last Calib.: 2014.07.15

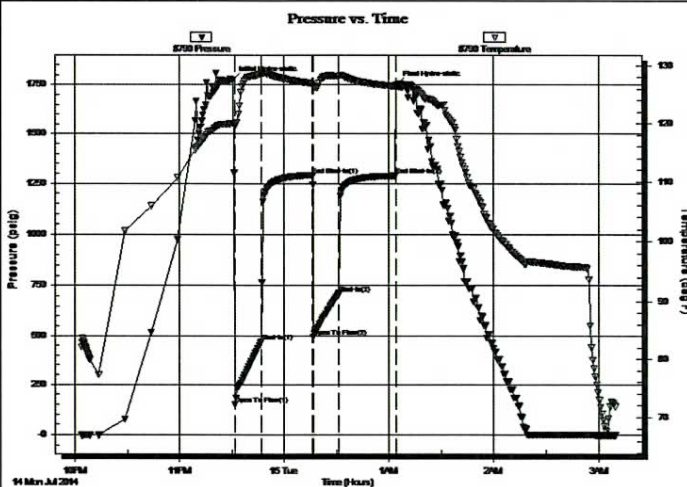
Start Time: 22:03:41

End Time: 03:09:35

Time On Btm: 2014.07.14 @ 23:30:36

Time Off Btm: 2014.07.15 @ 01:04:21

TEST COMMENT: IF: Strong blow . BOB @ 2 min.
IS: No blow
FF: Strong blow . BOB @ 2 min.
FS: No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1775.28	120.04	Initial Hydro-static
1	151.42	119.60	Open To Flow (1)
17	469.54	128.50	Shut-In(1)
46	1292.29	126.95	End Shut-In(1)
46	494.73	126.58	Open To Flow (2)
61	711.43	128.24	Shut-In(2)
94	1289.19	126.45	End Shut-In(2)
94	1749.55	126.35	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1540.00	VSLI OspkdMW trc%o, 30%m, 70%w	19.34

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (m ³ /d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Lachenmayr Oil, LLC.

26-25s-1w Sedgwick,KS

PO Box 526
New ton, KS 67114

Ayers #2

Job Ticket: 54155

DST#: 1

ATTN: Doug Davis

Test Start: 2014.07.14 @ 22:03:36

Tool Information

Drill Pipe:	Length: 3262.00 ft	Diameter: 3.80 inches	Volume: 45.76 bbl	Tool Weight: 2400.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 248.00 ft	Diameter: 2.25 inches	Volume: 1.22 bbl	Weight to Pull Loose: 82000.00 lb
			<u>Total Volume: 46.98 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	29.00 ft			String Weight: Initial 56000.00 lb
Depth to Top Packer:	3508.00 ft			Final 61000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	89.00 ft			
Tool Length:	116.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		
Tool Comments:				

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			3482.00	
Shut In Tool	5.00			3487.00	
Hydraulic tool	5.00			3492.00	
Jars	5.00			3497.00	
Safety Joint	2.00			3499.00	
Packer	5.00			3504.00	27.00 Bottom Of Top Packer
Packer	4.00			3508.00	
Stubb	1.00			3509.00	
Perforations	5.00			3514.00	
Change Over Sub	1.00			3515.00	
Recorder	0.00	8790	Inside	3515.00	
Recorder	0.00	8792	Outside	3515.00	
Drill Pipe	63.00			3578.00	
Change Over Sub	1.00			3579.00	
Perforations	15.00			3594.00	
Bullnose	3.00			3597.00	89.00 Bottom Packers & Anchor
Total Tool Length:	116.00				

Serial #: 8790

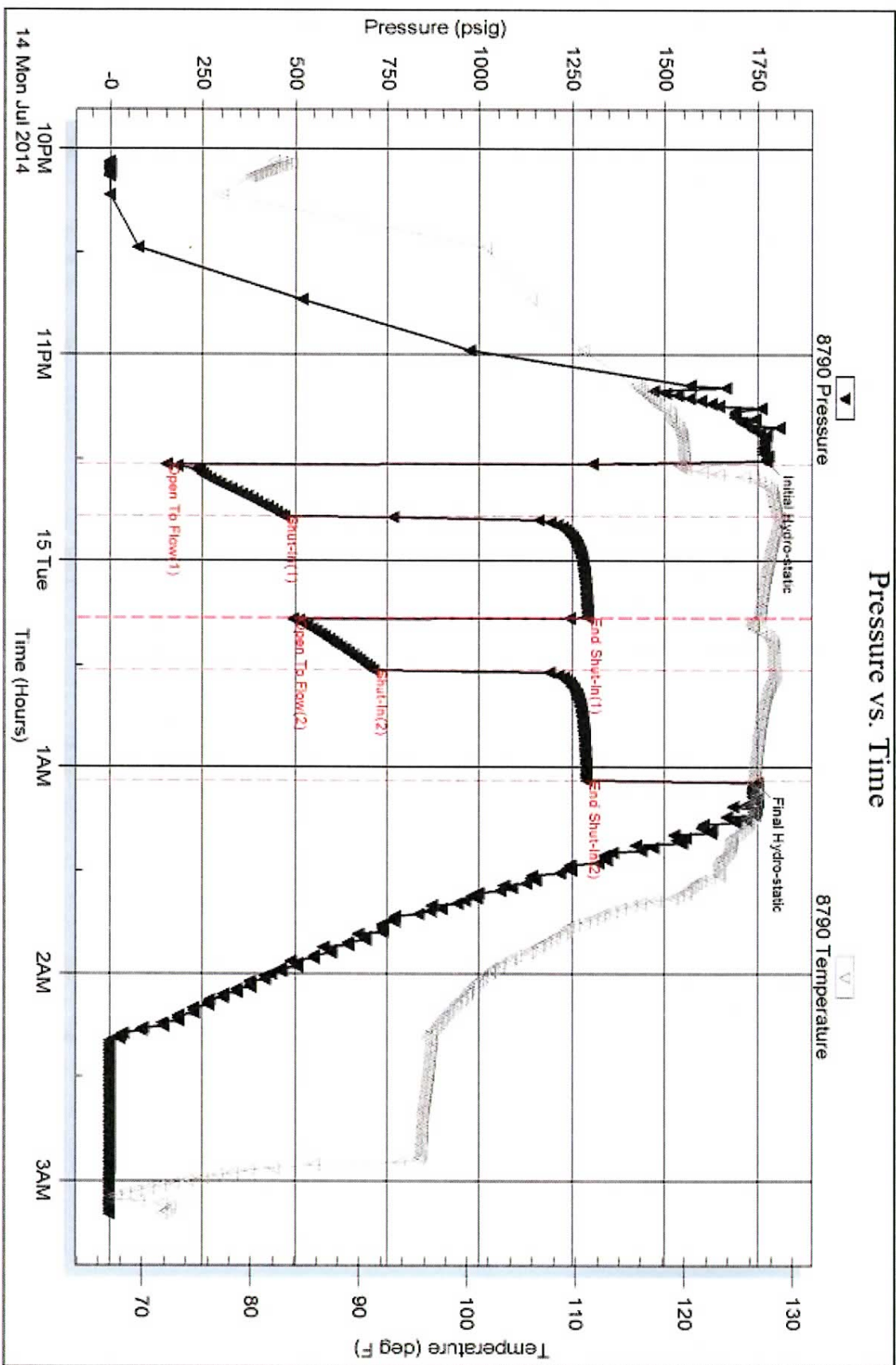
Inside

Lachemayr Oil, LLC.

Ayers #2

DST Test Number: 1

Pressure vs. Time



Tribble Testing, Inc

Ref. No: S4155

Printed 2014.07.16 @ 10:27:57