



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1225227
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: _____



1225227

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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Form	ACO1 - Well Completion
Operator	M.A. Yost Operations, Inc
Well Name	Camp A 1
Doc ID	1225227

Tops

Name	Top	Datum
Anhydrite	860	+967
Topeka	2717	+890
Heebner	2956	-1129
Toronto	2967	-1140
Lansing	3012	-1185
BKC	3217	-1390
Arbuckle	3251	-1424
T.D.	3256	-1429

GLOBAL CEMENTING, L.L.C.

1386

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell

DATE <u>12/22/14</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>12/22/14</u>	JOB FINISH <u>12/22/14</u>
LEASE <u>Comp A</u>	WELL#. <u>1</u>	LOCATION			COUNTY <u>Russell</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR William Sanders
 TYPE OF JOB Repair Service
 HOLE SIZE 15 1/4 T.D. 509
 CASING SIZE 5 1/2 DEPTH 248
 TUBING SIZE 5 1/2 DEPTH 248
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 2000 MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 1000
 PERFS
 DISPLACEMENT 500 H
 EQUIPMENT

OWNER
 CEMENT AMOUNT ORDERED 27522 comp 2000
 COMMON @
 POZMIX @
 GEL @
 CHLORIDE @
 ASC @
 HANDLING @
 MILEAGE @
 TOTAL

PUMP TRUCK CEMENTER Frank Cady
 # 81 HELPER Frank
 BULK TRUCK
 # 81 DRIVER Frank
 BULK TRUCK
 # DRIVER

REMARKS:

Run 21 H of 5" casing @ 5" & 1/4 hole
for cementation
per 27522 comp 2000 per order released
per contract of 27522 H of 1120 - 1120
located @ 2000 feet
Cement Old Circulate

CHARGE TO: MA 708 Operations
 STREET 1000 9th
 CITY Russell STATE KS ZIP 67665

Global Cementing, L.L.C.,
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME William Sanders
 SIGNATURE William Sanders

SERVICE
 DEPTH OF JOB
 PUMP TRUCK CHARGE
 EXTRA FOOTAGE @
 MILEAGE 242 @
 MANIFOLD @
 TOTAL

PLUG & FLOAT EQUIPMENT
 @
 @
 @
 @
 TOTAL

SALES TAX (If Any)
 TOTAL CHARGES
 DISCOUNT IF PAID IN 30 DAYS

GLOBAL CEMENTING, L.L.C.

1403

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>7-28-14</u>	SEC. <u>27</u>	TWP. <u>14</u>	RANGE <u>15</u>	CALLED OUT	ON LOCATION	JOB START <u>11:45am</u>	JOB FINISH <u>1:45pm</u>
LEASE <u>Camp A</u>	WELL #. <u>1</u>	LOCATION			COUNTY <u>Russell</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR Southwood #2

TYPE OF JOB Long string

HOLE SIZE 7 7/8 T.D.

CASING SIZE 5 1/2 DEPTH 2522

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 1500psi MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS

DISPLACEMENT 77.4 MM

EQUIPMENT

OWNER

CEMENT AMOUNT ORDERED 4000 cum @ Salt & Sugar

2 1/2 bags per 100 lbs

5000 cum

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE @

TOTAL

PUMP TRUCK CEMENTER North - Cody

11 HELPER Brad

BULK TRUCK DRIVER Eric

BULK TRUCK DRIVER

REMARKS:

Ran 20 hrs of 5' casing and land on it
with cement on the 1st - back up and
pump 5000 cum of cement - per west 10/28/14
label of cementer 2 1/2 bags per 100 lbs - shot down
with cement pump and 1000' of iron - back up
and 2000' of 1 1/2" - 6.00 on pressure @ 1500psi
avg. depth @ 1500psi - cement and cement
held - plug 1 1/2" = 3000' M = 1500'

CHARGE TO: M.A. Vost Operations

STREET PO Box 911

CITY Russell STATE KS ZIP 67665

Global Cementing, L.L.C.,
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME William Sanderson

SIGNATURE William Sanderson

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD @

TOTAL

PLUG & FLOAT EQUIPMENT

1-5/8" API @

1-5/8" API @

1-5/8" API @

1-5/8" API @

1-5/8" API @

TOTAL

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT IF PAID IN 30 DAYS



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60487

DST#: 1

ATTN: Jack Yost / Mike Bai

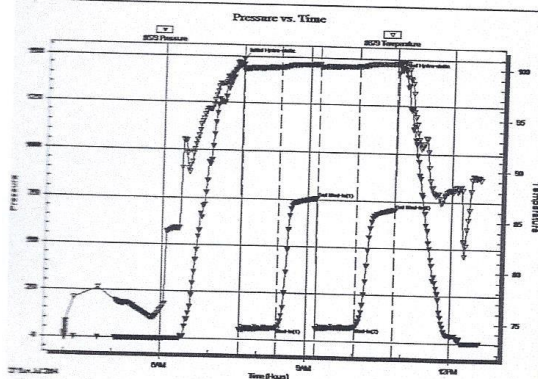
Test Start: 2014.07.27 @ 04:00:00

GENERAL INFORMATION:

Formation: LKC A-C
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 07:37:30
 Time Test Ended: 12:35:30
 Interval: 2988.00 ft (KB) To 3085.00 ft (KB) (TVD)
 Total Depth: 3085.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Bob Hamel
 Unit No: 58
 Reference Elevations: 1825.00 ft (KB)
 1818.00 ft (CF)
 KB to GR/CF: 7.00 ft

Serial #: 8679 Inside
 Press @ Run Depth: 75.41 psig @ 3055.00 ft (KB)
 Start Date: 2014.07.27 End Date: 2014.07.27
 Start Time: 04:00:01 End Time: 12:35:30
 Capacity: 8000.00 psig
 Last Calib.: 2014.07.27
 Time On Btm: 2014.07.27 @ 07:36:30
 Time Off Btm: 2014.07.27 @ 10:50:30

TEST COMMENT: IF - 45 - Blow built to 2"
 I.S.I - 45 - No blow back
 F.F. - 45 - Weak surface blow built to 1"
 F.S.I - 45 - No blow back



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1487.25	100.10	Initial Hydro-static
1	52.86	99.53	Open To Flow (1)
48	64.60	99.94	Shut-In(1)
96	757.14	100.27	End Shut-In(1)
96	64.97	100.02	Open To Flow (2)
145	75.41	100.20	Shut-In(2)
193	703.66	100.47	End Shut-In(2)
194	1426.01	100.57	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
50.00	S,O,S,M, 100%M (FEW OIL SPECS)	0.70
0.00	SHOW OF FREE OIL IN TOOL	0.00

Gas Rates

Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)

TriLOBITE Testing, Inc

Ref. No: 60487

Printed: 2014.07.29 @ 10:58:02



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

TOOL DIAGRAM

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60487

DST#: 1

ATTN: Jack Yost / Mike Bai

Test Start: 2014.07.27 @ 04:00:00

Tool Information

Drill Pipe:	Length: 2984.00 ft	Diameter: 3.80 inches	Volume: 41.86 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 60000.00 lb
			Total Volume: 41.86 bbl	Tool Chased 0.00 ft
Drill Pipe Above KB:	23.00 ft			String Weight: Initial 39000.00 lb
Depth to Top Packer:	2988.00 ft			Final 40000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	97.00 ft			
Tool Length:	124.00 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			2962.00	
Shut In Tool	5.00			2967.00	
Hydraulic tool	5.00			2972.00	
Jars	5.00			2977.00	
Safety Joint	2.00			2979.00	
Packer	4.00			2983.00	27.00 Bottom Of Top Packer
Packer	5.00			2988.00	
Stubb	1.00			2989.00	
Perforations	1.00			2990.00	
Change Over Sub	1.00			2991.00	
Drill Pipe	63.00			3054.00	
Change Over Sub	1.00			3055.00	
Recorder	0.00	6625	Outside	3055.00	
Recorder	0.00	8679	Inside	3055.00	
Perforations	26.00			3081.00	
Bullnose	4.00			3085.00	97.00 Bottom Packers & Anchor
Total Tool Length:	124.00				



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60487

DST#: 1

ATTN: Jack Yost / Mike Bai

Test Start: 2014.07.27 @ 04:00:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 49.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.19 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 2000.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
50.00	S,O,S,M, 100%M (FEW OIL SPECS)	0.701
0.00	SHOW OF FREE OIL IN TOOL	0.000

Total Length: 50.00 ft Total Volume: 0.701 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

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TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60488

DST#: 2

ATTN: Jack Yost / Mike Bai

Test Start: 2014.07.28 @ 04:10:00

GENERAL INFORMATION:

Formation: Gorham Sand

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 06:51:00

Time Test Ended: 13:04:30

Test Type: Conventional Bottom Hole (Reset)

Tester: Bob Hamel

Unit No: 58

Interval: 3232.00 ft (KB) To 3256.00 ft (KB) (TVD)

Total Depth: 3256.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1825.00 ft (KB)

1818.00 ft (CF)

KB to GR/CF: 7.00 ft

Serial #: 8679

Inside

Press@RunDepth: 240.37 psig @ 3234.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.07.28

End Date:

2014.07.28

Last Calib.: 2014.07.28

Start Time: 04:10:01

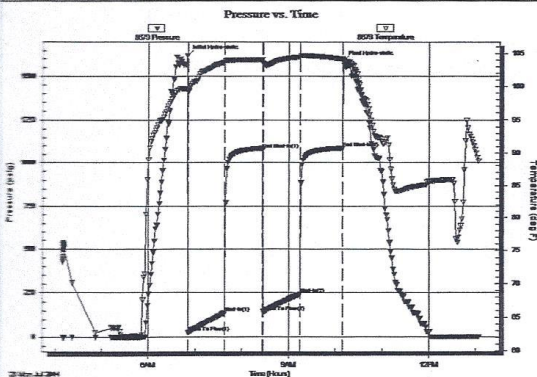
End Time:

13:04:30

Time On Btm: 2014.07.28 @ 06:50:00

Time Off Btm: 2014.07.28 @ 10:10:00

TEST COMMENT: I.F. - 45 - BOB in 8 1/2 min
I.S.I. - 45 - Weak surface blow back built to 1"
F.F. - 45 - BOB in 12 min
F.S.I. - 45 - Weak surface blow back built to 2"



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1619.53	99.64	Initial Hydro-static
1	25.97	99.24	Open To Flow (1)
48	137.07	103.66	Shut-In(1)
97	1081.61	103.98	End Shut-In(1)
97	142.11	103.58	Open To Flow (2)
144	240.37	104.45	Shut-In(2)
199	1088.25	104.17	End Shut-In(2)
200	1587.06	103.97	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
128.00	H ₂ O, C, M, W, 20%O 30%M 50%W	1.77
365.00	G/O 100%	5.12
0.00	315' G.I.P.	0.00

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcfd)

2-1



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60488

DST#: 2

ATTN: Jack Yost / Mike Bai

Test Start: 2014.07.28 @ 04:10:00

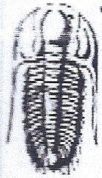
Tool Information

Drill Pipe:	Length: 3236.00 ft	Diameter: 3.80 inches	Volume: 45.39 bbl	Tool Weight: 2500.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 50000.00 lb
			<u>Total Volume: 45.39 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	31.00 ft			String Weight: Initial 39000.00 lb
Depth to Top Packer:	3232.00 ft			Final 42000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	24.00 ft			
Tool Length:	51.00 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			3206.00	
Shut In Tool	5.00			3211.00	
Hydraulic tool	5.00			3216.00	
Jars	5.00			3221.00	
Safety Joint	2.00			3223.00	
Packer	4.00			3227.00	27.00 Bottom Of Top Packer
Packer	5.00			3232.00	
Studd	1.00			3233.00	
Perforations	1.00			3234.00	
Recorder	0.00	6625	Outside	3234.00	
Recorder	0.00	8679	Inside	3234.00	
Perforations	18.00			3252.00	
Bullnose	4.00			3256.00	24.00 Bottom Packers & Anchor
Total Tool Length:	51.00				

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**TRIOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

M.A. Yost Operations

27-14s-15w Russell, KS

PO Box 811
Russell, KS 67665

Camp A #1

Job Ticket: 60488

DST#: 2

ATTN: Jack Yost / Mike Bai

Test Start: 2014.07.28 @ 04:10:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

31.2 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

8500 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.98 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 300.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
126.00	H ₂ O,C,M,W, 20%O 30%M 50%W	1.767
365.00	C/O 100%	5.120
0.00	315' G.I.P.	0.000

Total Length: 491.00 ft Total Volume: 6.887 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: CORRECTED OIL GRAVITY = 31.2 @ 60 Deg.
R.W. = .57 OHMS @ 97 DEG.