



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1224983
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: _____

1224983

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

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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CONSOLIDATED
Oil Well Services, LLC

268887

TICKET NUMBER 46795

LOCATION Oakley, KS

FOREMAN Jerry Y

Darren R

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
6-16-14	1487	Audrey #2	31	13S	32W	Logan	
CUSTOMER		Mailing Address		TRUCK #	DRIVER	TRUCK #	DRIVER
Blake Exp		Oakley 5 to mus tang 4 1/2 W Ninto		399	Jake H		
CITY		STATE	ZIP CODE	566	Rob S		
				529-7427			

JOB TYPE 2 Stage HOLE SIZE 7 7/8 HOLE DEPTH 4585 CASING SIZE & WEIGHT 5 1/2 14#
 CASING DEPTH 4578 DRILL PIPE _____ TUBING _____ OTHER DV @ 2378'
 SLURRY WEIGHT 14.2/12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 22'
 DISPLACEMENT 1114/38 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & rig up on Val 1 run float cement centralizers on 2, 9, 14, 20, 52 baskets on 1, 8, 15, 50 DV tool on top of 51 @ 2378 run casing to bottom pump ball thru & circulate thr, pump 5 hrs @ ahead 500 gal mud flush 566 1/2 H2O spacer mix 150 sks OWC 4/5# 10/1 seal per sk shut down release plug clean pump lines & displace with 110 1/4 bbl had 1250# lift plug landed @ 2050# relog set back float held, open tool @ 1400# circulate 30 min mix 450 sks 60/40 8% gel 1/4# flo seal shut down release plug wash pump lines displace with 57 1/2 bbl 750# lift plug landed & tool closed @ 2500# circulate 30 bbl to pit

Thank you Jerry & crew

20 sks mH 30 sks RH

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	3175.00	3175.00 ✓
5406	25	MILEAGE	5.25	131.25 ✓
5407A	28.6	ton mileage delivery	1.25	125.25 ✓
1126	150 sks	OWC	23.70	3555.00 ✓
1110A	750#	Kol seal	56	420.00 ✓
1131	500 sks	60/40 poz mix	15.86	7930.00 ✓
1186	3440 #	gel	27	928.80 ✓
1107	125 #	1/4 flo seal	2.97	371.25 ✓
11446	500 gal	Mud Flush	1.00/gal	500.00 ✓
4159	1	5 1/2 AFLX Float shoe (W)	433.75	433.75 ✓
4454	1	5 1/2 Latch Down Assy (I)	318.25	318.25 ✓
4130	5	5 1/2 Centralizers (W)	61.00	305.00 ✓
4104	4	5 1/2 Baskets (W)	290.00	1160.00 ✓
4277	1	5 1/2 DV Tool (Industrial)	4042.50	4042.50 ✓
			Sub-Total	24522.05 ✓
			Less 10% Dis	2452.21 ✓
			Sub-Total	22069.84 ✓
			SALES TAX	1374.56 ✓
			ESTIMATED TOTAL	23444.40 ✓



complete

Ravin 3737

AUTHORIZATION [Signature]

TITLE V.P.

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.



PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

268763

TICKET NUMBER 46791
LOCATION Oakley KS
FOREMAN Jerry Y

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-7-14	1487	Audrey #2	31	135	32W	Logan
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Blake Exp.			399	Michael R		
MAILING ADDRESS			377	Doc K		
CITY						
STATE						
ZIP CODE						

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 224 CASING SIZE & WEIGHT 8 3/4 24#
 CASING DEPTH 223 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 20'
 DISPLACEMENT 13661 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & rig upon Val 1 break circulation w/ rig time mix 165sk com class A cement 3% CC 2% gel wash up & displace with 13661 H₂O & shut in circulated 3661 to pit

Cement did circulate

Thank you
Jerry Y

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1150 ⁰⁰	1150 ⁰⁰
5406	25	MILEAGE	5 ²⁵	131 ²⁵
5407	7.8	ton mileage delivery (min)	430 ⁰⁰	430 ⁰⁰
1104s	165 sks	com class A cement	18 ⁵⁵	3060.75 ✓
1102	465	CC	94	437.10 ✓
11186	310	gel	27	83.70 ✓
			Subtotal	5292.80 ✓
			less 10% disc.	529.28 ✓
			Subtotal	4763.52 ✓
			SALES TAX	246.59 ✓
			ESTIMATED TOTAL	5010.11 ✓

Ravin 3737

AUTHORIZATION [Signature] 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

DRILL STEM TEST REPORT



Blake Exploration LLC
 201 S Main
 Bogue, Ks
 67625
 ATTN: Mike Davignon

31-13s-32w Logan, Ks
 Audrey #2
 Job Ticket: 59068
 DST#: 3
 Test Start: 2014.06.13 @ 19:35:57

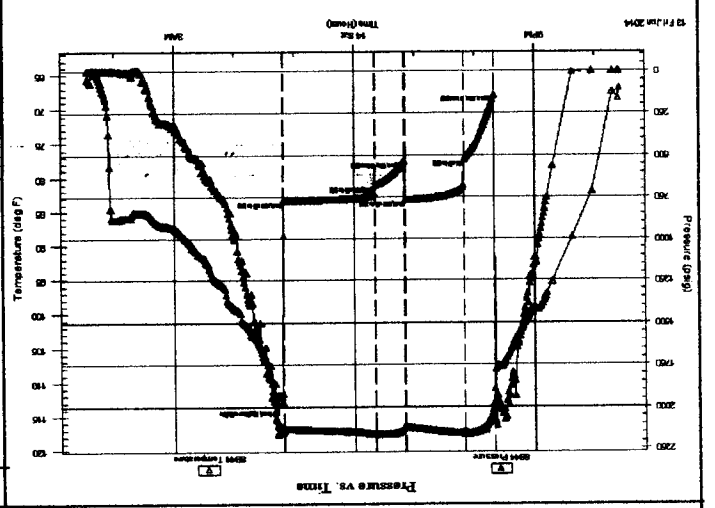
GENERAL INFORMATION:

Formation: K
 Devised: No
 Whipstock: 0.00 ft (KB)
 Test Type: Conventional Bottom Hole (Reeset)
 Tester: Shane McBride
 Unit No: 55
 Reference Elevations: 2916.00 ft (KB)
 2907.00 ft (CF)
 9.00 ft
 Interval: 4130.00 ft (KB) To 4167.00 ft (KB) (TVD)
 Total Depth: 4167.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches
 Hole Condition: Fair

Serial #: 8844
 Outside
 Press@RunDepth: 521.31 psig @
 4131.00 ft (KB)
 Start Date: 2014.06.13
 End Date: 19:35:57
 Start Time: 04:40:27
 End Time: 21:40:27

TEST COMMENT: B.O.B. in 1 1/2 min.
 Surface return in 10 min. built to 1/4" in
 B.O.B. in 4 min.
 Surface return in 12 min. built to 1/4" in

Capacity: 8000.00 psig
 Last Calib.: 2014.06.14
 Time On Btm: 2014.06.13 @ 21:39:27
 Time Off Btm: 2014.06.14 @ 01:12:42



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2086.82	108.02	Initial Hydro-static
1	140.05	110.85	Open To Flow (1)
31	521.31	117.56	Shut-in(1)
91	765.19	116.62	End Shut-in(1)
91	533.79	116.48	Open To Flow (2)
121	679.79	117.63	End Shut-in(2)
212	769.91	116.95	End Shut-in(3)
214	1973.71	117.18	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
125.00	c g o 20g 800	1.75
600.00	g m & w c o 20g 20m 30w 300	8.42
300.00	g m & o c w 15g 10m 30o 45w	4.21
480.00	g s o c w 5g 5o 90w	6.73
0.00	415' of gas in pipe	0.00

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/D)

DRILL STEM TEST REPORT



Blake Exploration
 201 S Main
 Bogue, Ks
 67625
 ATTN: Mike Davignon
 Test Start: 2014.06.12 @ 11:40:18

Audrey #2
 Job Ticket: 59067
 DST#: 2
 Test Start: 2014.06.12 @ 11:40:18

GENERAL INFORMATION:

Formation: H
 Devalted: No
 Whipstock: 0.00 ft (KB)
 Time Tool Opened: 13:54:33
 Time Test Ended: 19:21:33
 Interval: 4040.00 ft (KB) To 4080.00 ft (KB) (TVD)
 Total Depth: 4080.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inchesHole Condition: Fair
 Reference Elevations: 2916.00 ft (KB)
 2907.00 ft (CF)
 9.00 ft
 KB to GRCP:

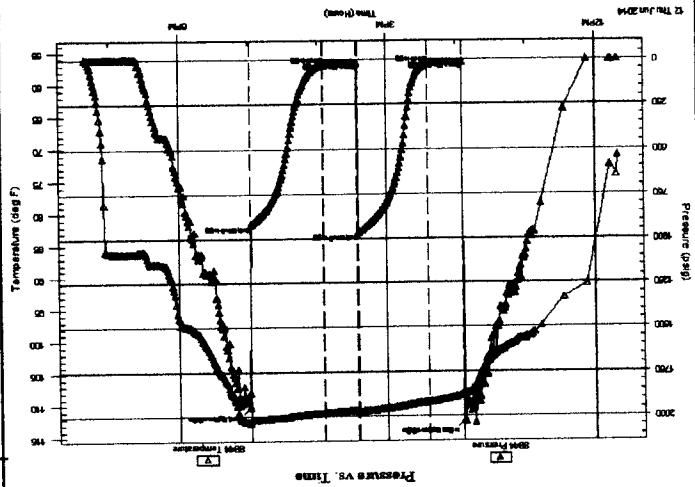
TEST COMMENT:

Serial #: 8844
 Outside
 Press@RunDepth: 25.51 psig @ 4041.00 ft (KB)
 Start Date: 2014.06.12
 End Date: 11:40:18
 Start Time:
 No return
 Weak surface blow in 10 min
 No return

Capacity: 8000.00 psig
 Last Calib.: 2014.06.13
 Time On Btm: 2014.06.12 @ 13:53:48
 Time Off Btm: 2014.06.12 @ 16:59:03

PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2023.04	108.48	Initial Hydro-static
1	13.25	107.99	Open To Flow (1)
31	18.85	109.48	Shut-in (1)
91	965.90	110.98	End Shut-in (1)
92	18.46	110.79	Open To Flow (2)
121	25.51	111.23	Shut-in (2)
185	919.65	112.27	End Shut-in (2)
186	1945.47	112.77	Final Hydro-static



Recovery

Length (ft)	Description	Volume (bbl)
2.00	free oil 100%	0.03
30.00	s c o m 4% o 96% m	0.42

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
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DRILL STEM TEST REPORT



Blake Exploration

31-135-32W Logan, Ks

Audrey #2
 Job Ticket: 59066
 DST#: 1
 Test Start: 2014.06.11 @ 23:11:04

201 S Main
 Bogue, Ks
 67625
 ATTN: Mike Davignon

GENERAL INFORMATION:

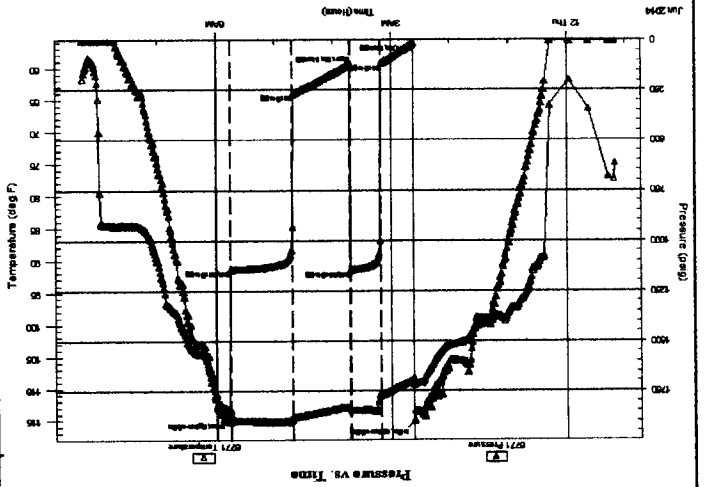
Formation: C
 Deviated: No
 Whipstock: 0.00 ft (KB)
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Shane McBride
 Unit No: 55
 Reference Elevations: 2916.00 ft (KB)
 2907.00 ft (CF)
 9.00 ft
 Interval: 3905.00 ft (KB) To 3945.00 ft (KB) (TVD)
 Total Depth: 3945.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inchesHole Condition: Fair

Serial #: 6771
 Inside
 Press@RunDepth: 269.63 psig @ 3906.00 ft (KB)
 Start Date: 2014.06.11
 End Date: 2014.06.12
 Start Time: 23:11:04
 End Time: 08:17:04
 Last Calc.: 2014.06.12
 Time On Btm: 2014.06.12 @ 02:37:04
 Time Off Btm: 2014.06.12 @ 05:46:04

TEST COMMENT: B.O.B. in 19 min.
 No return
 B.O.B. in 25 min.
 No return

PRESSURE SUMMARY

Annotation	Time (Min.)	Pressure (psig)	Temp (deg F)
Initial Hydro-static	0	1902.19	109.37
Open To Flow (1)	1	17.40	108.34
Shut-in(1)	34	117.33	111.10
End Shut-in(1)	65	1145.53	113.46
Open To Flow (2)	66	119.04	113.07
Shut-in(2)	124	269.63	114.55
End Shut-in(2)	188	1144.96	115.00
Final Hydro-static	189	1866.81	114.98



Recovery

Length (ft)	Description	Volume (bbl)
90.00	m c w 40% m 60% w	1.26
60.00	s m c w 10% m 90% w	0.84
300.00	w 100% w	4.21

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/D)