



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1228102
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: _____



1228102

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	Connell, Mark Allen
Well Name	Behnke 11
Doc ID	1228102

Tops

Name	Top	Datum
Anhydrite	396	+1331
Topeka	2498	-771
Oread	3675	-948
Heebner	2763	-1036
Toronto	2784	-1057
Douglas	2812	-1085
Brown Lime	2883	-1156
Lansing	2909	-1182
G Zone	2993	-1266
Muncie Crk	3044	-1317
H Zone	3057	-1330
J Zone	3095	-1368
BKC	3198	-1471
Arbuckle	3239	-1512
TD	3263	-1536



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Connell, Mark Allen

1-19s-10w Rice Co.

606 W. ALBRO St.
Clafin, Ks. 67525

Behnke #11

Job Ticket: 54176

DST#: 2

ATTN: Seth Evenson

Test Start: 2014.05.27 @ 17:52:16

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 19:40:01

Time Test Ended: 01:42:01

Test Type: Conventional Bottom Hole (Reset)

Tester: Matt Smith

Unit No: 53

Interval: 3244.00 ft (KB) To 3263.00 ft (KB) (TVD)

Reference Elevations: 1727.00 ft (KB)

Total Depth: 3263.00 ft (KB) (TVD)

1722.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 6773 Outside

Press@RunDepth: 388.13 psig @ 3245.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2014.05.27

End Date:

2014.05.28

Last Calib.:

2014.05.28

Start Time: 17:52:21

End Time:

01:42:00

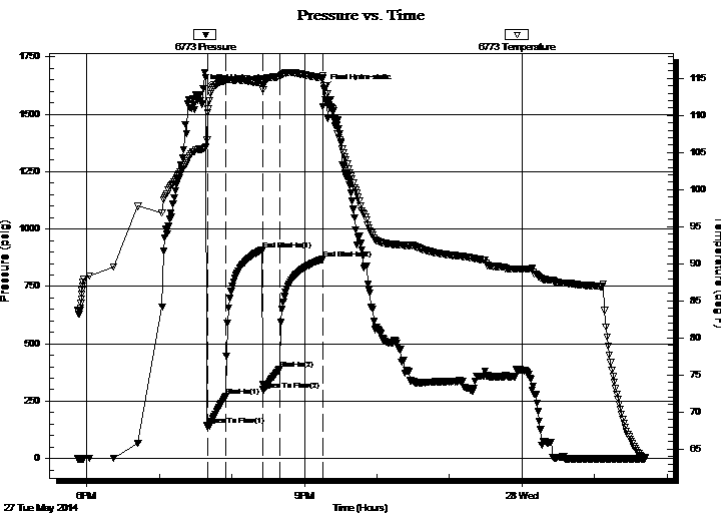
Time On Btm:

2014.05.27 @ 19:36:16

Time Off Btm:

2014.05.27 @ 21:16:16

TEST COMMENT: IF: Strong blow . B.O.B. in 1 min.
IS: Fair blow . Surf., to 6 1/2".
FF: Strong blow . B.O.B. in 1 1/2 mins.
FS: Weak blow . Surf., to 2 1/2".



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1610.82	105.49	Initial Hydro-static
4	143.48	110.40	Open To Flow (1)
19	271.15	114.75	Shut-In(1)
49	910.11	114.36	End Shut-In(1)
50	299.39	113.49	Open To Flow (2)
63	388.13	115.21	Shut-In(2)
99	869.22	115.04	End Shut-In(2)
100	1610.35	114.00	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
62.00	MWCGO 10%w 15%m 15%g 60%o	0.30
62.00	MWCGO 2%w 3%m 25%o 70%g	0.30
124.00	COCM 1%m 99%o	0.61
930.00	Clean Oil 100%o	13.05
0.00	1550' G.I.P. 100%g	0.00

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
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DRILL STEM TEST REPORT

FLUID SUMMARY

Connell, Mark Allen

1-19s-10w Rice Co.

606 W. ALBRO St.
Clafin, Ks. 67525

Behnke #11

Job Ticket: 54176

DST#: 2

ATTN: Seth Evenson

Test Start: 2014.05.27 @ 17:52:16

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:

4000 ppm

Viscosity: 56.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.97 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
62.00	MWCGO 10%w 15%m 15%g 60%o	0.305
62.00	MWCGO 2%w 3%m 25%o 70%g	0.305
124.00	COCM 1%m 99%o	0.610
930.00	Clean Oil 100%o	13.045
0.00	1550' G.I.P. 100%g	0.000

Total Length: 1178.00 ft Total Volume: 14.265 bbl

Num Fluid Samples: 0

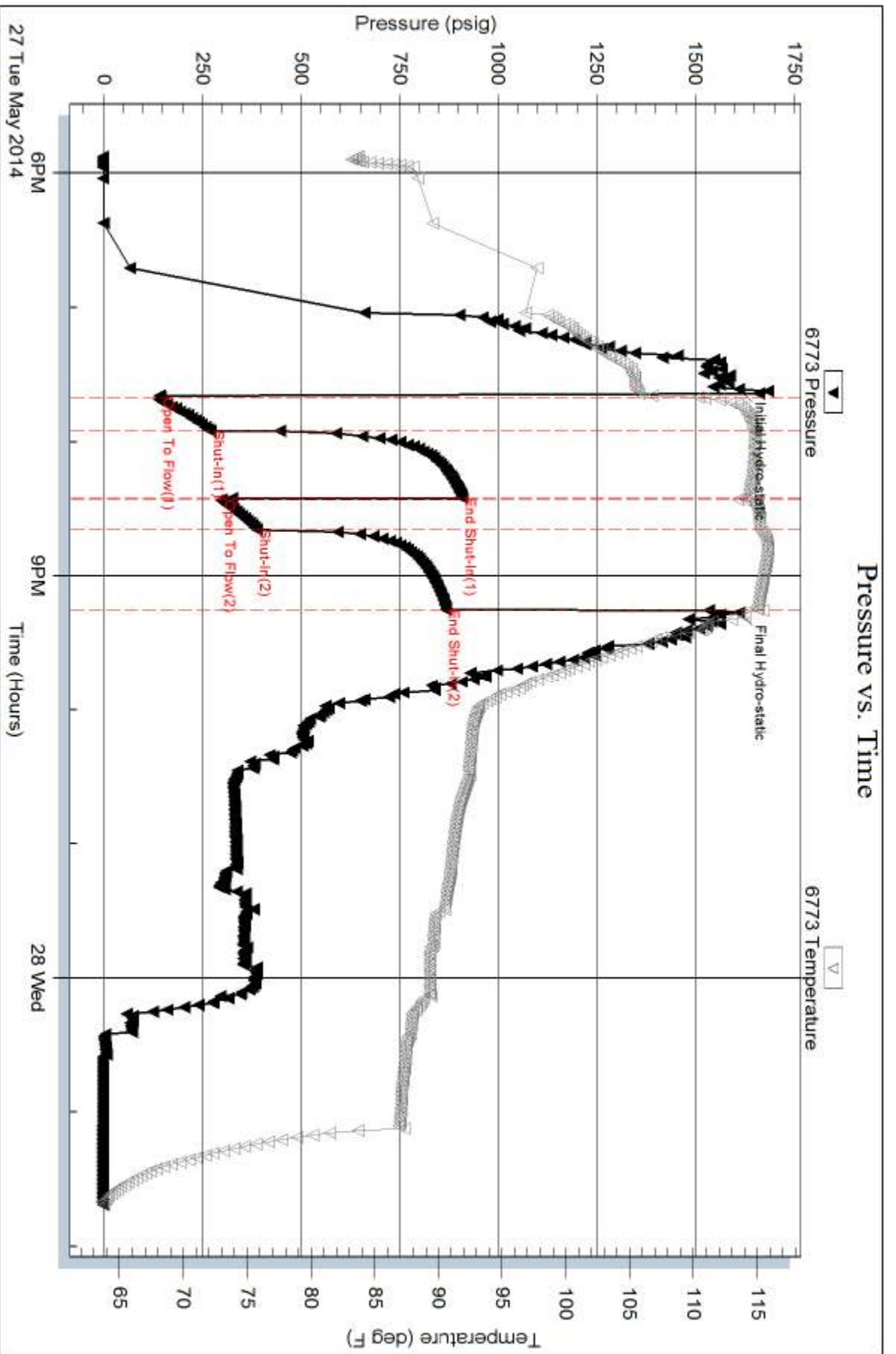
Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments: Gravity w as 49 @ 70 degrees. Converted to 48 @60. degrees





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Connell, Mark Allen

1-19s-10w Rice Co.

606 W. Albro St.
Claflin, Ks. 67525

Behnke #11

Job Ticket: 52025

DST#: 1

ATTN: Seth Evenson

Test Start: 2014.05.27 @ 04:12:47

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: 0.00 ft (KB)

Time Tool Opened: 06:51:32

Time Test Ended: 12:10:17

Test Type: Conventional Bottom Hole (Initial)

Tester: Matt Smith

Unit No: 53

Interval: **3194.00 ft (KB) To 3248.00 ft (KB) (TVD)**

Total Depth: 3248.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Reference Elevations: 1727.00 ft (KB)

1722.00 ft (CF)

KB to GR/CF: 5.00 ft

Serial #: 6773

Outside

Press@RunDepth: 117.79 psig @ 3195.00 ft (KB)

Start Date: 2014.05.27

End Date:

2014.05.27

Start Time: 04:12:52

End Time:

12:10:16

Capacity: 8000.00 psig

Last Calib.: 2014.05.27

Time On Btm: 2014.05.27 @ 06:48:47

Time Off Btm: 2014.05.27 @ 09:56:47

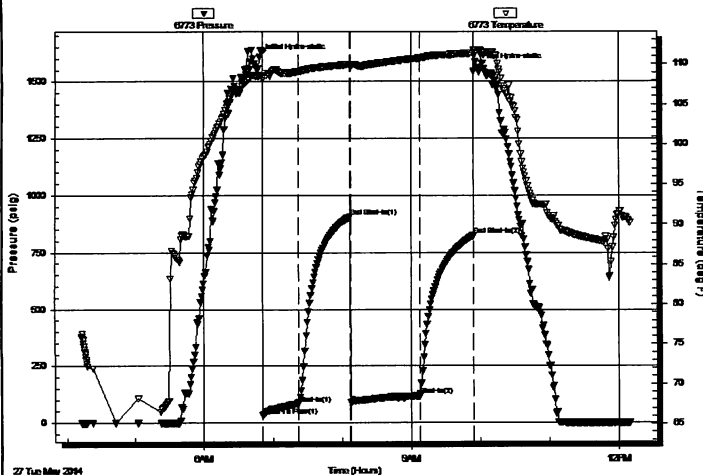
TEST COMMENT: IF: Strong blow . Surf., to 10".

IS: No blow .

FF: Strong blow . B.O.B. in 38 mins.

FSI: Weak blow . Surf., to 1/2".

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1605.16	108.49	Initial Hydro-static
3	31.97	108.24	Open To Flow (1)
30	82.98	109.02	Shut-In(1)
45	79	109.93	End Shut-In(1)
79	87.45	109.85	Open To Flow (2)
140	139	110.70	Shut-In(2)
45	185	111.34	End Shut-In(2)
188	1560.06	111.72	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
124.00	MCOG 15% <i>m</i> 20% <i>o</i> 65% <i>g</i>	0.61
62.00	MWOCG 2% <i>w</i> 13% <i>m</i> 45% <i>o</i> 45% <i>g</i>	0.30
62.00	GMCO 7% <i>g</i> 20% <i>m</i> 73% <i>o</i>	0.30
5.00	Clean oil 100% <i>o</i>	0.07
0.00	G.I.P. 744'	0.00

Gas Rates

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



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TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Connell, Mark Allen

1-19s-10w Rice Co.

606 W. Albro St.
Clafin, Ks. 67525

Behnke #11

Job Ticket: 52025

DST#: 1

ATTN: Seth Evenson

Test Start: 2014.05.27 @ 04:12:47

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 56.00 sec/qt
Water Loss: 8.99 in³
Resistivity: 0.00 ohm.m
Salinity: 4000.00 ppm
Filter Cake: 0.20 inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: deg API
Water Salinity: 4000 ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
124.00	MCOG 15%m 20%o 65%g	0.610
62.00	MVOCG 2%w 13%m 45%o 45%g	0.305
62.00	GMCO 7%g 20%m 73%o	0.305
5.00	Clean oil 100%o	0.070
0.00	G.I.P. 744'	0.000

Total Length: 253.00 ft Total Volume: 1.290 bbl

Num Fluid Samples: 0

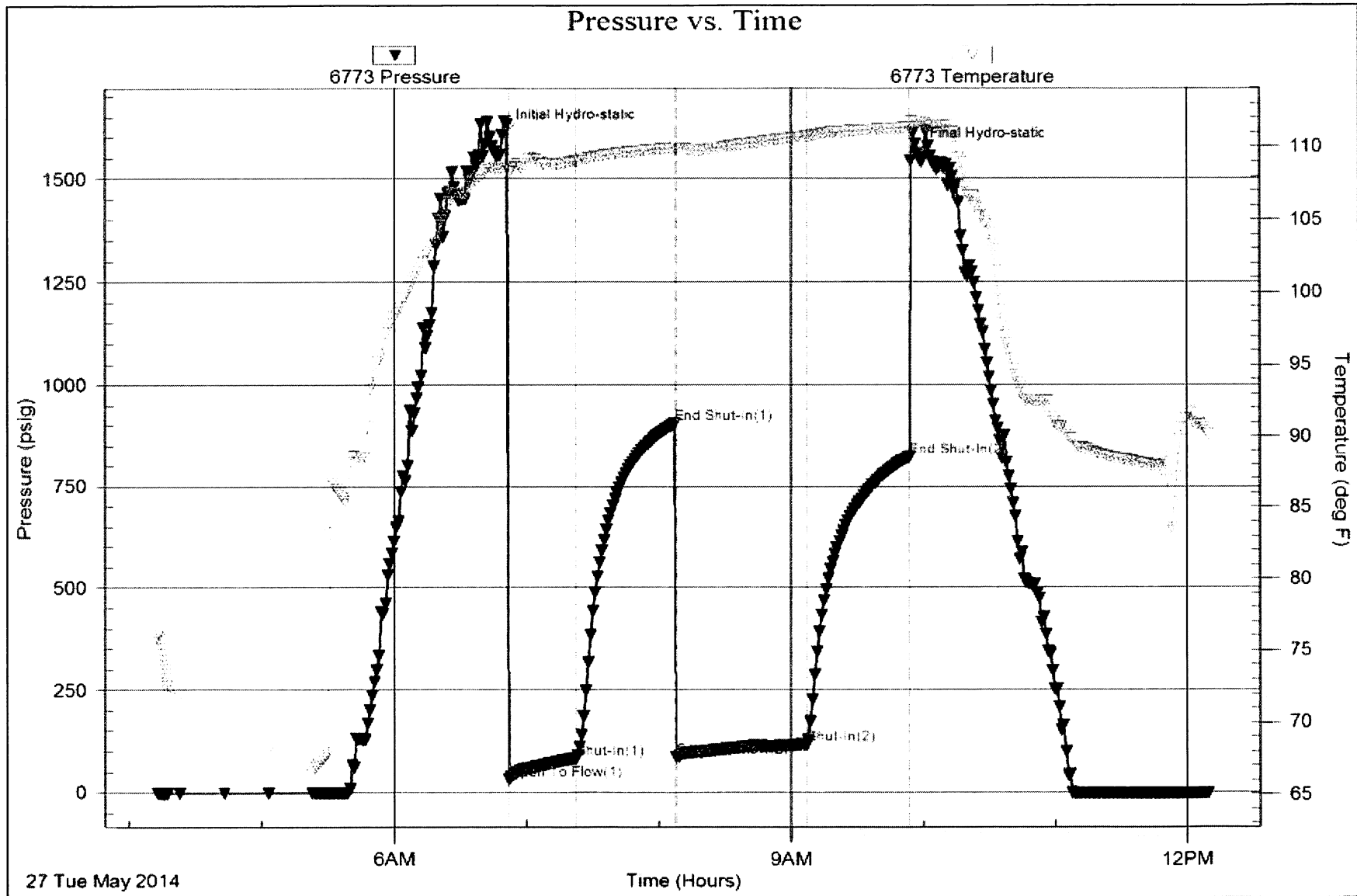
Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:



QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 438

Date	5-28-14	Sec.	19	Range	10	County	Rice	State	KS	On Location	8.15 AM	Finish	12.30														
Lease						Well No.		Owner																			
Behntle						11		2 1/2 E N 30																			
Contractor						Dilling		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.																			
Type Job						Long string																					
Hole Size						T.D.		Charge To																			
7 7/8						3263		Mark Connell																			
Csg.						Depth		Street																			
5/8																											
Tbg. Size						Depth		City																			
								State																			
Tool						Depth		The above was done to satisfaction and supervision of owner agent or contractor.																			
42 ft						742 ft																					
Cement Left in Csg.						Shoe Joint		Cement Amount Ordered																			
								100 Common 10%																			
Meas Line						Displace		Silt 5% Gilsonite																			
						76.5 BBL																					
EQUIPMENT						Common																					
Pumptrk						No.		Cementer		Poz. Mix																	
								Helper																			
Bulktrk						No.		Driver		Gel.																	
								Nick																			
Bulktrk						No.		Driver		Calcium																	
								Ryan																			
JOB SERVICES & REMARKS						Hulls																					
Remarks:						Salt																					
Rat Hole						Flowseal																					
30 SWS																											
Mouse Hole						Kol-Seal																					
30 SWS																											
Centralizers						Mud CLR 48																					
# 2 # 6 # 14						500 gal																					
Baskets						CFL-117 or CD110 CAF 38																					
D/V or Port Collar						Sand																					
Dropped Balls						Handling																					
30 mm						Mileage																					
flush plus but are mouse						FLOAT EQUIPMENT																					
hole mixed 50 lbs						Guide Shoe																					
down hole as place						Centralizer turbos 4																					
76.5 BBL of white						Baskets																					
Lift 600						AFU Inserts																					
Land 1500						Float Shoe																					
						Latch Down																					
						Pumptrk Charge																					
						Mileage																					
<p style="text-align: right;">Tax</p> <p style="text-align: right;">Discount</p> <p style="text-align: right;">Total Charge</p>						<p style="text-align: right;">Signature</p>																					