



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1228374  
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: \_\_\_\_\_



1228374

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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

269032

TICKET NUMBER 47317

LOCATION Ottawa

FOREMAN Alan Maden

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
6-20-14	3000	Nerco SV-4	SW 29	17	21	FR

CUSTOMER  
Stinger Ventures

MAILING ADDRESS  
5113 East North St.

CITY  
Salina

STATE  
KS

ZIP CODE  
67401

TRUCK #	DRIVER	TRUCK #	DRIVER
730	Alan Maden	Safety	Meat
368	Art McD		
675	Kei Car		
548	BreMan		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 762 CASING SIZE & WEIGHT 2 7/8

CASING DEPTH 752 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER 6F 721

SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING yes

DISPLACEMENT 4.19 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: held meeting. Established rate. Mixed & pumped 100# gel followed by 108 sk 50150 cement plus 270 gal and 1/2 ps per sack. Circulated cement. Flushed pump. Pumped plug to casing baffle. Well held 800 PSI. Set float. Closed valve.

Utah, Ken

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1085.00
5406	15	MILEAGE	368	63.00
5402	752	Casing footage	368	—
5407	min	ten miles	548	368.00
5502C	2	80 vsl	675	200.00
1124	108	50150 cement	1242.00	
1128B	281#	gel	61.82	
1107A	54#	pheno seal	72.90	
		material sub less 30%	1376.77	
		Material total	- 413.02	963.70
4402	1	2 1/2 plug		29.50
			3229.80	
		SALES TAX		75.98
		ESTIMATED TOTAL		2785.18

Revin 3737

NO company rep

AUTHORIZATION

J.M. Okid

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



LEASE NAME Neese

OPERATOR Utah oil

START DATE: 17 Jun 14

WELL # 304

LOCATION: Kenton

API #

SURFACE PIPE: 7" Ft 20'0 Cement (bags) 5

PIPE: 2 1/2" SIZE: 2 7/8" = FT

752 Baffle 721.2

TD 762

Thickness	Formation	Comment	Depth	Thickness	Formation	Comment	Depth
11	Limestone		11	5	Shale		289
6	Shale		17	1	Lime		290
5	Limestone		22	37	Shale		327
6	Shale		28	1	Lime	Kc Base	328
6	Lime	Soft	34	66	Shale		394
49	Shale		83	4	Lime		398
1	Lime		84	27	Shale		425
14	Shale		98	29	Lime		454
1	Lime		99	44	Shale		498
1	Shale		100	8	Lime		506
16	Lime		116	10	Shale		516
14	Shale		130	2	Lime		518
1	Lime		131	4	Coal		522
7	Shale		138	5	Shale		527
2	Lime		140	6	Lime		533
3	Shale		143	3	Shale		536
4	Lime		147	6	Lime	oil Show	542
2	Redbed		149	4	Lime/Sand	great Bleed	546
35	Shale		184	3	Lime		549
10	Lime		194	4	Shale		553
3	Shale		197	4	Broken Sand	good Bleed	557
4	Lime		201	5	Shale		562
10	Shale		211	36	Shale		598
13	Lime		224	2	Lime		600
1	Shale		225	8	Shale		608
19	Lime		234	2	Broken		610
1	Shale		235	4	oil Sand	good Bleed	614
3	Lime		238	4	Broken	good Bleed	618
2	Coal		240	4	Shale		622
6	Shale		246	4	Broken	great Bleed mostly sand	626
22	Lime		268	4	Shale		630
4	Shale		272	18	Shale		648
5	Lime		277	3	Coal		651
1	Shale		278	5	Shale		656
6	Lime		284	2	Lime		658

LEASE NAME *Wesley*

OPERATOR

START DATE:

WELL # *504*

LOCATION:

API #

SURFACE PIPE: *1 1/2*

LI

Cement (bags)

PRODUCTION: *1 1/2*

PIPE:

SIZE:

*1 1/2*

Thickness	Formation	Comment	Depth	Thickness	Formation	Comment	Depth
<i>6</i>	<i>Coal</i>		<i>664</i>				
<i>15</i>	<i>Shale</i>		<i>679</i>				
<i>5</i>	<i>Broken</i>	<i>Mostly Shale (No)</i>	<i>684</i>				
<i>1</i>	<i>oil Sand</i>	<i>great Bleed</i>	<i>685</i>				
<i>3</i>	<i>oil Sand</i>		<i>688</i>				
<i>74</i>	<i>Shale</i>	<i>TD</i>	<i>762</i>				
		<i>* Some Sand</i>					
		<i>throughout No show</i>					
		<i>* 1 core 685-705 *</i>					
		<i>30.8 Baffle</i>					
		<i>Ronnie.</i>					

Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair  
Jay Scott Emler, Commissioner  
Pat Apple, Commissioner

Sam Brownback, Governor

October 22, 2014

BRAD LEACH  
Utah Oil LLC  
2394 UTAH RD  
RANTOUL, KS 66079

Re: ACO-1  
API 15-059-26702-00-00  
Neese SV 4  
SW/4 Sec.29-17S-21E  
Franklin County, Kansas

Dear BRAD LEACH:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 06/17/2014 and the ACO-1 was received on October 19, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department