

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1227665

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

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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:					

<div style="text-align: center;"> CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used </div> <div style="text-align: center;">Report all strings set-conductor, surface, intermediate, production, etc.</div>							
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 (Amount and Kind of Material Used)		Depth
TUBING RECORD: Size: Set At: Packer At:			Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No		
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 (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease</p> <p><i>(If vented, Submit ACO-18.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled</p> <p><i>(Submit ACO-5)</i></p> <p><input type="checkbox"/> Other <i>(Specify)</i> _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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Form	ACO1 - Well Completion
Operator	Indian Oil Co., Inc.
Well Name	BK Ohlson SWD 2
Doc ID	1227665

Tops

Name	Top	Datum
STARK SH	4567	-3176
HUSHPUCKNEY SH	4598	-3197
BKC	4656	-3265
PAWNEE	4755	-3360
CHEROKEE GRP	4802	-3411
MISS	4878	-3387
KINDERHOOK	5135	-3744
WOODFORD	5210	-3819
VIOLA	5263	-3872
SIMPSON SAND	5402	-4011
ARBUCKLE	5612	-4221

Form	ACO1 - Well Completion
Operator	Indian Oil Co., Inc.
Well Name	BK Ohlson SWD 2
Doc ID	1227665

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
CONDUCTOR	17.33	13.375	48.00	56	CLASS A	125	2%GEL, 3%CC
SURFACE	12.25	8.625	23.00	912	65/35; CLASS A	475	3%CC,3% GEL;
PRODUCTION	7.825	5.5	15.50	5701	60:40; CLASS A ASC	175	4% GEL; KOLSEAL

ALLIED OIL & GAS SERVICES, LLC 063041

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

Medicine Lodge KS

DATE 9/18/14	SEC. 15	TWP. 35S	RANGE 12W	CALLED OUT 500AA	ON LOCATION 700AA	JOB START 1115 AM	JOB FINISH 1215 PM
LEASE OHLSON	WELL # SUD #2	LOCATION Kiowa jet, West to Roundup Rd,			COUNTY Barber	STATE KS	
OLD OR NEW (Circle one)			South 1 mile, West 1 1/2 mile, North into				

CONTRACTOR Val #5

OWNER Indian Oil

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 919

CASING SIZE 8 5/8 DEPTH 912

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 550 MINIMUM

MEAS. LINE SHOE JOINT 41

CEMENT LEFT IN CSG. 41'

PERFS.

DISPLACEMENT 55 1/2 BBLs Fresh H₂O

EQUIPMENT

PUMP TRUCK CEMENTER Jason Thimesch

548/545 HELPER Justin Bower

BULK TRUCK

421/290 DRIVER Wayne Rucker

BULK TRUCK

DRIVER

REMARKS:

CEMENT

AMOUNT ORDERED 225 sx Class A + 3% cc + 2% Gel, 250 sx 65.35.6% Gel + 3% cc + 4# Flo Seal

COMMON 225 sx @ 17.90 4027.50

POZMIX @

GEL 423 # @ .50 211.50

CHLORIDE 1286 # @ 1.10 1414.60

ASC @

AHW 250 sx @ 19.88 4970.00

Flo Seal 62 # @ 2.97 184.14

@

@

@

@

@

@

HANDLING @

MILEAGE

25% = 2701.93 TOTAL 10,807.74

SERVICE

DEPTH OF JOB 912

PUMP TRUCK CHARGE 2058.50

EXTRA FOOTAGE LV 20 mi. @ 4.40 88.00

MILEAGE 20 mi @ 7.70 154.00

MANIFOLD 1 Head @ 7 275.00

Handling 530.73 @ 2.48 1316.21

Drayage 459.76 @ 2.75 1264.34

25% 1289.01

TOTAL 5150.05

CHARGE TO: Indian Oil

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

8 5/8 Top Rubber Plug 1 @ 131.00

Fiber baffle Plate 1 @ 320.00

Basket 1 @ 560.00

@

@

TOTAL 1011.00

To: Allied Oil & Gas Services, LLC.

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.

SALES TAX (If Any)

TOTAL CHARGES 11,974.79

PRINTED NAME Randy Smith

SIGNATURE Randy Smith

ALLIED OIL & GAS SERVICES, LLC 062816

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:

MEADOW K

DATE 9-17-11 SEC 15 TWP 35 RANGE 12 CALLED OUT 7:00 PM ON LOCATION 12:30 AM JOB START 3:10 JOB FINISH 5:15

LEASE BK 01/02 WELL # SWD 112 LOCATION MEADOW LODGE K SOUTH TO 201 COUNTY BAZ STATE TX
OLD OR NEW (Circle one) OLD to Roundup Road 150th to Spoke Road 3/4 West

CONTRACTOR VAL #5 OWNER INDIAN OIL NORTH TO
TYPE OF JOB Cord

HOLE SIZE 17 1/2 T.D. 603

CASING SIZE 13 3/8 DEPTH 58.31

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 20.25

PERFS.

DISPLACEMENT 5 Bbl H₂O

EQUIPMENT

PUMP TRUCK CEMENTER T. SEGA

892-555 HELPER T.J. Gibson

BULK TRUCK

421-290 DRIVER Robert Johnson

BULK TRUCK

DRIVER

REMARKS:

Run 1 H₂S 13 3/8 54" CSG
+ 15' L₂ = 58.31

mi. 1 Pump 125 x Class A 2-bbl 34.0
0 14.8' gal

Diso 5 Bbl

Class 1000 0.09 75'

Circ out to surface

CHARGE TO: INDIAN OIL

STREET

CITY STATE ZIP

To: Allied Oil & Gas Services, LLC.

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 Randy Smith

SIGNATURE Randy Smith

CEMENT

AMOUNT ORDERED 225 x Class A

2-bbl 34.0

USED 125 SA

COMMON 125 SA A @ 17.90 2237.50

POZMIX @

GEL 235 @ 50 117.50

CHLORIDE 352 @ 1.10 387.20

ASC @

@

@

@

@

@

@

@

@

HANDLING @

MILEAGE

20% = 548.44 TOTAL 2742.20

SERVICE

DEPTH OF JOB 58'

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE 11.20 @ 4.40 88.00

MILEAGE 20 @ 7.70 154.00

MANIFOLD @

Handling 135.21 @ 2.48 335.32

mileage 123.37 @ 2.70 333.11

20% = 484.53

TOTAL 2422.68

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

SALES TAX (If Any)

TOTAL CHARGES 5164.88

ALLIED OIL & GAS SERVICES, LLC 061511

Federal Tax I.D. # 20-8651475

MIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Medicine Lodge, KS

DATE <u>9/30/14</u>	SEC. <u>15</u>	TWP. <u>35S</u>	RANGE <u>12W</u>	CALLED OUT <u>12:45 AM</u>	ON LOCATION <u>3:00 AM</u>	JOB START <u>8:45 AM</u>	JOB FINISH <u>10:30 AM</u>
LEASE <u>Ohlson</u>	WELL # <u>SLD 2</u>	LOCATION <u>Kiowa Jet - W 1/2 Roundup Rd -</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>15-1/4 W to N into</u>					

CONTRACTOR Va/5
TYPE OF JOB Production
HOLE SIZE 7 7/8 T.D. 5701H
CASING SIZE 5 1/2 DEPTH 5701H
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX 2000 psi MINIMUM
MEAS. LINE SHOE JOINT 21 ft
CEMENT LEFT IN CSG. 21 ft
PERFS.
DISPLACEMENT 135 bbl
EQUIPMENT

OWNER Indian Oil
CEMENT
AMOUNT ORDERED 506x60:40:4 1/2 Gal
1253x Class A ASC + 5H Kolseal + 5' LFL/60
+ Deformer
COMMON @
POZMIX @
GEL @
CHLORIDE @
ASC Class A 1253x @ 73.50 7937.50
60:40:4 1/2 Gal 506x @ 18.43 921.50
Kolseal 6025H @ .98 612.50
FL-160 58H @ 18.90 1096.20
Deformer 17.5H @ 3.50 61.25
ASF 12 bbl @ 25.00 300.00
@
@
@
HANDLING @
MILEAGE @
25% = 1482.24 TOTAL 5928.95

REMARKS:

SERVICE

DEPTH OF JOB
PUMP TRUCK CHARGE 3099.25
EXTRA FOOTAGE 111.20 @ 4.40 88.00
MILEAGE 20 @ 7.70 154.00
MANIFOLD + Head @ 775.00
Handling 213.68 cu/ft @ 7.48 929.93
Drayage 9.23/184.67 @ 2.75 507.84
25% = 1163.50 TOTAL 4654.02

PLUG & FLOAT EQUIPMENT

1 LDP @ 660.00
1 Triplex shoe @ 1340.00
8 Centralizers @ 57.00 456.00
@
25% = 644.00 TOTAL 2456.00

CHARGE TO: Indian Oil
STREET
CITY STATE ZIP

To: Allied Oil & Gas Services, LLC.
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 Randy Smith
SIGNATURE Randy Smith



CEMENTING LOG

STAGE NO.

Date 9/30/14 District Medicine Lake Ticket No. 61511
 Company Indian Oil Rig Val 5
 Lease Ohlson Well No. SWA 2
 County Barber State OK
 Location 15-353-12W Field

CASING DATA: Conductor ☐ PTA ☐ Squeeze ☐ Miso ☐
 Surface ☐ Intermediate ☐ Production ☒ Liner ☐
 Size 5 1/2 Type K-55 Weight 15.5 Collar LTC

Casing Depths: Top 0' Bottom 5701'

Drill Pipe: Size 7 7/8 Weight 5701' Collars ft.
 Open Hole: Size 7 7/8 T.D. 5701' ft. P.B. to ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. .0258 Lin. ft./Bbl. 38.7657
 Open Holes: Bbls/Lin. ft. Lin. ft./Bbl.
 Drill Pipe: Bbls/Lin. ft. Lin. ft./Bbl.
 Annulus: Bbls/Lin. ft. .0309 Lin. ft./Bbl. 36.7625
 Bbls/Lin. ft. Lin. ft./Bbl.
 Perforations: From ft. to ft. Amt. ft.

CEMENT DATA:

Spacer Type: ASE
 Amt. 12 bbl Sks Yield ft³/sk Density PPG

LEAD: Pump Time hrs. Type 60140 490 Lwd
(RH/MH) Excess

Amt. 50 Sks Yield 1.4 ft³/sk Density 14.1 PPG

TAIL: Pump Time hrs. Type Class A ASE
5701 Seal 5% FL-1604 Defoamer Excess

Amt. 125 Sks Yield 1.57 ft³/sk Density 14.5 PPG

WATER: Lead 6.7 gals/sk Tail 7.32 gals/sk Total 30 Bbls.

Pump Trucks Used 892-555

Bulk Equip.

Float Equip: Manufacturer Weatherford

Shoe: Type Triplex Shoe Depth 5701

Float: Type Depth

Centralizers: Quantity 8 Plugs Top 1 Btm.

Stage Collars

Special Equip.

Disp. Fluid Type Water Amt. 135 Bbls. Weight 6.33 PPG

Mud Type WBM Weight 9.4 PPG

COMPANY REPRESENTATIVE Anthony Ferrar

CEMENTER Jon Burgess

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
3:00 AM						Arrive on location & Meet w/ CM
3:05 AM						Rig Up Safety Meeting
3:20 AM						Rig Up
4:00 AM						Running Casing
7:00 AM						Circulate
8:45 AM						Per Job Safety Meeting
9:55 AM						Test Lines to 2500 psi
8:56 AM	380		12 bbl		5.5	Pump 12 bbl ASE
9:01 AM	390		35 bbl		5	Pump 125 sks Cement @ 14.5 ppg
9:20 AM						Clean Lines
9:23 AM						Drop Latchdown Plug
9:24 AM	350		135 bbl		7	Displace
9:43 AM	590				3	Slow Rate Last 10 bbl
9:47 AM	1500					Bump Plug @ 800 psi Over
9:49 AM						Check Floats - 75 bbl Back
10:06 AM			13 bbl			Cement Rat Hole & Mouse Hole
10:16 AM						Clean Lines
10:20 AM						Rig Down Safety Meeting
10:30 AM						Rig Down
11:30 AM						Depart Location

FINAL DISP. PRESS: 200 PSI BUMP PLUG TO 1500 PSI BLEEDBACK .75 BBLs.

THANK YOU