



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1230451
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: _____



1230451

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)*

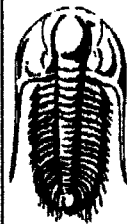
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Red Oak Energy Inc
7701 E Kellogg Dr Ste 710
Wichita, Ks
67207-1738
ATTN: Pat Deenihan

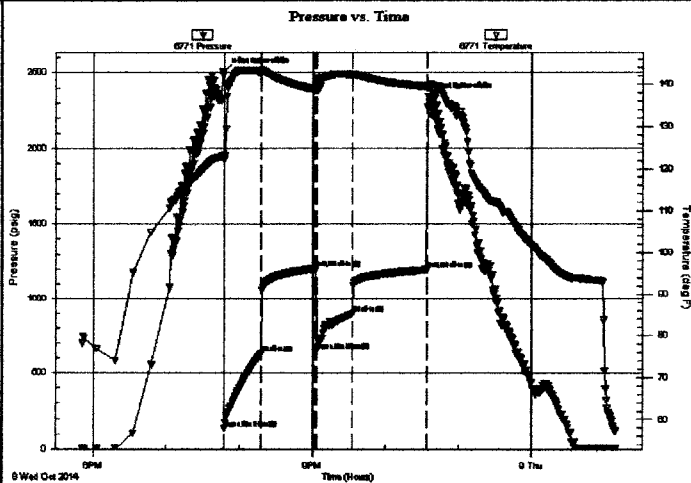
36-8s-35w Thomas, Ks
Dawes #1-36
Job Ticket: 59087 DST#: 2
Test Start: 2014.10.08 @ 17:51:03

GENERAL INFORMATION:

Formation: **Cherokee Lime, Johns**
Deviated: **No Whipstock: 0.00 ft (KB)**
Time Tool Opened: 19:47:48
Time Test Ended: 01:09:03
Test Type: **Conventional Bottom Hole (Reset)**
Tester: **Shane McBride**
Unit No: **55**
Interval: **4607.00 ft (KB) To 4680.00 ft (KB) (TVD)**
Reference Elevations: **3297.00 ft (KB)**
Total Depth: **4680.00 ft (KB) (TVD)**
3286.00 ft (CF)
Hole Diameter: **7.88 inches** Hole Condition: **Fair**
KB to GR/CF: **11.00 ft**

Serial #: 6771 **Inside**
Press@RunDepth: **898.00 psig @ 4608.00 ft (KB)** Capacity: **8000.00 psig**
Start Date: **2014.10.08** End Date: **2014.10.09** Last Calib.: **2014.10.09**
Start Time: **17:51:03** End Time: **01:09:03** Time On Btm: **2014.10.08 @ 19:47:33**
Time Off Btm: **2014.10.08 @ 22:35:03**

TEST COMMENT: B.O.B. in 2 1/2 min
No return
B.O.B. in 5 1/2 min.
No return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2510.33	123.26	Initial Hydro-static
1	133.34	122.05	Open To Flow (1)
31	632.90	143.04	Shut-in(1)
75	1202.66	138.75	End Shut-in(1)
76	654.03	138.47	Open To Flow (2)
106	898.00	142.31	Shut-in(2)
166	1194.67	139.42	End Shut-in(2)
168	2340.47	139.54	Final Hydro-static

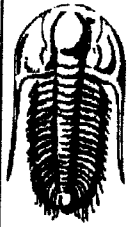
Recovery

Length (ft)	Description	Volume (bbl)
1364.00	water 100%w	16.98
186.00	s mc w 15% m 85% w	2.61
263.00	mc w 35% m 65% w	3.69

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Red Oak Energy Inc
7701 E Kellogg Dr Ste 710
Wichita, Ks
67207-1738
ATTN: Pat Deenihan

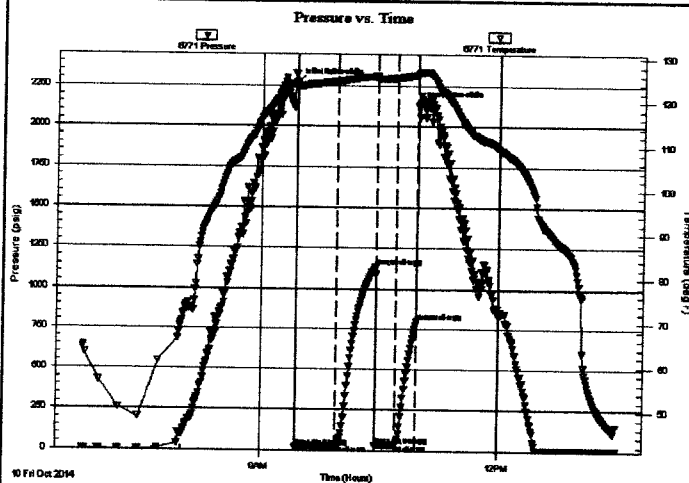
36-8s-35w Thomas, Ks
Dawes #1-36
Job Ticket: 59088 DST#: 3
Test Start: 2014.10.10 @ 06:45:16

GENERAL INFORMATION:

Formation: J
Deviated: No Whipstock: 0.00 ft (KB)
Time Tool Opened: 09:26:46
Time Test Ended: 13:29:46
Interval: 4302.00 ft (KB) To 4342.00 ft (KB) (TVD)
Total Depth: 4849.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Poor
Test Type: Conventional Straddle (Reset)
Tester: Shane McBride
Unit No: 55
Reference Elevations: 3297.00 ft (KB)
3286.00 ft (CF)
KB to GR/CF: 11.00 ft

Serial #: 6771 Inside
Press@RunDepth: 33.86 psig @ 4303.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2014.10.10 End Date: 2014.10.10 Last Calib.: 2014.10.10
Start Time: 06:45:16 End Time: 13:29:46 Time On Btm: 2014.10.10 @ 09:26:31
Time Off Btm: 2014.10.10 @ 10:58:46

TEST COMMENT: 1" in blow died back to a surface blow
No return
No blow
No return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2273.89	124.46	Initial Hydro-static
1	22.97	123.70	Open To Flow (1)
31	29.58	124.71	Shut-in(1)
61	1137.44	125.92	End Shut-in(1)
61	31.86	125.50	Open To Flow (2)
76	33.86	125.54	Shut-in(2)
92	794.80	126.13	End Shut-in(2)
93	2133.28	126.78	Final Hydro-static

Recovery

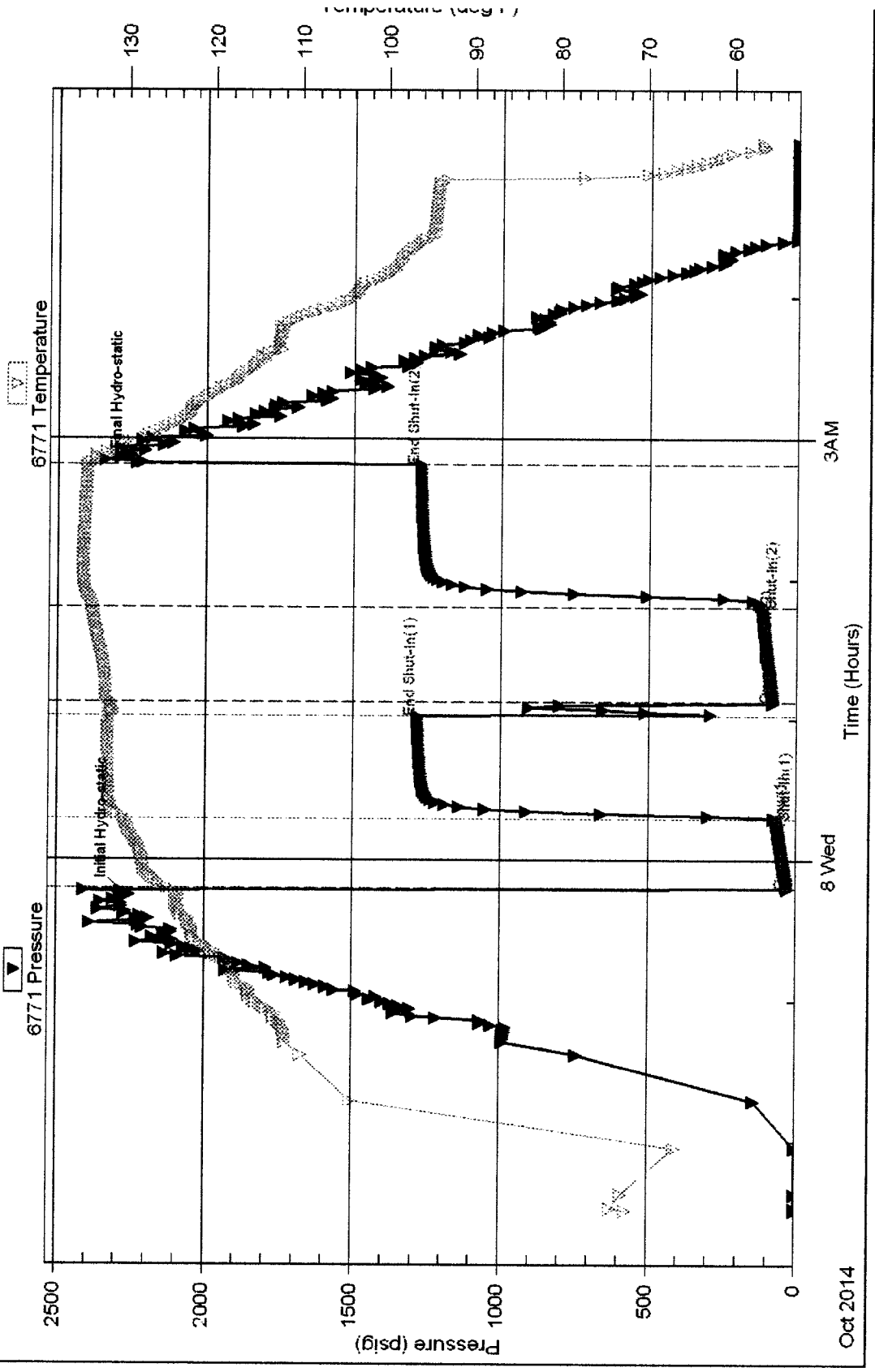
Length (ft)	Description	Volume (bbl)
15.00	mud 100% m	0.07

* Recovery from multiple tests

Gas Rates

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

Pressure vs. Time



ALLIED OIL & GAS SERVICES, LLC 064115

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oakley, KS

36 8 35W

Dawes

DATE <u>10-3-14</u>	SEC. <u>35</u>	TWP. <u>11</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION <u>4:00 pm</u>	JOB START <u>4:00 pm</u>	JOB FINISH <u>4:30 pm</u>
LEASE <u>Red Oak</u>	WELL # <u>1-36-2-35</u>		LOCATION <u>Levant #5, 1E, 1W</u>		COUNTY <u>Moore</u>	STATE <u>KS</u>	
OLD OR (NEW) (Circle one)			<u>EW</u>				

CONTRACTOR Murfin 22

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 352

CASING SIZE 8 1/2 DEPTH 351.09

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 21.51 bbi

OWNER Same

CEMENT AMOUNT ORDERED 290 sks com 3% cc

EQUIPMENT

PUMP TRUCK CEMENTER Lakano Ewente

422 HELPER Wayne McHugh

BULK TRUCK

818/287 DRIVER Chris Medrano (Tals)

BULK TRUCK DRIVER

COMMON 290 sks @ 17.90 5191.00

POZMIX @

GEL @

CHLORIDE 818 # @ 1.10 899.80

ASC @

Material Total @ 6090.80

(1400.88/23%) @

HANDLING 304.5 # @ 2.48 755.16

MILEAGE 14.04 hr X 32 X 2.95 1235.52

REMARKS:

Mix 290 sks cement

Displace with water

Cement did circulate

30% to pit

Thank you

CHARGE TO: Red Oak Energy

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL _____

SERVICE

DEPTH OF JOB 351.09'

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @

MILEAGE MTH 32 @ 7.70 246.40

MANIFOLD seage @ 275.00

MICU 32 @ 4.40 140.80

(957.98/23%) TOTAL 4,165.13

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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) _____

PRINTED NAME _____

TOTAL CHARGES 10,255.93

SIGNATURE Shirley Labala

DISCOUNT 2,358.86 (23%) IF PAID IN 30 DAYS

7,897.06 Net

ALLIED OIL & GAS SERVICES, LLC 064285

Federal Tax I.D. # 20-8651475

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

SERVICE POINT: Oakley KS

Dawes

DATE <u>10-10-14</u>	SEC <u>36</u>	TWP <u>8</u>	RANGE <u>35W</u>	CALLED OUT	ON LOCATION <u>10:00am</u>	JOB START	JOB FINISH
LEASE <u>Rohlfeder</u>	WELL # <u>36-2-35</u>	LOCATION <u>Levant 4S 1E 1N</u>			COUNTY <u>Thomas</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one) <u>into</u>							

CONTRACTOR Martin 22

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 4000'

CASING SIZE _____ DEPTH _____

TUBING SIZE 4 1/2 DEPTH _____

DRILL PIPE _____ DEPTH 2820'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 5 cu ft / 27.99 cu ft

EQUIPMENT

OWNER Same

CEMENT AMOUNT ORDERED 255 sks 60/40
4% gel 1/4 # Flo-seal

COMMON	@	_____	_____
POZMIX	@	_____	_____
GEL	@	_____	_____
CHLORIDE	@	_____	_____
ASC	@	_____	_____
<u>Lite (60/40/4)</u>	@	<u>255 sks</u>	<u>18.92</u>
<u>Flo-seal 64 #</u>	@	<u>64 #</u>	<u>2.97</u>
<u>Material total</u>	@		<u>5,046.88</u>
<u>(1133.38/23%)</u>	@		
HANDLING <u>373.8787</u>	@	<u>2.48</u>	<u>679.20</u>
MILEAGE <u>11.44 hrs x 30 mi</u>	@	<u>2.75</u>	<u>943.80</u>
TOTAL			_____

PUMP TRUCK CEMENTER Paul Beaver

120 HELPER Tyler Flipse/Romero

BULK TRUCK DRIVER Chris (TWS)

372/308

BULK TRUCK DRIVER _____

REMARKS:

mix 50 sks @ 2820 Displace volume

mix 100 sks @ 1870 Displace volume

mix 50 sks @ 400'

mix 10 sks @ 40' w/ plug

mix 32 sks in R.H.

mix 15 sks in M.H.

Thank You!
Paul + Crew

CHARGE TO: Red Oak Energy

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>2820</u>		
PUMP TRUCK CHARGE			<u>2483.59</u>
EXTRA FOOTAGE	@	_____	_____
MILEAGE MIL HV	<u>30</u>	@ <u>7.70</u>	<u>231.00</u>
MANIFOLD	@	_____	_____
<u>MILV</u>	<u>30</u>	@ <u>4.40</u>	<u>132.00</u>
TOTAL			<u>4,469.59</u>

(1028.00/23%)

PLUG & FLOAT EQUIPMENT

_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
TOTAL			_____

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 _____

SIGNATURE Jimmy Yebbe

SALES TAX (If Any) _____

TOTAL CHARGES 9,484.27

DISCOUNT 2,181.38 (23%) IF PAID IN 30 DAYS

7,302.88 Net.

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

April 14, 2015

Rusty C Mourning
Red Oak Energy, Inc.
7701 E KELLOGG DR STE 710
WICHITA, KS 67207-1738

Re: ACO-1
API 15-193-20933-00-00
Dawes 1-36
NW/4 Sec.36-08S-35W
Thomas County, Kansas

Dear Rusty C Mourning:

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 10/03/2014 and the ACO-1 was received on April 14, 2015 (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