



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1230510
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: _____

1230510

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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Hurricane Services, Inc.
 104 Prairie Plaza Parkway
 Garnett, KS 66032
 Office # 785-448-3100
 Toll Free # 855-718-8027



Ticket Nº 50374
 Location _____
 Foreman Joe Blanchard

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
8-19-14		N. Kempnich 17-1W0		Anderson
Customer		Mailing Address	City	State Zip
Martin Oil Properties				

Job Type:

Truck #	Driver
26	Joe
231	Tam
108	Jeff. G
110	Scott
242	Amos
Extra	Alex

Quantity Or Units	Description of Services or Product	Pump charge	
0 mi	Mileage Pump truck #231	\$3.25/Mile	NC
0 mi	Pump truck Pickup #26	1.50	NC
97 SK	50/50 Poz mix	11.30	1096.00
197 LB	Prem Gel 2%	.30	59.00
200 LB	Prem Gel Sweep	.30	60.00
24 LB	Flo Seal	2.15	51.00
1 hr	80 vac #108	84.00	84.00
1 hr	80 vac #110	84.00	84.00
4600 Gal	Garnett water	1.34	59.80
4.07 Tons	Bulk Truck minimum charge #242	\$1.15/Mile	150.00
1	Plugs 2 7/8 Top Plug	25.00	25.00
		2344.60	Subtotal 2,110.14
	10% discount 70%	234.46	Sales Tax 98.82
			Estimated Total 2,208.96

Remarks: Hook onto well achieved circulation Pumped 15 bbl Gel Sweep + 15 bbl water followed by 97 SKS 50/50 Poz mix Cement. Shut down Flush pump. Pumped Plug To Bottom & Set float shoe. Cement To Surface.

PAID
 8-21-14
 NKAFE

From: "Evans Energy Development Incorporated"
 <eedi@eedionline.com>
 Date: August 20, 2014 7:19:50 AM CDT
 To: <sbmartin@coxinet.net>
 Subject: **North Kempnich #17-IWU**
 Reply-To: <eedi@eedionline.com>

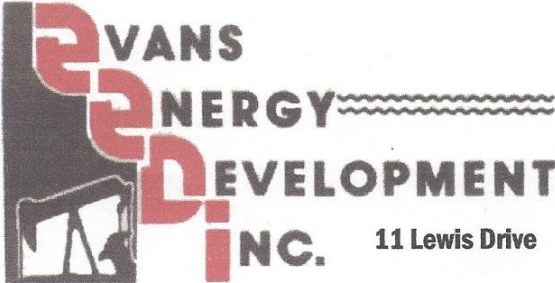
Please find attached the North Kempnich #17-IWU well log.

Vicki Kemplay

Office Manager



11 Lewis Dr.
 Paola, KS 66071
 (913)557-9083
 eedi@eedionline.com
 www.eedionline.com



EVANS ENERGY DEVELOPMENT INC.

11 Lewis Drive Paola, KS 66071

WELL LOG
 Tailwater, Inc.
 North Kempnich #17-IWU
 API #15-003-26,241
 August 18 - August 19, 2014

**Oil & G
 Water |
 Geo-Lo**

P
 F

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
8	soil & clay	8
4	clay & gravel	12
95	shale	107
24	lime	131
49	shale	180
12	lime	192
5	shale	197
22	lime	222

30	lime	230
6	shale	239
40	lime	279
3	shale	282
22	lime	304 base of the Kansas C
43	shale	347
12	sand	359 grey, no oil
124	shale	483
2	lime	485
7	shale	492
6	lime	498 oil show
24	shale	522
1	coal	523
1	shale	524
16	oil sand	540 green, ok bleeding
6	shale	546
1	coal	547
6	shale	553
6	lime	559
6	shale	565
2	lime	567
6	shale	573
5	lime	578
19	shale	597
10	lime	607
45	shale	652
1	limey sand	653 white & grey, no oil
5	broken sand	658 brown & green, ok bl
25	shale	683 TD

Drilled a 9 7/8" hole to 21.7'

Drilled a 5 5/8" hole to 683'

Set 21.7' of 7" surface casing threaded and coupled cemented with 5 sacks of cement.

Set 678' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.