



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1232441
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: _____

1232441

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 Yes No
(Attach Additional Sheets)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No

Log Formation (Top), Depth and Datum Sample
Name Top Datum

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 (Amount and Kind of Material Used)	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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Commingled (Submit ACO-4)



Operator:
Grand Mesa Operating Co.
Wichita, KS

Vesecky #1-5

Douglas Co., KS
23-14S-20E
API: 045-22229

Spud Date:	8/14/2014	Surface Bit:	11.0"
Surface Casing:	7.0"	Drill Bit:	6.125"
Surface Length:	46.50'	Longstring:	757.50'
Surface Cement:	10 sx	Longstring Date:	8/18/2014
Longstring:			

Driller's Log

Top	Bottom	Formation	Comments
0	14	Soil & clay	
14	34	Sand & Gravel	
34	47	Shale	
47	55	Lime	
55	61	Bl. Shale	
61	78	Lime	
78	87	Bl. Shale	
87	94	Lime	
94	99	Shale	
99	102	Lime	
102	108	Shale	
108	117	Shale	
117	119	Lime	
119	129	Sandy Shale	
129	136	Shale	
136	138	Lime	
138	154	Shale	
154	173	Lime	
173	237	Shale	
237	261	Lime	
261	274	Bl. Shale	
274	289	Lime	
289	320	Shale	
320	327	Lime	

Vesecky #1-5

327	331	Shale	Douglas Co., KS
331	333	Lime	
333	340	Shale	
340	365	Lime	
365	373	Bl. Shale	
373	398	Lime	
398	402	Bl. Shale	
402	404	Lime	
404	409	Shale	
409	416	Lime	
416	420	Bl. Shale	
420	556	Shale	
556	558	Coal	
558	586	Shale	
586	591	Lime	
591	596	Shale	
596	600	Lime	
600	608	Shale	
608	615	Lime	
615	629	Shale	
629	631	Lime	
631	637	Bl. Shale	
637	642	Lime	
642	646	Shale	
646	650	Lime	
650	651	Shale	
651	653	Lime	
653	673	Shale	
673	678	Lime	
678	688	Shale	
688	690	Sand	Good oil saturation & bleed, gassy
690	693	Sand	Lighter saturation and bleed
693	698	Sand	More laminated, top has good bleed,
698	762	Shale	more shale towards the bottom
762		TD	

Coring		
Run	Footage	Rec.
1	682-702	17'



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

2nd well

TICKET NUMBER 59641
FIELD TICKET REF # 50072
LOCATION Thayer
FOREMAN Gary Wilke

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-19-14		Visecky # 1-5				DG
CUSTOMER Grand Mesa			TRUCK #		DRIVER	
MAILING ADDRESS			524		Trumpis	
CITY			458		Jim	
STATE			582		Matt	
ZIP CODE			521		Eric	
			735/T 91		George	

WELL DATA

CASING SIZE <i>2 1/2</i>	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<i>688-97</i> (19)	

TYPE OF TREATMENT
Acid Spot/ABO/Frac

CHEMICALS

<i>6300 gal City Water</i>	<i>200 15% HCl Acid</i>
<i>KCl Sub.</i>	<i>Inhibitor</i>
<i>20+ gal Breaker</i>	<i>Stimul</i>
<i>Blocker, StimPhx</i>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI
<i>Pad</i>	<i>15</i>	<i>-16</i>			<i>BREAKDOWN 1500</i>
<i>11/30</i>				<i>300</i>	<i>START PRESSURE</i>
<i>12/20</i>				<i>1700</i>	<i>END PRESSURE</i>
<i>cut sand - flush</i>					<i>BALL OFF PRESS</i>
<i>12/20 3+1+1 bits</i>				<i>1</i>	<i>ROCK SALT PRESS</i>
<i>12/20</i>				<i>2000</i>	<i>ISIP 525</i>
<i>Flush + Over</i>	<i>10</i>				<i>5 MIN</i>
<i>Release - pump - release</i>					<i>10 MIN</i>
<i>Overturn</i>	<i>5</i>				<i>15 MIN</i>
					<i>MIN RATE</i>
					<i>MAX RATE</i>
<i>Totals</i>	<i>130</i>			<i>4000</i>	<i>DISPLACEMENT</i>
	<i>+20 ABO</i>				
	<i>150</i>				

REMARKS: *Spot 75 acid to perfs - breakdown and stage*

Establish rate 4 bpm - 125 acid w/ 30 ball sealers

Flush to perfs. - release - pump - release

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.