



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1234436
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: _____



1234436

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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Scale: 5" / 100'
Measured Depth Log

Well Name Balzer C5
Location 1650' FNL & 1750'FWL, E/2 NW SE NW 35 -T23S - R2E
State Kansas **County** Harvey
Country USA **Rig Number** Gulick Drilling Rig 1
API Number 15-079-20707-00-00
Region Midcon **Field** Annelly
Spud Date 9/16/2014 **Drilling Completed** 9/18/2014
Bottom Hole Coordinates Vertical Test
Ground Elevation 1397' GL **K.B. Elevation** 1405'
Logged Interval 2700 **To** RTD **Total Depth** 3010'
Formation Mississippian
Type of Drilling Fluid Chemical

Operator

Company W.D. Short Oil Co. LLC
Address 102 South River Rd
P.O.Box 729
Oxford, Kansas 67119-8801

Geologist

Name Daniel T. Johnson
Company Consulting Geologist/ Gas Detection System
Address 19749 121st Rd
Winfield, Kansas 67156
620-229-3258
daniel.johnson3258@gmail.com

Other

5 1/2" production casing was set to further test the Mississippian Ls.

Pioneer Energy Services: CNL/CDL,MEL/BHCS,DIL,Fracfinder
Deviation surveys:538' 1/2deg

1044' 1/2deg

1549' 3/4deg

2021' 3/4deg

9/15/2014:Moved In,drilled 215'of 12 1/4",set 203' of 8 5/8" w/120 sks



9/16: Drilled beneath surface casing 8:00am



9/17: 1150'Drilling


9/18: 2868'Drilling, reached 3010'RTD at 4:00pm,short trip,trip out for log,logs out about 5:00am,

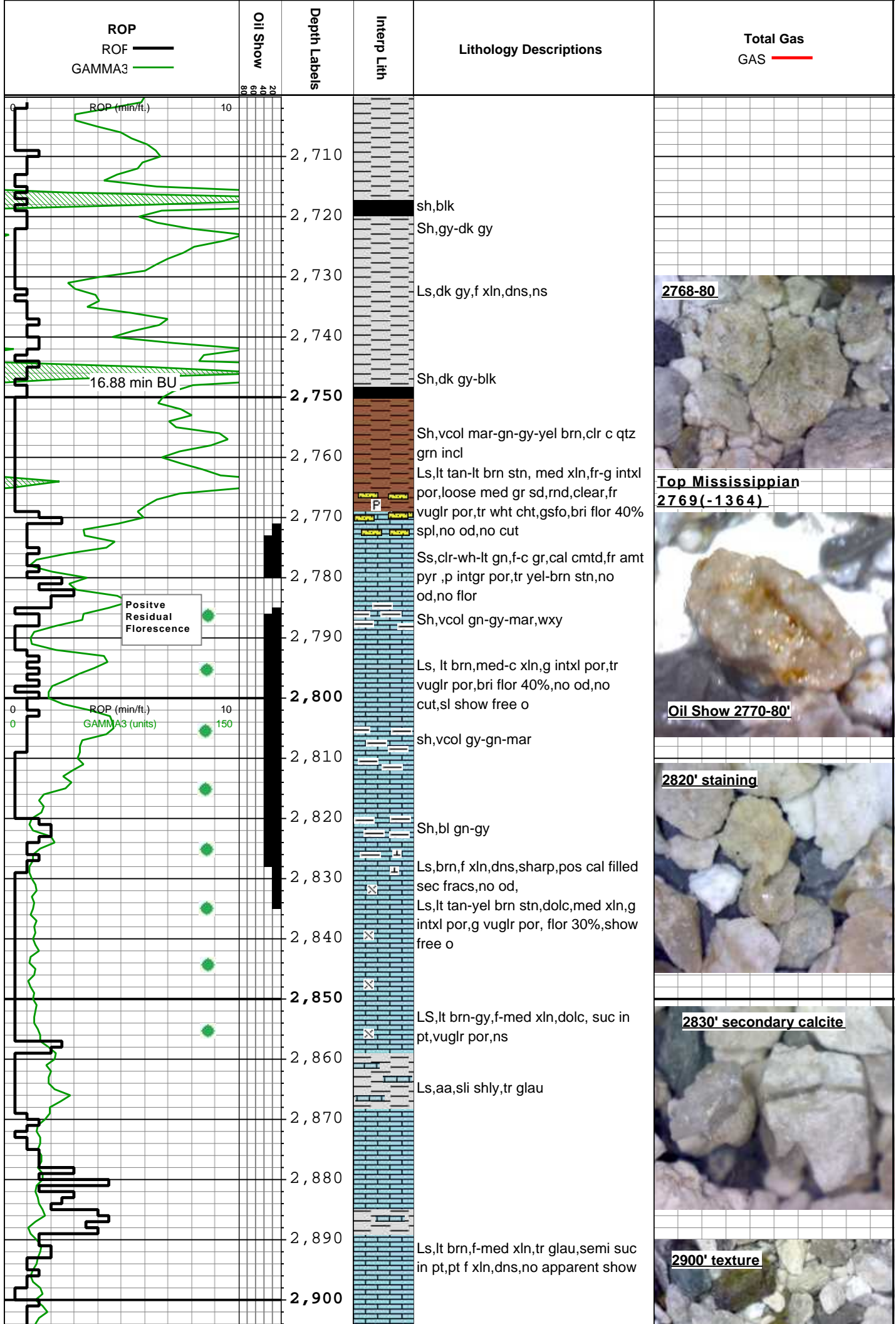
9/19: 3010'Running in w/ 5 1/2"production casing, set casing at 3004'KB depth w/100sks

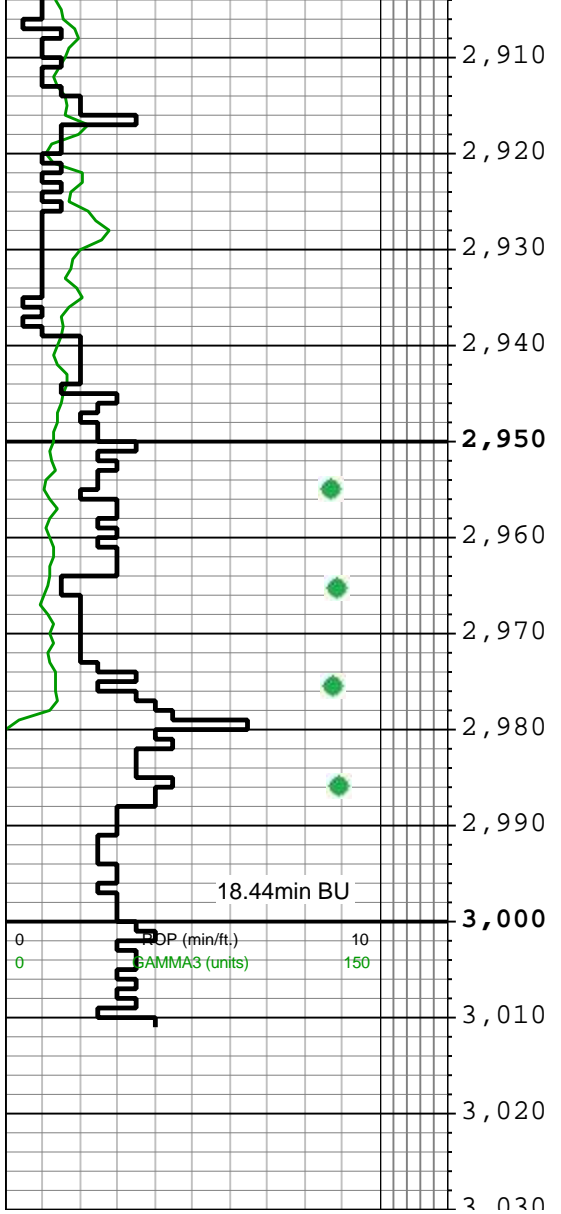
Rock Types

 LIMESTONE
 CHERT

 COAL
 SHALE GRAY

 SHALE COLORED
SANDSTONE





Ls,lt tan,med xln,fr intxl por,ns

Ls,lt tan-lt gy,f xln,p-fr intxl por

LS,lt brn-brn,f-med xln,cht,wh-lt gy,fos frag frmwk,no wthrg,ns

Ls,med brn,stand in pt,med xln,fr-g intxl por,dolc in pt,no od,bri flor 30%,rainbow show free o

E-Log Depth 3004(-1599)

Rotary Total Depth 3010(-1605)



2990' textures

0 GAS (units) 100



Elite Cementing & Acid Service, LLC

810 E 7th, PO Box 92
Eureka, KS 67045



Date	Invoice #
9/22/2014	1660

Bill To	
W.D. Short Oil Company PO Box 729 Oxford, KS 67119	
Customer ID#	1019

O.K.

Job Date	9/19/2014
Lease Information	
Balzer C-5	
County	Harvey
Foreman	RL

Item	Description	Qty	Rate	Amount
			Terms	Net 30
C102	Cement Pump-Longstring	1	1,050.00	1,050.00
C107	Pump Truck Mileage (one way)	30	3.95	118.50
C201	Thick Set Cement	100	19.50	1,950.00T
C207	KolSeal	500	0.45	225.00T
C208	Pheno Seal	100	1.25	125.00T
C217	Caustic Soda	100	1.60	160.00T
C108A	Ton Mileage (min. charge)	1	345.00	345.00
C421	5 1/2" Latch Down Plug	1	230.00	230.00T
C504	5 1/2" Centralizer	5	48.00	240.00T
C604	5 1/2" Cement Basket	2	225.00	450.00T
C691	5 1/2" Guide Shoe	1	167.00	167.00T
C703	5 1/2" AFU Flapper Valve Insert	1	145.00	145.00T

We appreciate your business!

Phone #	Fax #
620-583-5561	620-583-5524
E-mail	
rene@elitecementing.com	

Subtotal	\$5,205.50
Sales Tax (8.15%)	\$300.90
Total	\$5,506.40
Payments/Credits	\$0.00
Balance Due	\$5,506.40

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **1660**
 Foreman Russ Ledford
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
9-19-14	1019	Balzer C-5	35	23S	2E	Harvey	Ks
Customer			Unit #	Driver	Unit #	Driver	
W.D. Short Oil Co. LLC			104	Alan M			
			112	John S.			
Mailing Address							
P.O. Box 229							
City	State	Zip Code					
Oxford	Ks	67449					

Job Type L/S Hole Depth 3010' Slurry Vol. 33 Bbl Tubing _____
 Casing Depth 3061' RB Hole Size 7 7/8" Slurry Wt. 13.7" Drill Pipe _____
 Casing Size & Wt. 5 1/2" 15 lb/ft Cement Left in Casing 2' Water Gal/SK 9.0 Other 3004 RBTD
 Displacement 7 1/2 Bbl Displacement PSI 500 Bump Plug to 1000' BPM _____

Remarks: Safety meeting. Rig up to 5 1/2" casing. Break circulation w/ 10 Bbl fresh water pump. 100' caustic soda pre-flush, 10 Bbl water spacer. Mixed 100 sacks thickset cement w/ 5" Kal-seal/br + 1" phos-seal/br @ 13.7"/gal yield 185. Shut down, washed pump + lines, release 5lb latch down plug. Displace w/ 7 1/2 Bbl fresh water. Final pump pressure 500 PSI. Bump plug to 1000' PSI. Release pressure. Check plug held. Good circulation @ all times while cementing. Trip complete. Rig down.

"Thank You"

Calculated on ST 3, 5, 7, 11
 based on 4, 6

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1050.00	1050.00
C107	30	Mileage	3.95	118.50
C201	100 sacks	Thickset cement	19.50	1950.00
C207	500'	5" Kal-seal/br	.45	225.00
C208	100'	1" phos-seal/br	1.25	125.00
C217	100'	caustic soda pre-flush	1.60	160.00
C107A	5.5	tax mileage built tax	m/c	345.00
C421	1	5lb latch down plug	230.00	230.00
C504	5	5 1/2" x 7 7/8" centralizers	48.00	240.00
C104	2	5lb barrets	225.00	450.00
C691	1	5lb Guide Shoe	167.00	167.00
C203	1	5lb AFU flange wire insert	145.00	145.00
			Subtotal	5205.50
			Sales Tax	300.90
			<u>8157.60</u>	<u>5506.40</u>

Authorization _____ Title _____ Total 5506.40

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

Elite Cementing & Acid Service, LLC

810 E 7th, PO Box 92
Eureka, KS 67045



Date	Invoice #
9/16/2014	1645

O.K.

Bill To
W.D. Short Oil Company PO Box 729 Oxford, KS 67119

Job Date	9/15/2014
Lease Information	
Balzer #C-5	
County	Harvey
Foreman	SM

Customer ID#	1019
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Item	Description	Qty	Terms	Net 30
			Rate	Amount
C101	Cement Pump-Surface	1	840.00	840.00
C107	Pump Truck Mileage (one way)	30	3.95	118.50
C200	Class A Cement-94# sack	120	15.00	1,800.00T
C205	Calcium Chloride	335	0.60	201.00T
C206	Gel Bentonite	225	0.20	45.00T
C108A	Ton Mileage (min. charge)	1	345.00	345.00

We appreciate your business!

Phone #	Fax #
620-583-5561	620-583-5524
E-mail	
rene@elitecementing.com	

Subtotal	\$3,349.50
Sales Tax (8.15%)	\$166.75
Total	\$3,516.25
Payments/Credits	\$0.00
Balance Due	\$3,516.25

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **1645**
 Foreman Steve Mead
 Camp Eureka

APZ 15-679-20707

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
9-15-14	1019	Balzer # C-5	35	23S	2E	Harvey	Ks	
Customer			Unit #		Driver		Unit #	Driver
W.D. Short Oil Co. LLC			1041		Alan M			
Mailing Address			110		Scott W.			
P.O. Box 729								
City		State	Zip Code					
Oxford		Ks	67119					

Job Type Surface Hole Depth 216' Slurry Vol. _____ Tubing _____
 Casing Depth 303 G.L. Hole Size 12 3/4 Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 8 5/8 23' Cement Left in Casing 15' Water Gal/SK _____ Other _____
 Displacement 12 3/4 bbls Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting: Rig up to 8 5/8 casing. Break circulation by Fresh water
Mix 120SKS Class A Cement by 3% CaCl2, 2% Gel. Displace w/ 12 3/4 bbls
Freshwater. Shut well in. Just got Good Cement to surface.
Job Complete Rig Down

Thank you

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	840.00	840.00
C107	20	Mileage	3.95	118.50
C200	120SKS	Class A Cement	15.00	1800.00
C205	335*	CaCl2 3%	.60	201.00
C206	225*	Gel 2%	.20	45.00
Class A	5.64 ton	Ton mileage bulk truck	m/c	345.00
			Sub Total	3349.50
			8.15% Sales Tax	166.75
Authorization <u>Called by Mike Stafford</u> Title <u>Tool Pusher</u>			Total	3516.25

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.