



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1233487
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: _____

1233487

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

RECEIVED
OCT 14 2014
BY: AZ

20589

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 271662

=====
Invoice Date: 10/10/2014 Terms: 0/30/10,n/30 Page 1
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TAOS RESOURCES OPERATING, LLC
1455 WEST LOOP SOUTH, ST. 600
HOUSTON TX 77027
(713)993-0774

GROENE 9-1
46486
9/33S/5E
10/07/2014
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	185.00	15.7000	2904.50
1102	CALCIUM CHLORIDE (50#)	550.00	.7800	429.00
1118B	PREMIUM GEL / BENTONITE	350.00	.2200	77.00
1107	FLO-SEAL (25#)	200.00	2.4700	494.00

Sublet Performed	Description	Total
9996-180	CEMENT MATERIAL DISCOUNT	-1171.05

Description	Hours	Unit Price	Total
446 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
446 EQUIPMENT MILEAGE (ONE WAY)	50.00	4.20	210.00
479 TON MILEAGE DELIVERY	435.00	1.41	613.35

WELL ID/AFE #	<u>175D537</u>
CODE	<u>830.130</u>
<input checked="" type="checkbox"/> NORR	<u>[Signature]</u>
	APPROVAL

Amount Due 5847.75 if paid after 10/20/2014

Parts:	3904.50	Freight:	.00	Tax:	174.95	AR	<u>4601.75</u>
Labor:	.00	Misc:	.00	Total:	4601.75		
Sublt:	-1171.05	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808	EL DORADO, KS 316/322-7022	EUREKA, KS 620/583-7664	PONCA CITY, OK 580/762-2303	OAKLEY, KS 785/672-8822	OTTAWA, KS 785/242-4044	THAYER, KS 620/839-5269	GILLETTE, WY 307/686-4914	CUSHING, OK 918/225-2650
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 46486
LOCATION GL DORADO
FOREMAN Fuzzey

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

271662
FIELD TICKET & TREATMENT REPORT
CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-7-14	2871	Groene 9-1	9	335	5E	Cowley
CUSTOMER TAOS OPER Resources			Cowley 1 + 160			
MAILING ADDRESS 1455 W. Loop South Ste 600			4 south			
CITY Houston			14W			
STATE TX			M/R			
ZIP CODE 72054						
TRUCK #	DRIVER	TRUCK #	DRIVER			
446	Josh					
479	Dustin					

JOB TYPE surfact HOLE SIZE 12 1/4 HOLE DEPTH 266' CASING SIZE & WEIGHT 8 5/8
CASING DEPTH 266' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 14.7 SLURRY VOL 1.36 WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
DISPLACEMENT 15.6 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on TAOS (UAD)*3. Risup and circulate.
Mix 1855#s Class A 370cc 29oz 1# poly flake. Displace 15 1/2
BAL and shut in.
Cement did circulate approx 5 BALs to pit.

Thanks
Fuzzey & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00 ✓
5406	50	MILEAGE	4.20	210.00 ✓
5407	8.7 don	Tow mileage Delivery	1.21	613.31 ✓
11045	185 ^{KS} 500 *	Class A	15.20	2904.00 ✓
1102	550	Calcium chloride	1.78	429.00 ✓
1118B	350	Bentonite	2.22	77.00 ✓
1107	200*	Poly-flake	2.47	494.00 ✓
		subtotal		5597.85 ✓
		Disc		1171.05 ✓
		subtotal		4426.80 ✓
		SALES TAX		174.95 ✓
		ESTIMATED TOTAL		4601.75 ✓

AVIN 8787 AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form



CONSOLIDATED
Oil Well Services, LLC

RECEIVED
OCT 27 2014
A2

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 271932

Invoice Date: 10/23/2014 Terms: 0/30/10,n/30 Page 1

TAOS RESOURCES OPERATING, LLC
1455 WEST LOOP SOUTH, ST. 600
HOUSTON TX 77027
(713)993-0774

GROENE 9-1
46449
9/33/5
10/11/2014
KS

WELL ID/AFE # 175D537
CODE 840.130
NORR
APPROVAL *[Signature]*

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	275.00	15.7000	4317.50
1102	CALCIUM CHLORIDE (50#)	550.00	.7800	429.00
1118B	PREMIUM GEL / BENTONITE	825.00	.2200	181.50
1110A	KOL SEAL (50# BAG)	1375.00	.4600	632.50
1144G	MUD FLUSH (SALE)	500.00	1.1000	550.00
4104	CEMENT BASKET 5 1/2"	2.00	290.0000	580.00
4136S	TURBOLIZER S BAND 5 1/2"	7.00	134.0500	938.35
4159	FLOAT SHOE AFU 5 1/2"	1.00	433.7500	433.75
4234	5 1/2" ALUMINUM BAFFLE P	1.00	80.0000	80.00
4454	5 1/2" LATCH DOWN PLUG	1.00	318.2500	318.25

Sublet Performed	Description	Total
9996-180	CEMENT MATERIAL DISCOUNT	-1668.15

Description	Hours	Unit Price	Total
467 CEMENT PUMP	1.00	1085.00	1085.00
467 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.20	189.00
713 TON MILEAGE DELIVERY	630.00	1.41	888.30
713 CASING FOOTAGE	2174.00	.23	500.02

Amount Due 11664.67 if paid after 11/02/2014

Parts:	8460.85	Freight:	.00	Tax:	434.74	AR	9889.76
Labor:	.00	Misc:	.00	Total:	9889.76		
Sublt:	-1668.15	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-8822 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914 CUSHING, OK 918/225-2650



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8676

271932

TICKET NUMBER 46449
LOCATION 180
FOREMAN Jeff Shell

FIELD TICKET & TREATMENT REPORT

CEMENT API# 15-035-24604-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/11/14	2871	Groene 9-1	9	33	5	Cowley
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Taas Resources operating co.			467	Ren		
MAILING ADDRESS			717	Judd		
1455 W loops Suite 600			539	Jeff		
CITY	STATE	ZIP CODE				
Houston	TX	77027				

JOB TYPE long string HOLE SIZE 7 7/8 HOLE DEPTH 3680 CASING SIZE & WEIGHT 5 1/2
 CASING DEPTH 3674 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 71.5 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 86.7 DISPLACEMENT PSI 900 MIX PSI 100 RATE 4.0

REMARKS: Safety Meeting, brake circ. Pumped 500g91 mud flush. Plugged
rgt hole with 305SKS of class cement Pumped 245.5SKS class cement
2% Calcium 3% gel 5% Kol/se91 displaced to bottom with 86.7 bbls
fresh water landed plug at 1500 lbs

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	45	MILEAGE	4.20	189.00
5407A	14 Ton	Ton Mileage Delivery		898.30
11045	2755sk	class A cement	15.70	4317.50
1102	5501bs	calcium chloride	.78	429.00
11188	825lbs	Gel	.22	181.50
1110A	1375lbs	Kol/se91	.46	632.50
1144G	500g91	DV1100 Mud flush	1.10	550.00
5408	2174ft	Casing footage (1500' or deeper)	.23	500.02
4104	2	5 1/2 cement baskets	290.00	580.00
4136.5	7	5 1/2 S Band Turbolicizers	134.05	938.35
4159	1	5 1/2 A F U Float Shoe	433.75	433.75
4234	1	5 1/2 Aluminum Raffle Plate	80.00	80.00
4454	1	5 1/2 latch down Plug	318.25	318.25
			Subtotal	11,123.17
		Minus 30% material Discount		1668.15
			Subtotal	9455.02
			SALES TAX	434.74
			ESTIMATED TOTAL	9889.76

Ravin 8787

AUTHORIZATION

[Signature]

TITLE

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

