

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1235823
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: _____

1235823



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: Yes No

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> _____					
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. <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Cross Bar Energy, LLC
Well Name	Burkett 'D' 40
Doc ID	1235823

All Electric Logs Run

Borehole Volume Caliper
Compensated Neutron
PEL Density Micro
Phased Induction
Shallow Focused SP
Composite
Borehole Compensated Sonic
Cement Bond Log

Form	ACO1 - Well Completion
Operator	Cross Bar Energy, LLC
Well Name	Burkett 'D' 40
Doc ID	1235823

Tops

Name	Top	Datum
Cherokee	1822	-596
Ardmore	1907	-681
Cattleman Sand	1921	-695
Bartlesville Sand	2013	-787
Mississippian	2186	-960
Kinderhook	2530	-1304
Viola	2615	-1389
Simpson	2644	-1418
Arbuckle	2652	-1426

Elite Cementing & Acid Service, LLC
 810 E 7th, PO Box 92
 Eureka, KS 67045



Date	Invoice #
11/10/2014	1972

Bill To	Lease	BURKD 1
Cross Bar Energy, LLC 100 S Main, Suite 400 Wichtia, KS 67202	Well #	D40
	Desc.	D40, cement surface CSG
	Acct #	4010-25
Customer ID#	1038	

Job Date	11/5/2014
Lease Information	
Burkett D #40	
County	Greenwood
Foreman	SF

Item	Description	Qty	Terms	Net 30
			Rate	Amount
C101	Cement Pump-Surface	1	840.00	840.00
C107	Pump Truck Mileage (one way)	15	3.95	59.25
C200	Class A Cement-94# sack	120	15.00	1,800.00T
C205	Calcium Chloride	340	0.60	204.00T
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	\$3,293.25
Sales Tax (7.15%)	\$146.50
Total	\$3,439.75
Payments/Credits	\$0.00
Balance Due	\$3,439.75

Elite Cementing & Acid Service, LLC

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



Date	Invoice #
11/13/2014	1947

Bill To	
Cross Bar Energy, LLC 100 S Main, Suite 400 Wichita, KS 67202	Lease <u>BURKD</u>
	Well # <u>D40</u>
	Desc. <u>D40' 2 Stage with float equip</u>
Customer ID#	Acct # <u>4020-05</u>

Job Date	11/13/2014
Lease Information	
Burkett D #40	
County	Greenwood
Foreman	KM

Item	Description	Qty	Terms	Net 30
			Rate	Amount
C102	Cement Pump-Longstring	1	1,050.00	1,050.00
C107	Pump Truck Mileage (one way)	15	3.95	59.25
C102	Cement Pump-Longstring	1	1,050.00	1,050.00
C201	Thick Set Cement	165	19.50	3,217.50T
C207	KolSeal	825	0.45	371.25T
C208	Pheno Seal	330	1.25	412.50T
C203	Pozmix Cement 60/40	250	12.75	3,187.50T
C206	Gel Bentonite	1,290	0.20	258.00T
C208	Pheno Seal	500	1.25	625.00T
C205	Calcium Chloride	430	0.60	258.00T
C108A	Ton Mileage (min. charge)	2	345.00	690.00
C113	80 Bbl Vac Truck	4	85.00	340.00
C224	City Water	3,300	0.01	33.00T
C776	5 1/2" DV Tool with Plugs	1	3,325.00	3,325.00T
C604	5 1/2" Cement Basket	2	225.00	450.00T
C504	5 1/2" Centralizer	7	48.00	336.00T
C703	5 1/2" AFU Flapper Valve Insert	1	145.00	145.00T
C691	5 1/2" Guide Shoe	1	167.00	167.00T

We appreciate your business!

Subtotal	\$15,975.00
Sales Tax (7.15%)	\$914.18
Total	\$16,889.18
Payments/Credits	\$0.00
Balance Due	\$16,889.18

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

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



Cement or Acid Field Report
Ticket No. **1947**
Foreman KEVIN M^C COY
Camp EUREKA

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
11-13-14	1038	Burkett D #40				GW	KS
Customer	Mailing Address	City	State	Zip Code	Safety Meeting	Unit #	Driver
Cross Bar Energy	100 S. MAIN STE 400	Wichita	KS	67202	KM AM CB JS AG	104	ALAN M.
						114	CHRIS B.
						112	JOHN S.
						145	ALAN G.

Job Type Longstring Hole Depth 2750' G.L. Slurry Vol. 54 BBL Stage #1 Tubing _____
 Casing Depth 2741' G.L. Hole Size 7 7/8" Slurry Wt. 78 BBL Stage #2 Drill Pipe _____
 Casing Size & Wt. 5 1/2 Cement Left in Casing 0' Water Gal/SK _____ Other _____
 Displacement 39 BBL Stage #2 Displacement PSI 750 Stage #2 Bump Plug to _____ BPM _____

Remarks: SAFETY Meeting: RAN 2741' 5 1/2 CASING = 6.L. DV TOOL SET @ 1603.68' Below G.L. Stage #1 Rig up to 5 1/2 Casing. BREAK Circulation w/ 10 BBL water. Mixed 165 sks THICK Set Cement w/ 5* Kol-Seal/sk, 2* PhenoSeal/sk @ 13.7* /gal, yield 1.85 = 54 BBL Slurry. WASH out Pump & Lines. Shut down. Release LATCH down Flex Plug. (NO Circulation First 20 BBL of Displacement). Displace Plug to Seat w/ 66.5 BBL Fresh water. FINAL Pumping Pressure 750 PSI. Bump Plug to 1250 PSI. Release Pressure. Float Held. Drop Trip Bomb. WAIT 7 mins. OPEN DV TOOL @ 1300 PSI. Circulate Excess Cement OFF Top of DV Tool w/ mud Pump. 3 BBL to Pt. Circulate 2 Hrs. Stage #2 BREAK Circulation w/ 10 BBL WATER. Mixed 250 sks 60/40 Pozmix Cement w/ 6% Gel, 2% CaCl2, 2* PhenoSeal/sk @ 12.8* /gal yield 1.75 = 78 BBL Slurry. WASH out Pump & Lines. Shut down. Release Closing Plug. Displace Plug to Seat w/ 39 BBL Fresh water. FINAL Pumping Pressure 750 PSI. DV TOOL Closed @ 1300 PSI. Bump Plug to 1800 PSI. Release Pressure. NO Flow BACK. TOOL Closed. 1 BBL Cement Slurry to Pt. Job Complete. Rig down.

CENTRALIZERS ON #1, 2, 15, 16, 17, 18, 26 BASKETS ON TOP OFF #2, 26 DV TOOL ON TOP OF #27

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge Stage #1	1050.00	1050.00
C 107	15	Mileage	3.95	59.25
C 102	1	Pump Charge Stage #2	1050.00	1050.00
C 201	165 SKS	THICK Set Cement	19.50	3217.50
C 207	825 *	Kol-Seal 5*/sk } Stage #1	.45 *	371.25
C 208	330 *	PhenoSeal 2*/sk	1.25 *	412.50
C 203	250 SKS	60/40 Pozmix Cement	12.75	3187.50
C 206	1290 *	Gel 6%	.20 *	258.00
C 208	500 *	PhenoSeal 2*/sk } Stage #2	1.25 *	625.00
C 205	430 *	CaCl2 2%	.60 *	258.00
C 108 A	19.83 Tons	Ton Mileage BULK TRUCKS x 2	M/C x 2	690.00
C 113	4 HRS	80 BBL VAC TRUCK	85.00	340.00
C 224	3300 gals	CITY WATER	10.00/1000	33.00
C 776	1	5 1/2 DV TOOL (Stage Collar) w/ Plugs	3325.00	3325.00
C 604	2	5 1/2 Cement BASKETS	225.00	450.00
C 504	7	5 1/2 x 7 1/8 Centralizers	48.00	336.00
C 703	1	5 1/2 AFU Flapper Valve INSERT	145.00	145.00
C 691	1	5 1/2 Guide Shoe	167.00	167.00
		THANK You	Sub Total	15,975.00
			Sales Tax	914.18

Authorization Walt Woodley Title Sup. Total 16,889.18

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.