



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1235881
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: _____

1235881

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:
 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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Dale Jackson Production Co.
Box 266, Mound City, Ks 66056



Cell # 620-363-2683

Office # 913-795-2991

Surface: 20' of 6"	Cemented: 5 Sacks	Hole Size: 8 3/4"
Longstring: 719' of 2 7/8" 8 round pipe	Cemented: 90 sacks	Hole Size: 5 5/8"

SN:	Packer:	TD: 721'
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Plugged:	Bottom Plug:
Lease:	Alva Schendel
Owner:	Bobcat Oilfield Services Inc
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

Well #: 3W-14
Location: NE, SE, NW, SW, S24-T16-R21E
County: Miami
FSL: 1838' S
FEL: 3966' E
API#: 15-121-30601-00-00
Started: 9/06/2014
Completed: 9/09/2014

Well

Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
3	3	Top Soil	12	529	Shale (Limey)
8	11	Clay	29	558	Shale
21	32	Lime	3	561	Shale (Limey)
6	38	Black Shale	6	567	Shale
11	49	Lime	7	574	Lime
8	57	Shale (Limey)	13	587	Shale (Limey)
19	76	Lime	2	589	Black Shale
4	80	Shale	4	593	Shale (Limey)
5	85	Red Bed	8	601	Dark Shale
6	91	Shale	5	606	Shale (Limey)
5	96	Sandy Shale	4	610	Lime
8	104	Shale	3	613	Shale (Limey)
15	119	Lime	3	616	Sandy Shale (Oil Sand Stks)(Poor Bleed)(Limey)
35	154	Sandy Shale (Dry Sand Stks)	2	618	Shale (Limey)
56	210	Shale	11	629	Shale
19	229	Lime	3	632	Lime
7	236	Shale	2	634	Coal
11	247	Sandy Lime	22	656	Shale (Limey)
12	259	Shale	4	660	Lime
9	268	Lime	2	662	Shale (Limey)
2	270	Shale	2	664	Coal
1	271	Black Shale	10	674	Shale (Limey)
3	274	Shale	1	675	Lime
11	285	Sandy Shale	3	678	Shale
2	287	Shale	2	680	Light Shale (Oil Sand Stks)(Poor Bleed)
8	295	Sand (Dry)	1	681	Oil Sand (Shaley)(Fair Bleed)
5	300	Sandy Shale	3	684	Oil Sand (Some Shale & Lime)(Fair Bleed)
14	314	Lime	1	685	Oil Sand (Some Shale)(Fair Bleed)
15	329	Shale	2	687	Oil Sand (Very Shaley & Limey)(Poor Bleed)
25	354	Lime	2	689	Oil Sand (Some Shale)(Good Bleed)
3	357	Black Shale	1	690	Oil Sand (Very Shaley)(Fair Bleed)
9	366	Shale (Limey)	1	691	Sandy Shale (Oil Sand Stks)(Poor Bleed)
18	384	Lime	3	694	Sandy Shale(Black Sand Stks)(Oder)(Water)
5	389	Black Shale	2	696	Sandy Shale (Slight Oder)
11	400	Lime	2	698	Sandy Shale
19	419	Shale	TD	721	Shale
16	435	Sandy Shale			
71	506	Shale			
4	510	Light Shale (Limey)			SET SURFACE -11:00 AM - 9/06/14
3	513	Light Sandy Shale (Oil Sand Stks)(Poor Bleed)			CALLED IN 12:12 PM - TALKED TO DWAYNE
1	514	Sandy Shale			LONGSTRING - 719' of 2 7/8" 8' ROUND PIPE
1	515	Oil Sand (Very Shaley)(Poor Bleed)			SET TIME 2:00 PM - 9/09/14
2	517	Sandy Shale			CALLED IN 12:12 PM - TALKED TO DWAYNE

RECEIVED BY

QUANTITY	UNIT	DESCRIPTION	PRICE	TOTAL
240	EA	800 SX FLY RSH CLASS E	5.45 / EA	1,308.00
280	EA	94# PORTLAND CEMENT 1/11	9.50 / EA	2,660.00
14	EA	RETURNABLE PALLET	15.00 / EA	210.00 *
14	EA	SHRINK WRAPPED PALLET	5.00 / EA	70.00
1	EA	FUEL SURCHARGE	50.41 / EA	50.41

*Alva Schendel
3/24/14*

ORDER # 80497
DEL. DATE: 8/29/14
SLSPR: RR ROBERT ROAD
TAX: 001 LOUISBURG, NS
DOC# 179560
*** INVOICE ***

CUSTOMER NO.	FOR NO.	PURCHASE ORDER NO.	REFERENCE	DATE	TIME
			ORDER # 80497	8/30/14	14:00

MUSSMAN LUMBER COMPANY
 1/2 Mile North of Louisville
 27295 Metcalf Rd.
 P.O. Box 728
 Louisville, Kansas 66059
 913-837-2955 • 1-800-521-7764

True Value.

COPY