



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1235943
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: _____

1235943

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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Max R. Lovely

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY **Richie Exploration**

LEASE #1 **Kuhn Unit**

LOCATION **Castle Bluff**

SEC 19 TWP 12 R. 28W

COUNTY **Gove** STATE **KS**

CONTRACTOR **W.W. #8**

SPUD **9-26-14** COMPLETION **10-7-14**

RID **4625** LID **4626**

MUD UP **3374** TYPE **MUD Chem**

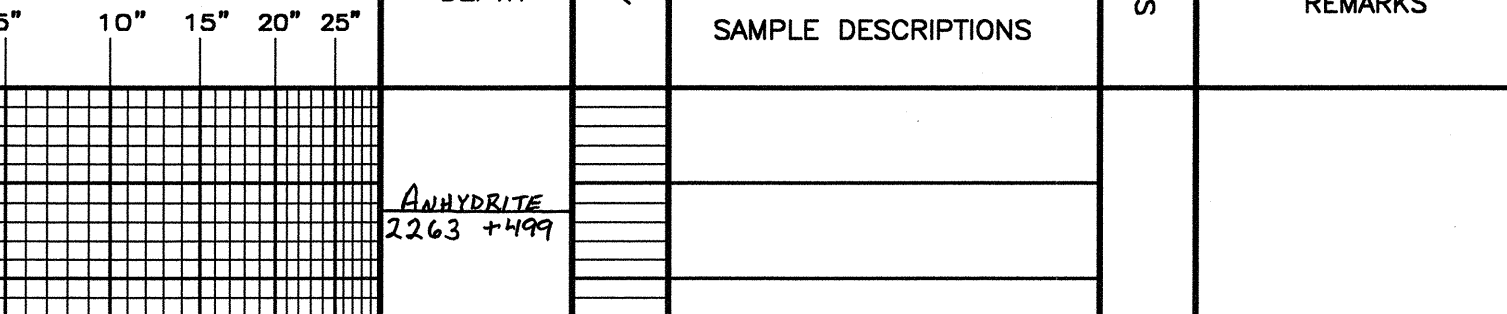
FORMATION TOPS AND STRUCTURAL POSITION

FORMATION	SAME TOP	ELECTRIC LOG TOP	DEPTH	STRUCTURAL POSITION
Anhydrite	2263	2263	489	501
Stark	2304	2304	485	
Stark	3517	3517	755	
Heebner	3876	3880	1118	1110
Lansing	3816	3818	1156	1150
Stark SH	4052	4054	1292	1289
BKC	4141	4140	1378	1377
Altamont	4238	4241	1479	1473
Pawnee	4314	4318	1556	1551
FE Scott	4395	4400	1631	
Cherokee	4428	4428	1666	1658
Mississippian	4500	4498	1734	1735

REFERENCE WELLS FOR STRUCTURE
A Hitchie #1 Kuhn 19A E/2 SW NE 19-12-28W
B _____

REMARKS

FORMATION TOPS AND STRUCTURAL POSITION	DEPTH	SAMPLE DESCRIPTIONS	LITHOLOGY	OIL SHOWS	REMARKS
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FORMATION TOPS AND STRUCTURAL POSITION	DEPTH	SAMPLE DESCRIPTIONS	LITHOLOGY	OIL SHOWS	REMARKS
ANHYDRITE	2263 +499				
2300 BASE	2304 +458				
	3400				
	3500				
STOTLER	3517 -755	LS. CRM, F.M XTLM, SL HRD, MED FOSS, SL CHCKY, P XTLM, NS			
	3600	LS. BRN, LG+CRS XTLM, SL CONGL, V FEW FOSS, HRD, P, NS			
	3700	LS. GRN, LT GRN, FXTLM, PS LG TAN STNG, HRD, TITE, NS			
	3800	LS. CRM, F.M XTLM, GRNLR TMT, SL BRTL, NO VIS P, NS			
HEEBNER	3876 -1114	SH, BLK, DK GRN			
LANSING	3916 -1154	LS. WHT, CRM, M XTLM, GRNLR TMT, HRD, F+G SCT VUG, F+G SCT XTLM, NS			
	4000	LS. WHT, VEXXTLM, CHLKY APPON BW BRK, NO FLUOR			
	4100	LS. WHT, TAN, FXTLM, M HRD, SL DWS, SCT FOSS, P, NS			
STARK	4141 -1379	SH, GRN, FXTLM, V HRD, G OIL FILL XTLM, V SL BLEED, GS FLUOR, FO ON BRK			
HUSHPUCKNEY	4170 -1408	SH, BLK			
BKC	4200	SS, VF GRN, V CHLKY, SHLY, SOFT, SBBRT, GRN, (P) W/SLK, DD OIL OR CARB PS W/MSF, JAR BRK			
ALTAMONT	4238 -1476	LS. CRM, TAN, BRN, FXTLM, PS DWS, HRD, NO APP P, NS			
	4300	LS. WHT, FXTLM, SL WEAR, V HRD, G PP, BLK OIL FILE, DD OIL			
PAWNEE	4314 -1552	LS. CRM, FXTLM, V HRD, CHTY, F FOSS, W CMT'D, TITE, NS			
MYRICK	4355 -1593	SH, BLK			
FE SCOTT	4395 -1633	SH, BLK			
CHEROKEE	4425 -1663	SH, BLK, CARB			
JOHNSON	4463 -1701	SH, GRN, REB			
MISS	4500 -1738	LS. WHT, F.M XTLM, V BRTL, M HRD, F XTLM, NS			
	4600	SH, VARI COLOR			

DRILLING TIME AND SAMPLE LOG

7AM 10-1-14 DRLG @ 3425'

START SAMPLES

MUD CHECK
VIS: 61 WT: 8.8
CHLOR: 1,500 LCM:1
FLT: 6.4

MUD CHECK
VIS: 53 WT: 9.2
CHLOR: 2,200 LCM:1
FLT: 8.8

7AM 10-2-14 DRLG @ 4001'

35' STND SHORT TRIP
STRAP 4027.16
BOARD 4027.52
SHORT .36

DST #2 4050-4073
TAL 510' WT: 45.60
IF: 7" 151:NR
FF: 8" 51:WK SUR, 2nd 35"
REC: 5' OCM - 5% OIL
40' OCM - 5% OIL
120' OCM - 20% OIL
500' OCM - 35% API OIL
SP: 52-82, 86-100
HP: 150-1123

7AM 10-3-14 DST #2 @ 4073'

MUD CHECK
VIS: 58 WT: 9.3
CHLOR: 2,400 LCM:1
FLT: 7.2

DST #3 4084-4109
TAL 510' WT: 45.60
IF: 7" 151:NR
FF: 8" 51:WK SUR, 2nd 35"
REC: 5' OCM - 10% OIL
FP: 17-20, 19-23
SP: 78-77
HP: 2013-2023

7AM 10-4-14 DST #4 @ 4142

MUD CHECK
VIS: 52 WT: 9.4
CHLOR: 2,800 LCM:1
FLT: 7.6

DST #4 4106-4142
TAL 510' WT: 45.60
IF: 7" 151:NR
FF: 8" 51:WK SUR, 2nd 35"
REC: 5' OCM - 5% OIL
FP: 18-22, 25-26
SP: 198-86

7AM 10-5-14 COMP OUT @ DST 5 @ 4200'

DST #5 4138-4200
TAL 510' WT: 45.60
IF: 7" 151:NR
FF: 8" 51:WK SUR, 2nd 35"
REC: 5' OCM - 10% OIL
FP: 18-21, 20-19
SP: 43-30

MUD CHECK
VIS: 48 WT: 9.1
CHLOR: 1,800 LCM:1
FLT: 7.2

7AM 10-6-14 CFS @ 4422'

MUD CHECK
VIS: 65 WT: 9.4
CHLOR: 1,900 LCM:1
FLT: 7.2

10 STND SHORT TRIP
COMB @ 142 HRS



#1 Kuhn Unit

(Previously known as #1 Kuhn 19B)

400' FNL & 2340' FWL – Irregular Section

Approx. 70' S & 30' E of NE NE NW Section 19-12S-28W

Gove County, Kansas

API# 15-063-22218-0000

Elevation: GL: 2757', KB: 2762'

Sample Tops			Ref. Well
Anhydrite	2264'	+498	-3
B/Anhydrite	2304'	+458	-7
Stotler	3517'	-755	Flat
Heebner	3876'	-1114	-4
Toronto	3900'	-1138	-3
Lansing	3916'	-1154	-4
Muncie Shale	4052'	-1290	-1
Stark Shale	4141'	-1379	-2
Hush	4170'	-1408	-3
BKC	4198'	-1436	+1
Altamont	4238'	-1476	-3
Pawnee	4314'	-1552	-1
Myrick	4355'	-1593	Flat
Fort Scott	4395'	-1633	-2
Cherokee	4425'	-1663	-6
Johnson	4463'	-1701	-2
Mississippian	4500'	-1738	-3
RTD	4625'	-1863	

ALLIED OIL & GAS SERVICES, LLC 064280

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Calley KS

DATE <u>10-7-14</u>	SEC <u>19</u>	TWP. <u>12</u>	RANGE <u>28</u>	CALLED OUT	ON LOCATION <u>1:00 p.m.</u>	JOB START <u>3:00 p.m.</u>	JOB FINISH <u>4:00 p.m.</u>
LEASE <u>Kuhn Unit</u>	WELL # <u>1</u>	LOCATION <u>Granfield 7 S, 1/2 E</u>		COUNTY <u>Cove</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one)		<u>Stw into</u>					

CONTRACTOR <u>W W 8</u>	OWNER <u>Same</u>
TYPE OF JOB <u>PTA</u>	
HOLE SIZE <u>7 1/8</u>	T.D. <u>4625'</u>
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2</u>	DEPTH <u>2285'</u>
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT <u>Water 20 mud</u>	
EQUIPMENT	
PUMP TRUCK # <u>120</u>	CEMENTER <u>Paul Beaver</u>
BULK TRUCK # <u>600</u>	HELPER <u>Tyler Flipse / Ramero</u>
BULK TRUCK #	DRIVER <u>Juan 1 (TWS)</u>
BULK TRUCK #	DRIVER

CEMENT AMOUNT ORDERED <u>240 sks Lito</u>	
<u>(60/40/4) 1/4 # Flo-seal</u>	
COMMON	@
POZMIX	@
GEL	@
CHLORIDE	@
ASC	@
<u>Lito (60/40/4) 240 sks</u>	@ <u>18.92 4540.80</u>
<u>Flo-seal 60 #</u>	@ <u>2.97 178.20</u>
<u>Material Total</u>	@ <u>4709.00</u>
<u>(793.80/200)</u>	@
HANDLING <u>257.76 ft³</u>	@ <u>2.48 639.24</u>
MILEAGE <u>10.76 tons x 25 mi x 2.75</u>	@ <u>739.75</u>
TOTAL	

REMARKS:
Mix 50 sks @ 2285' Displace w/ mud
Mix 100 sks @ 1360' Displace w/ water
Mix 50 sks @ 310'
Mix 10 sks @ 40' w/ plug
Mix 30 sks in B.H.

*Thank You
Paul & Crew*

CHARGE TO: Ritchie Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE	
DEPTH OF JOB	<u>2285</u>
PUMP TRUCK CHARGE	<u>2483.59</u>
EXTRA FOOTAGE	@
MILEAGE <u>mltu 25</u>	@ <u>17.00 192.50</u>
MANIFOLD	@
<u>mlu 25</u>	@ <u>4.40 110.00</u>
TOTAL	<u>(83301/200) 4163.00</u>

PLUG & FLOAT EQUIPMENT	
<u>8 5/8 Industrial</u>	@
<u>wooden plug</u>	@ <u>110.00</u>
	@
	@
	@
	@
TOTAL	<u>110.00</u>

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES 8,991.00
 DISCOUNT 1,776.81 (20%) IF PAID IN 30 DAYS
7,214.19 Net.

ALLIED OIL & GAS SERVICES, LLC 063759

Federal Tax I.D. # 20-8651476

REMIT TO P.O. BOX 93999
SOUTH LAKE, TEXAS 76092

SERVICE POINT: Oakley K

DATE <u>9/26/14</u>	SEC. <u>19</u>	TWP. <u>12</u>	RANGE <u>28</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30pm</u>	JOB FINISH <u>7:00pm</u>
LEASE <u>Unit 198</u>	WELL.# <u>1</u>	LOCATION <u>Crown Field 570 RRW 314E</u>			COUNTY <u>Garze</u>	STATE <u>KY</u>	
OLD OR NEW (Circle one) <u>NEW</u>							

CONTRACTOR Matt WW 4 OWNER Same

TYPE OF JOB <u>Surface</u>	CEMENT
HOLE SIZE <u>12 1/4</u>	T.D. <u>255</u>
CASING SIZE <u>8 1/2</u>	DEPTH <u>255</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>15'</u>	
PERFS.	
DISPLACEMENT <u>15.288</u>	

AMOUNT ORDERED	<u>170G 390 CC</u>
	<u>290 GEL</u>
COMMON	<u>170 SR @ 12.90 2043.00</u>
POZMIX	<u>@</u>
GEL	<u>320 @ .50 160.00</u>
CHLORIDE	<u>479 @ 1.10 526.80</u>
ASC	<u>@</u>

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Alan Ryan</u>
# <u>483281</u>	HELPER <u>Kevin Ryan</u>
BULK TRUCK	
# <u>818</u>	DRIVER <u>Jim + (T.D.)</u>
BULK TRUCK	
#	DRIVER

Material Total	<u>3227.90</u>
(<u>145.98 / 3033</u>)	
HANDLING	<u>183.814 @ 2.48 455.86</u>
MILEAGE <u>25.700/mile 2,377.00</u>	<u>692.18</u>
TOTAL	

REMARKS:

Run Csg, Circulate, Mix Cement, Displace Cement
Start in
Cement Bed Circulate
Thick & Heavy
Alto Kevin, Jim +

SERVICE

DEPTH OF JOB	<u>255'</u>
PUMP TRUCK CHARGE	<u>1512.35</u>
EXTRA FOOTAGE	<u>@</u>
MILEAGE <u>30 miles</u>	<u>@ 7.20 216.00</u>
MANIFOLD	<u>@</u>
<u>6" telehole 30 miles</u>	<u>@ 4.40 132.00</u>

CHARGE TO: R. Tabe

STREET _____

CITY _____ STATE _____ ZIP _____

(601.65 / 2070) TOTAL 3,023.21

PLUG & FLOAT EQUIPMENT

	<u>@</u>
	<u>@</u>
	<u>@</u>
	<u>@</u>
	<u>@</u>

TOTAL _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES 6,753.19

DISCOUNT 1,350.63 (20%) IF PAID IN 30 DAYS

5,402.55 Net.

PRINTED NAME _____

SIGNATURE [Signature]