



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1236292
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: _____

1236292

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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Form	ACO1 - Well Completion
Operator	Range Oil Company, Inc.
Well Name	Ferrell A 1
Doc ID	1236292

Tops

Name	Top	Datum
Heebner	1300	+314
Stalnaker	1680	-66
Lansing	1712	-98
Kansas City	1988	-374
BKC	2196	-582
Cherokee	2484	-870
Mississippian	2747	-1133
Kinderhook	3020	-1406
Arbuckle	3068	-1454
LTD	3097	-1483

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



O P Y

Cement or Acid Field Report
 Ticket No. **1738**
 Foreman Rick Ledford
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
9-30-14	1034	Ferrell A #1	33	285	8E	Butler	Ks
Customer	Mailing Address	City	State	Zip Code	Unit #	Driver	Safety Meeting
Range Oil Company Inc.	Box 781775	Wichita	Ks	67278	104	Alan M.	
					110	Scott W.	

Job Type surface Hole Depth 217' Slurry Vol. 30 bbl Tubing _____
 Casing Depth 211' G.L. Hole Size 12 1/4" Slurry Wt. 14.8# Drill Pipe _____
 Casing Size & Wt. 8 5/8" Cement Left in Casing 15' +/- Water Gal/SK 6.5 Other _____
 Displacement 13 bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting - Rig up to 8 5/8" casing. Break circulation w/ fresh water. Mixed 130 sxs class A cement w/ 3% cacl2 + 74# flocc/sk @ 14.8#/gal. Displace w/ 13 bbl water. Shut casing in w/ good cement returns to surface - 7 bbl slurry to pit. 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	40	Mileage	3.95	158.00
C200	130 sxs	class A cement	15.00	1950.00
C205	365#	3% cacl2	.60	219.00
C209	25#	74# flocc/sk	2.25	56.25
C108A	6."	ton mileage bulk trk	m/c	345.00
C413	1	8 5/8" wooden plug	80.00	80.00
C506	2	8 5/8" centralizers	65.00	130.00
			Subtotal	3779.25
			Sales Tax	155.86
			Total	3934.11

Authorization Colton Title _____ Total **3934.11**

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.

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



Cement or Acid Field Report
 Ticket No. **1788**
 Foreman Shannon Feck
 Camp Eureka, KS

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
10-6-14	1034	Ferrell A #1	33	28S	8E	Butler	KS
Customer	Mailing Address	City	State	Zip Code	Safety Meeting	Unit #	Driver
Range Oil Company INC	Box 781775	Wichita	KS	67278	DG SF JK	105 110 141	Dave G Joey K Shannon F

Job Type 4/5 Hole Depth 3100' k.B. Slurry Vol. 50 Bbl Tubing _____
 Casing Depth 3089 Hole Size 7 7/8 Slurry Wt. 13.7-13.8 Drill Pipe _____
 Casing Size & Wt. 5 1/2 @ 14 # Cement Left in Casing 7.86 Shoe Jt Water Gal/SK 9.0 Other _____
 Displacement 77.2 Bbl Displacement PSI 600 Bump Plug to 1000 BPM Displace @ 5 BPM

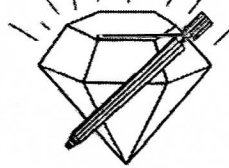
Remarks: Safety Meeting, rig up to 5 1/2" casing, Break circulation w/ 10 Bbl H2O, 10-12 Bbl metasilicate pre flush, 10 Bbl H2O spacer, mixed 150 Thick Set cement w/ 5 # kol-seal/sk @ 13.7 #/gal, Shut down wash out pump & lines, displace w/ 77.2 Bbl H2O, Final pumping pressure of 600 psi, bumped plug to 1000 psi. Plug & float held, Good circulation @ all times while cementing. Rig down, job complete.

"Thank you"
Shannon & Crew

Cent # 2, 5, 8, 10, 21, 23
 Basket # 2

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1050.00	1050.00
C107	40	Mileage	3.95	158.00
C201	150 SKS	Thickset Cement	19.50	2925.00
C207	750 H	Kol-seal @ 5 #/SK	1.45	337.50
C108B	8.25 Ton	Ton mileage bulk Truck	1.35	445.50
C216	100 #	metasilicate pre flush	2.00	200.00
C113	4 Hrs	80 Bbl Vac Truck	85.00	340.00
C224	3000 gal	city H2O	10.00/1000gal	30.00
C504	6	5 1/2 centralizers	48.00	288.00
C664	1	5/8 Basket	225.00	225.00
C421	1	5 1/2 Latch down plug	230.00	230.00
C703	1	5 1/2 AFU insert	145.00	145.00
			Sub Total	6374.00
			Sales Tax	280.35
Authorization <u>[Signature]</u> Title <u>X</u>			Total	6654.35

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.



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
FERRELLA1DST1

Company Range Oil Company, Inc. Lease & Well No. Ferrell "A" No. 1
Elevation 1610 KB Formation Mississippi Delta Effective Pay _____ Ft. Ticket No. T399
Date 10-4-14 Sec. 33 Twp. 28S Range 8E County Butler State Kansas
Test Approved By Kenneth C. Wallace Diamond Representative Tim Venters

Formation Test No. 1 Interval Tested from 2,751 ft. to 2,766 ft. Total Depth 2,766 ft.
Packer Depth 2,746 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 2,751 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 2,732 ft. Recorder Number 8457 Cap. 10,000 psi.
Bottom Recorder Depth (Outside) 2,763 ft. Recorder Number 11030 Cap. 5,025 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor C & G Drilling Company - Rig 1 Drill Collar Length 178 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 49 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.4 Water Loss 8.0 cc. Drill Pipe Length 2,540 ft I.D. 3 in.
Chlorides 800 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 2 Anchor Length 15 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4-FH in.

Blow: 1st Open: Very weak, surface blow increasing to 1/4 in. No blow back during shut-in.
2nd Open: Weak, surface blow throughout. No blow back during shut-in.

Recovered 1 ft. of clean oil = .004920 bbls.
Recovered 30 ft. of slightly oil cut mud = .147600 bbls. (Grind out: 3%-oil; 97%-mud)
Recovered 31 ft. of TOTAL FLUID = .152520 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Remarks Tool Sample Grind Out: 2%-oil; 98%-mud

Time Set Packer(s) 5:52 P.M. Time Started off Bottom 8:52 P.M. Maximum Temperature 109°
Initial Hydrostatic Pressure.....(A) 1321 P.S.I.
Initial Flow Period.....Minutes 30 (B) 4 P.S.I. to (C) 12 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 723 P.S.I.
Final Flow Period.....Minutes 60 (E) 12 P.S.I. to (F) 22 P.S.I.
Final Closed In Period.....Minutes 60 (G) 679 P.S.I.
Final Hydrostatic Pressure.....(H) 1317 P.S.I.

