

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1236710  
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: \_\_\_\_\_

1236710

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Lawco Holdings, LLC
Well Name	Smith 1-32
Doc ID	1236710

Tops

Name	Top	Datum
Pawhuska	824	1203 KB
Stalnaker	1516	1203 KB
Hog Shooter	2000	1203 KB
Altamont	2435	1203 KB
Fort Scott	2564	1203 KB
Mississippian Chat	2814	1203 KB
Meramecian	2854	1203 KB
Woodford	3284	1203 KB
Arbuckle	3338	1203 KB



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



**Cement or Acid Field Report**  
Ticket No. **1980**  
Foreman Shannon Feck  
Camp Eureka

API # 15-035-24630

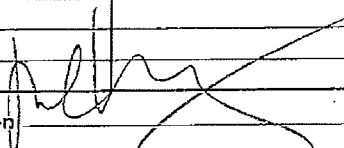
Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
12-4-14	1136	Smith # 1-32	32	345	7E	Cowley	KS
Customer	Mailing Address		Safety Meeting	Unit #	Driver	Unit #	Driver
Lawco Holding LLC	113 N. Main P.O. Box 423		SF CB JS	102 114	Chris B John S		
City	State	Zip Code					
Bentonville	AR	72712					

Job Type Surface Hole Depth 325' Slurry Vol. 51 Bbl Tubing \_\_\_\_\_  
 Casing Depth 316.60 G.L. Hole Size 12 1/4" Slurry Wt. 14.8-15# Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 8 5/8" Cement Left in Casing 20' Water Gal/SK 6.5 Other \_\_\_\_\_  
 Displacement 19.7 Bbl Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety meeting, Rig up to 8 5/8 casing, Break circulation w/ 5 Bbl H2O, mixed 200 SKS Class "A" cement w/ 3% calcium, 2% gel & 1/4# Flocc/SK @ 14.8-15#/gal. Displace w/ 19.7 Bbl H2O & shot casing in. Good circulation @ all times. 15-16 Bbl Slurry to pit. rig down job complete

"Thank you"  
Shannon & crew

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	870.00	870.00
C107	70	Mileage	3.95	276.50
C200	200 SKS	Class "A" Cement	15.00	3000.00
C205	560 #	Calcium @ 3%	.60	336.00
C206	375 #	Gel @ 2%	.20	75.00
C209	50 #	Flocc @ 1/4#/SK	2.25	112.50
C108B	9.4 Ton	Ton mileage bulk Trx	1.35	888.30
			Sub Total	5558.30
			Sales Tax <u>6.40%</u>	225.50
			Total	5783.80

Authorization:  Title: Co. Rep

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. **2037**

Foreman KEVIN McCoy

Camp EUREKA

API # 15-035-24630

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
12-10-14	1136	Smith # 1-32	32	34S	7E	Cowley	Ks
Customer <u>LAWCO Holding LLC</u>			Unit #	Driver		Unit #	Driver
Mailing Address <u>113 N. MAIN P.O. Box 423</u>			104	<u>ALAN M.</u>			
City <u>Bentonville</u>			110	<u>Scott W.</u>			
State <u>AR</u>			112	<u>John S.</u>			
Zip Code <u>72712</u>			141	<u>Rudy M.</u>			

Job Type Longstring Hole Depth 3450' G.L. Slurry Vol. 102 BBL Tubing \_\_\_\_\_  
 Casing Depth 3370' G.L. Hole Size 7 7/8 Slurry Wt. 12.8 - 13.7 Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 5 1/2 15.50 # Cement Left in Casing 0' Water Gal/SK 8.0 - 9.0 Other \_\_\_\_\_  
 Displacement 91.8 BBL Displacement PSI 1500 Bump Plug to 2150 PSI BPM \_\_\_\_\_

Remarks: Safety Meeting: Rig up to 5 1/2 Casing. BREAK CIRCULATION w/ 5 BBL water. Pumped 12 BBL CAUSTIC SODA PRE FLUSH, 10 BBL WATER SPACER. MIXED 150 SKS 60/40 POZMIX CEMENT w/ 6% GEL, 2" PHENOSEAL /SK @ 12.8 #/GAL, YIELD 1.70, = 45 BBL SLURRY. TAIL IN w/ 175 SKS THICK SET CEMENT w/ 5" KOL-SEAL /SK, 1" PHENOSEAL /SK @ 13.7 #/GAL, YIELD 1.85 = 57 BBL SLURRY. WASH OUT PUMP & LINES. Shut down. Release LATCH DOWN PLUG. Displace Plug to SEAT w/ 91.8 BBL KCL WATER. FINAL PUMPING PRESSURE 1500 PSI. Bump Plug to 2150 PSI. WAIT 2 minutes. Release Pressure. FLOAT & Plug Held. Good CIRCULATION @ ALL times while CEMENTING. Job Complete. Rig down.

CENTRALIZERS ON # 1, 6, 11, 17, 24, 29, 35, 41, 48, 57 BASKETS ON TOP OF # 2, 14, 32

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge	1050.00	1050.00
C 107	70	Mileage	3.95	276.50
C 203	150 SKS	60/40 POZMIX CEMENT	12.75	1912.50
C 206	775 #	Gel 6% } Lead Cement	.20	155.00
C 208	300 #	PHENOSEAL 2" /SK	1.25	375.00
C 201	175 SKS	THICK SET CEMENT	19.50	3412.50
C 207	875 #	KOL-SEAL 5" /SK } TAIL CEMENT	45.00	393.75
C 208	175 #	PHENOSEAL 1" /SK	1.25	218.75
C-217	100 #	CAUSTIC SODA PRE FLUSH	1.60	160.00
C 108 B	16.07 TONS	TON MILEAGE	1.35	1518.62
C 113	6 HRS	80 BBL VAC TRUCK	85.00	510.00
C 224	3300 gals	CITY WATER	10.00 / 1000	33.00
C 661	1	5 1/2 AFU FLOAT SHOE	294.00	294.00
C 421	1	5 1/2 LATCH DOWN PLUG	230.00	230.00
C 604	3	5 1/2 CEMENT BASKETS	225.00	675.00
C 504	10	5 1/2 x 7 7/8 CENTRALIZERS	48.00	480.00
C 222	8 gal	KCL	34.00	272.00
			Sub Total	11,966.62
			Sales Tax 6.4%	551.14
Authorization <u>[Signature]</u> Title _____			Total	12,517.76

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.