



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1237709
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
-----------------------------------	-----------------	---

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: _____



1237709

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

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: _____ _____
--	---	---

Form	ACO1 - Well Completion
Operator	Hess Oil Company
Well Name	Melanie 1
Doc ID	1237709

Tops

Name	Top	Datum
Anhydrite	738	1011
Base Anhydrite	776	973
Topeka	2663	-914
Heebner	2904	-1155
Toronto		
Lansing	2974	-1225
Base Kansas City	3306	-1557
Marmaton	3329	-1580
Cherokee Shale	3446	-1697
Mississippi	3579	-1830
RTD	3635	-1886



Scale 1:240 (5"=100') Imperial
Measured Depth Log

Well Name: MELANLE #1
 API: 15-141-20470-00-00
 Location: SW SE NE SECTION 13 30S 8W
 License Number: 5663
 Spud Date: 9/3/2014
 Surface Coordinates: 2136' FROM SOUTH LINE OF SECTION
 1720' FROM EAST LINE OF SECTION
 Bottom Hole Coordinates: 2136' FROM SOUTH LINE OF SECTION
 1720' FROM EAST LINE OF SECTION
 Ground Elevation (ft): 1744'
 Logged Interval (ft): 631' To: 3635' K.B. Elevation (ft): 1749'
 Formation: MISSISSIPPI
 Type of Drilling Fluid: CHEMICAL MUD-CO
 Region: OSBORN CO. KS.
 Drilling Completed:

Printed by WellSight Log Viewer from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: HESS OIL COMPANY
 Address: PO BOX 1009
 MCPHERSON, KANSAS 67460-1009
 (620) 241-4640

GEOLOGIST

Name: DAVID GOULD (LOGGER)
 Company: DMT COMPANY
 Address: 532 SUNRISE
 PRATT, KANSAS 67124
 (620) 388-2847

Comments

CONTRACTOR:

MALLARD DRILLING

BIT RECORD:

A, 12 1/4, RR, RT, 0-217'
 #1, 7 7/8, F27, RR, 217-1823'
 #3 7 7/8, F27, RR, 1823-3635

SURVEYS:

217' 3/4 DEGREE
 3036' 1 DEGREE
 3635' 1 1/2 DEGREE

DAILY STATUS: (6:00 AM)

9/3/2014 MOVE IN, SPUD @ 5:00 PM, DRILL TO 217' SET 8 5/8 CASING
 9/4/2014, WOC @ 217'
 9/5/2014, DRILLING AHEAD @ 1418'
 9/6/2014, DRILLING AHEAD @ 1896'
 9/7/2014, DRILLING AHEAD @ 2650'
 9/8/2014, DRILLED TO 3036, DST #1
 9/9/2014, DRILLING AHEAD 3287'
 9/10/2014, DRILLED TO TD @ 3687 RAN LOGS AND PLUGGED WELL

Well Name & No.: Melanle #1 Company: Hess Oil Test No.: 1 Interval Tested: 2947 - 3036

Zone Tested: Lansing Times: 45-45-45-45

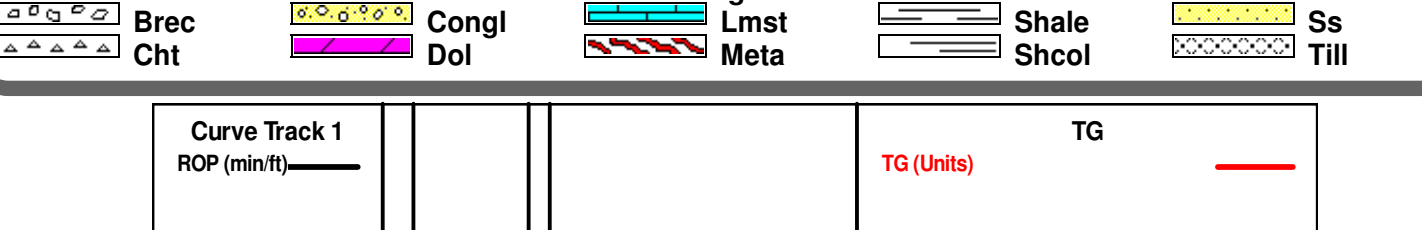
Blow Description: IFF: 1" Blow ISI: No Blow FFP: Weak Surface Blow FSI: No Blow

Rec: 210 Feet of Mud Rec. Total: 210', BHT: 103 Gravity: N/A

Initial Hydrostatic: 1,460 First Initial Flow: 87 First Final Flow: 103 Initial Shut-In: 1,084

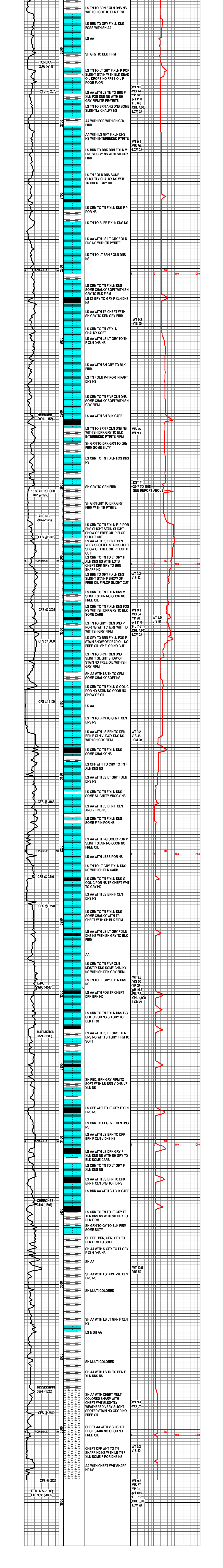
Second Initial Flow: 116 Second Final Flow: 130 Final Shut-In: 1,043 Final Hydrostatic: 1,428

Pressure vs. Time



Gauge 8957: Displaying every 3 points.

Anhy	Bent	Cht	Clyst	Coal	Congl	Dol	Gyp	Igne	Lmst	Meta	Mrlst	Salt	Shale	Shcol	Shgy	Siltst	Ss	Till
------	------	-----	-------	------	-------	-----	-----	------	------	------	-------	------	-------	-------	------	--------	----	------





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Hess Oil Co.
PO Box 1009
McPherson KS 67460
ATTN: David Gould

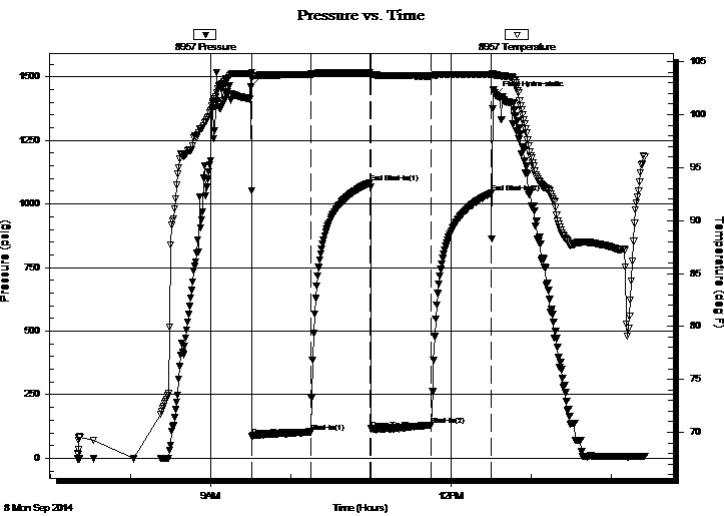
15-10s-11w, Osborne, KS
Melanie #1
Job Ticket: 53971 **DST#: 1**
Test Start: 2014.09.08 @ 07:20:00

GENERAL INFORMATION:

Formation: **KC**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 09:30:45
Time Test Ended: 14:25:45
Interval: **2947.00 ft (KB) To 3036.00 ft (KB) (TVD)**
Total Depth: 3036.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole (Initial)
Tester: Brett Dickinson
Unit No: 59
Reference Elevations: 1749.00 ft (KB)
1744.00 ft (CF)
KB to GR/CF: 5.00 ft

Serial #: 8957 Outside
Press@RunDepth: 130.26 psig @ 2952.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2014.09.08 End Date: 2014.09.08 Last Calib.: 2014.09.08
Start Time: 07:20:05 End Time: 14:25:44 Time On Btm: 2014.09.08 @ 09:30:00
Time Off Btm: 2014.09.08 @ 12:33:30

TEST COMMENT: IF-1" blow
IS-No blow
FF-weak surface blow
FS-No blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1460.29	103.83	Initial Hydro-static
1	87.65	103.38	Open To Flow (1)
45	103.48	103.76	Shut-In(1)
90	1084.20	103.98	End Shut-In(1)
91	115.71	103.67	Open To Flow (2)
136	130.26	103.63	Shut-In(2)
181	1042.54	103.79	End Shut-In(2)
184	1427.90	103.72	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
210.00	Mud	1.03

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Hess Oil Co.
PO Box 1009
McPherson KS 67460
ATTN: David Gould

15-10s-11w, Osborne, KS
Melanie #1
Job Ticket: 53971 **DST#: 1**
Test Start: 2014.09.08 @ 07:20:00

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 54.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.60 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4600.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
210.00	Mud	1.033

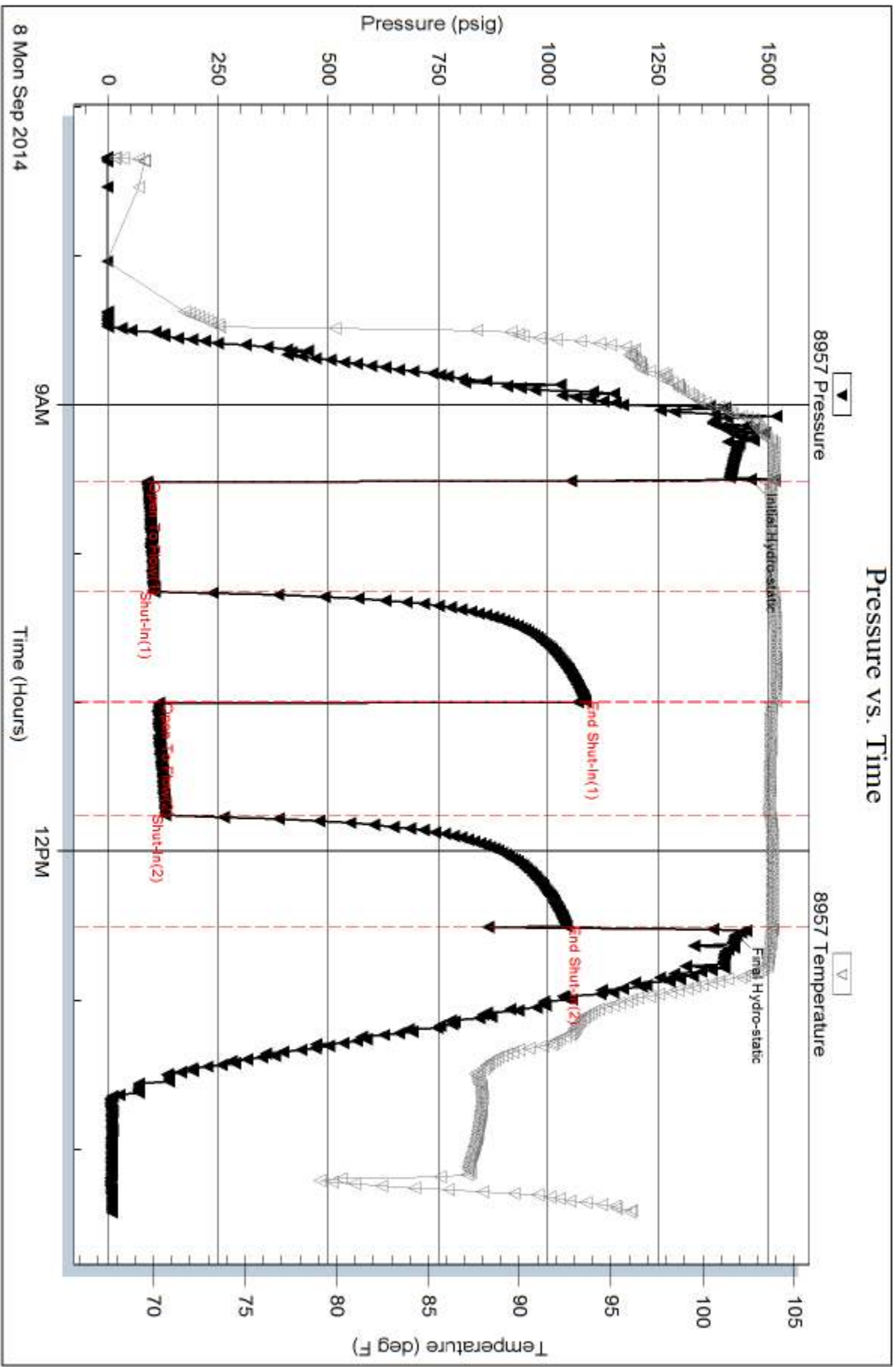
Total Length: 210.00 ft Total Volume: 1.033 bbl
Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

Serial #: 8957

Outside Hess Oil Co.

Melanie #1

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 53971

Printed: 2014.09.08 @ 16:14:08

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

January 08, 2015

Bryan Hess
Hess Oil Company
PO BOX 1009
MCPHERSON, KS 67460-1009

Re: ACO-1
API 15-141-20470-00-00
Melanie 1
SE/4 Sec.15-10S-11W
Osborne County, Kansas

Dear Bryan Hess:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 09/03/2014 and the ACO-1 was received on January 08, 2015 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 295

Date	Sec.	Twp.	Range	County	State	On Location	Finish
9-3-14	15	10	11	Osborne	KS		11:00pm

Location *Lucas 8 1/2 N to 270 & 20 Rd, 1/2 N, Wn 2*

Lease <i>Melanie</i>	Well No. <i>1</i>	Owner
Contractor <i>Mallard</i>		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Type Job <i>Surface</i>		Charge To <i>Hess oil</i>
Hole Size <i>12 1/4</i>	T.D. <i>217</i>	Street
Csg. <i>8 5/8</i>	Depth <i>217</i>	City
Tbg. Size	Depth	State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint <i>20</i>	Cement Amount Ordered <i>150sx com, 3%cc, 2%gel</i>

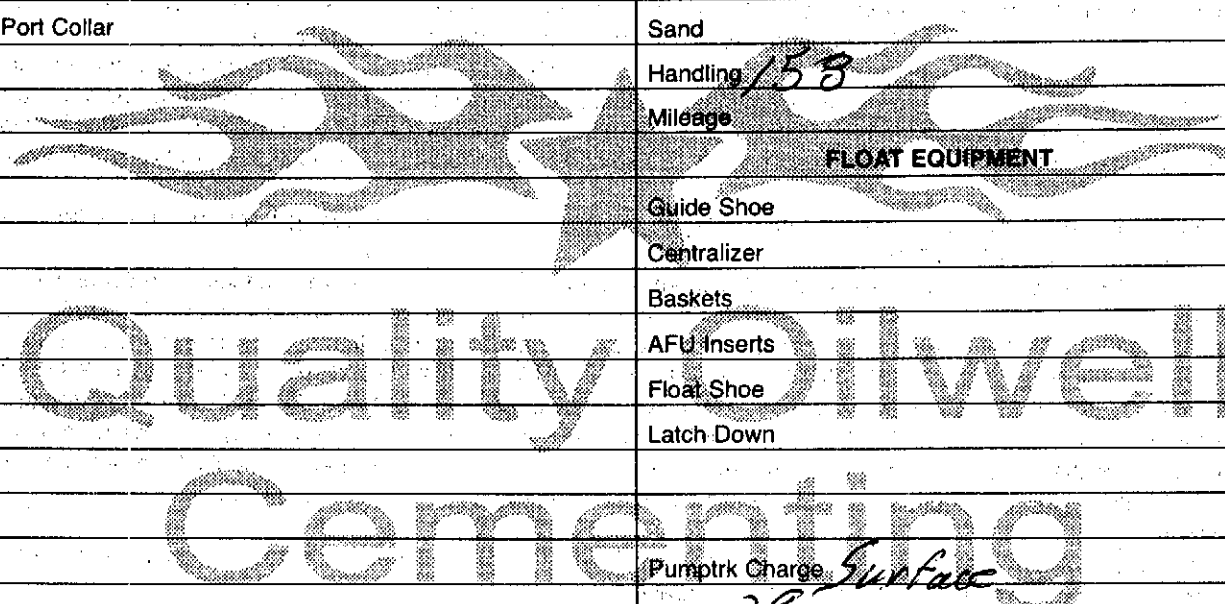
Meas Line	Displace <i>12 1/2 bbl</i>	Common <i>150</i>
EQUIPMENT		Poz. Mix
Pumptrk <i>17</i> No.	Cementer	Gel. <i>3</i>
	Helper <i>Lennie W</i>	Calcium <i>3</i>
Bulktrk <i>15</i> No.	Driver	
	Driver <i>Jason</i>	
Bulktrk <i>Ph</i> No.	Driver	
	Driver <i>Travis</i>	

JOB SERVICES & REMARKS		Hulls
Remarks: <i>cement did circulate</i>		Salt
Rat Hole		Flowseal
Mouse Hole		Kol-Seal
Centralizers		Mud CLR 48
Baskets		CFL-117 or CD110 CAF 38
D/V or Port Collar		Sand
		Handling <i>158</i>
		Mileage

FLOAT EQUIPMENT	
Guide Shoe	
Centralizer	
Baskets	
AFU inserts	
Float Shoe	
Latch Down	

Pumptrk Charge <i>Surface</i>
Mileage <i>39</i>

Signature <i>Frank Dymond</i>	Tax
	Discount
	Total Charge



QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 548

Date	9-10-14	Sec.	15	Twp.	10	Range	11	County	Osborne	State	KS	On Location		Finish	7:00 PM
------	---------	------	----	------	----	-------	----	--------	---------	-------	----	-------------	--	--------	---------

Location Lucas 8 1/2 N W into

Lease	Melanie	Well No.	#1	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	Mullard			Charge To	Hess Oil
Type Job	Plug	Hole Size	7 3/4	T.D.	3635'
Csg.	Drill Pipe	Tbg. Size		Depth	
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.		Shoe Joint		Cement Amount Ordered	235 6 3/4 4 3/4 6 1/4 fls

Meas Line	Displace	EQUIPMENT		Common	141
Pumptrk	5	No.	Cementer	Poz. Mix	94
			Helper	Driver	8
Bulktrk	9	No.	Driver	Calcium	
			Driver		
Bulktrk	pu	No.	Driver		
			Driver		

JOB SERVICES & REMARKS		Hulls
Remarks:		Salt
Rat Hole	- 30sx	Flowseal
Mouse Hole	- 15sx	Kol-Seal
Centralizers		Mud CLR 48
Baskets		CFL-117 or CD110 CAF 38
D/V or Port Collar		Sand

1st Plug	750 w/ 50sx	Handling	243
2nd Plug	594 w/ 80sx	Mileage	
3rd Plug	267 w/ 50sx	FLOAT EQUIPMENT	
4th Plug	40 w/ 40sx	Guide Shoe	
		Centralizer	
		Baskets	

Quality Oilwell Cementing

Signature	Frank Bryant	Tax	
		Discount	
		Total Charge	

X Signature