



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1238919
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: _____



1238919

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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Marexco, Inc.
Well Name	Holtze 14-14
Doc ID	1238919

All Electric Logs Run

Dual Induction Log
Compensated Density Neutron Log
Micro Resivity Log
Sector Bond/Gamma Ray CCL Log



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 145189
Invoice Date: Aug 20, 2014
Page: 1

Bill To:
Marexco, Inc. 3033 NW 63rd Suite 151 Oklahoma City, OK 73116

Customer ID	Field Ticket #	Payment Terms	
Marex	55476	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Russell	Aug 20, 2014	9/19/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Holtze #14-14		
450.00	CEMENT MATERIALS	Acon Blend	25.00	11,250.00
150.00	CEMENT MATERIALS	60/40 4% Gel Blend	23.50	3,525.00
765.00	CEMENT MATERIALS	Salt	0.53	405.45
846.00	CEMENT MATERIALS	Sodium Metasilicate	3.30	2,791.80
846.00	CEMENT MATERIALS	Gypsum	0.88	744.48
846.00	CEMENT MATERIALS	Calcium Chloride	1.10	930.60
1,000.00	CEMENT MATERIALS	Mud Flush	0.98	980.00
106.00	CEMENT MATERIALS	CD-31	7.73	819.38
751.00	CEMENT MATERIALS	Gilsonite	0.98	735.98
600.00	CEMENT SERVICE	Cubic Feet Charge	2.48	1,488.00
1,269.00	CEMENT SERVICE	Ton Mileage Charge	2.75	3,489.75
1.00	CEMENT SERVICE	Two Stage Production	2,558.75	2,558.75
135.00	CEMENT SERVICE	Heavy Vehicle Mileage	7.70	1,039.50
45.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	198.00
1.00	EQUIPMENT SALES	4-1/2 Top Rubber Plug	83.00	83.00
1.00	EQUIPMENT SALES	4-1/2 D V Tool	4,832.00	4,832.00
1.00	EQUIPMENT SALES	4-1/2 Guide Shoe	225.00	225.00
1.00	EQUIPMENT SALES	4-1/2 Insert	291.00	291.00
1.00	EQUIPMENT SALES	4-1/2 Basket	315.00	315.00
10.00	EQUIPMENT SALES	4-1/2 Centralizer	57.00	570.00

Longstring cement + DV tool completion - Intangible

BILLED SEP 15 2014
PAID SEP 15 2014

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
TOTAL	Continued

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 6,822.94

ONLY IF PAID ON OR BEFORE
Sep 19, 2014



INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 145189

Invoice Date: Aug 20, 2014

Page: 2

Voice: (817) 546-7282

Fax: (817) 246-3361

Bill To:
Marexco, Inc. 3033 NW 63rd Suite 151 Oklahoma City, OK 73116

Customer ID	Field Ticket #	Payment Terms	
Marex	55476	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Russell	Aug 20, 2014	9/19/14

Quantity	Item	Description	Unit Price	Amount
1.00	CEMENT SUPERVISOR	Tony Pfannenstiel		
1.00	OPERATOR ASSISTANT	Danny Sinner		
1.00	OPERATOR ASSISTANT	Tracy Jordan		
1.00	OPERATOR ASSISTANT	Jonathan Price		

Subtotal	37,272.69
Sales Tax	2,037.66
Total Invoice Amount	39,310.35
Payment/Credit Applied	
TOTAL	39,310.35

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 6,822.94

ONLY IF PAID ON OR BEFORE
Sep 19, 2014

37,487.41

ALLIED OIL & GAS SERVICES, LLC 055476

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Russell

DATE <u>8.20.14</u>	SEC <u>14</u>	TWP. <u>1</u>	RANGE <u>26</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00 pm</u>	JOB FINISH <u>7:00 pm</u>
LEASE <u>Holtze</u>	WELL# <u>1444</u>	LOCATION <u>Norton, ks</u>		COUNTY <u>Leavenworth</u>	STATE <u>ks</u>		
OLD OR <u>NEW</u> (Circle one)		<u>new 9 n e into</u>					

CONTRACTOR White Knight Drilling OWNER _____
 TYPE OF JOB 2 stage Production
 HOLE SIZE 7 7/8 T.D. _____
 CASING SIZE 4 1/2 DEPTH 3525'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL DV - 1861' DEPTH _____
 PRES. MAX _____ MINIMUM 44.20
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 44.20

PERFS. _____
 DISPLACEMENT 1st 53.95 2nd 28.04
1st 2.7 H2O
26.95 mud EQUIPMENT _____
 PUMP TRUCK CEMENTER Andy P
 # 417 HELPER Dennis
 BULK TRUCK _____
 # 473 DRIVER Tracy J
 BULK TRUCK _____
 # 378 DRIVER Jon P

CEMENT AMOUNT ORDERED: 150 sk 4040 + 4% gr
+ 10% salt
450 ACON Blend
 COMMON 450 ACON @ 25.0 \$ 11,250.00
 POZMIX @ _____
 GEL @ _____
 CHLORIDE @ _____
 ASE 150 sk 4040 41% @ 123.50 \$ 3,525.00
~~4800 lb salt 76.5#~~ @ 1.55 \$ 405.45
~~4700 lb netso 846#~~ @ 3.30 \$ 2,179.80
~~4700 lb supsun 846#~~ @ .85 \$ 944.88
~~4700 lb cc 846#~~ @ 1.10 \$ 930.60
~~31# small EWJ~~ @ _____
~~1# 10000 salt~~ @ 198 \$ 990.00
~~495 lb CD-31 106#~~ @ 7.72 \$ 819.38
~~4750 lb Gilsonite 751~~ @ 1.98 \$ 735.98
 HANDLING 600 sk @ 2.48 \$ 1,468.00
 MILEAGE 12697 7m @ 2.75 \$ 3,489.75
 Material 22,182.69 TOTAL ~~\$ 27,162.77~~
 20% Disc 4436.54

REMARKS:

* Ren Flat Equip. C' Banded @ 1 Hr.
 * mixed 150 sk 4040 + 4% gr - Displend 4%
 * Operat Tool - circled @ 3 Hr.
 * mixed 30 sk RT - 20 sk Rouse Hole
See Cementing Job Log

* mixed 40 sk ACON Blend -
 * Displend cement: 4 1/2 Bulks Phys
 Cement to Surface

CHARGE TO: Marx
 STREET _____
 CITY _____ STATE _____ ZIP _____

[Handwritten Signature]

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]

Play Pkg SERVICE
 DEPTH OF JOB 3525'
 PUMP TRUCK CHARGE @ 7 \$ 2,558.75
 EXTRA FOOTAGE @ _____
 MILEAGE Keavy 130 @ 7.7 \$ 1039.50
 MANIFOLD 45 @ 4.4 \$ 198.00
1X Head - manifold @ _____
Top Stage - @ _____
20% Disc 175/80 TOTAL \$ 877.40
 TOTAL \$ 3,796.25

PLUG & FLOAT EQUIPMENT

1x 4 1/2 Top Rubber Plug @ - \$ 180.00
 1x 4 1/2 DV Tool @ - \$ 4832.00
 1x 4 1/2 Guide Shoe @ - \$ 225.00
 1x 4 1/2 Insert @ - \$ 291.00
 1x 4 1/2 Baffle @ - \$ 315.00
 10x 4 1/2 Annulars @ 57.0 \$ 570.00
 10% Disc 631.60 TOTAL \$ 6,316.00

SALES TAX (if Any) _____
 TOTAL CHARGE \$ 37,272.69
 DISCOUNT \$ 6,822.94 IF PAID IN 30 DAYS
 20% Net = 30,449.75

Global Cementing LLC

18048 I-70 Road
Russell, KS 67665

Invoice

Date	Invoice #
8/14/2014	1414 ✓

Bill To
MEREXCO INC 3033 NW 63RD STREET OKLAHOMA CITY, OK 73116

P.O. No.	Terms	Project
HOLTZ 14-14	Net 30	

Quantity	Description	Rate	Amount
200	COMMON	16.75	3,350.00
7	CALCIUM	59.00	413.00
4	GEL	23.50	94.00
211	HANDLING	2.10	443.10
	BULK MILEAGE	970.60	970.60
1	TRI-PLEX PUMP CHARGE FOR SURFACE	1,250.00	1,250.00
92	PUMP TRUCK MILEAGE	6.50	598.00
92	PICKUP	2.50	230.00
	DEDUCT 15% FROM TOTAL IF PAID WITHIN 30 DAYS OF INVOICE DECATUR CO	7.15%	0.00

Surface Cement
Drilling Intangible

BILLED SEP - 2 2014
PAID SEP - 3 2014

Thank you for your business.

Phone #	Fax #	E-mail
785-324-2658	785-445-3526	

Total \$7,348.70

.85 x 7348.70 = 6,246.40

GLOBAL CEMENTING, L.L.C.

1414

REMIT TO 18048 170RD
RUSSELL, KS 67665

SERVICE POINT: Russell 1CS

DATE <u>8-14-10</u>	SEC. <u>14</u>	TWP. <u>15</u>	RANGE <u>26W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>11:45 PM</u>
LEASE <u>Horiza</u>	WELL #. <u>14-14</u>	LOCATION			COUNTY <u>Decatur</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR White Knight Drilling H.Rig 1

TYPE OF JOB Surface

HOLE SIZE 12 3/4 T.D. 259 ft

CASING SIZE 8 5/8 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS

DISPLACEMENT

OWNER _____

CEMENT AMOUNT ORDERED 200 sks 3% acc 2% gel

EQUIPMENT

PUMP TRUCK CEMENTER Cody

P1 HELPER Brend

BULK TRUCK DRIVER Payton

BV DRIVER

DRIVER

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

ASC @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING @ _____

MILEAGE @ _____

TOTAL _____

REMARKS:

Run to joint 8 5/8 casing + landing joint

Est circulation hooked up pumped 200 sks

Can circulated cement displaced 15 1/4 bbls

H2O - shut in at 200 psf

CHARGE TO: MAREXCO INC.

STREET _____

CITY _____ STATE _____ ZIP _____

Global Cementing, L.L.C.,
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 Terry Custer

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

MANIFOLD @ _____

_____ @ _____

_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

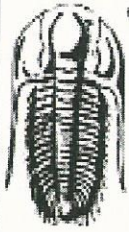
_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Marexco, Inc.
 3033 NW 83rd. St. STE #151
 Oklahoma City, OK 73116
 ATTN: Scott Alberg

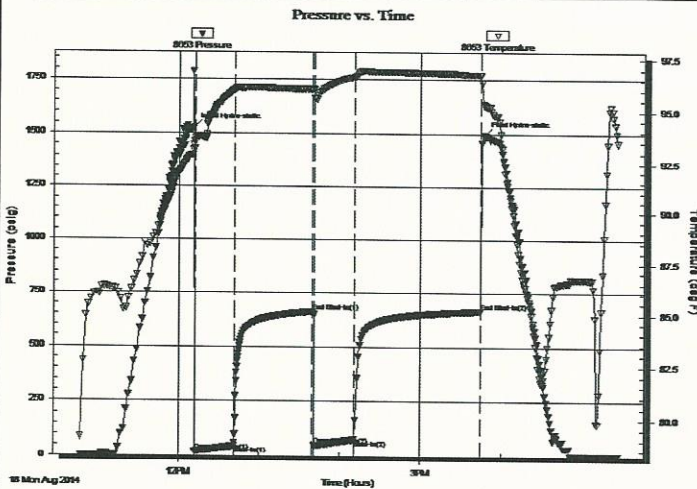
14-1s-26w Decatur, KS
Holtze #14-14
 Job Ticket: 55907 **DST#: 1**
 Test Start: 2014.08.18 @ 10:46:00

GENERAL INFORMATION:

Formation: **LKC "B"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 12:12:10
 Time Test Ended: 17:27:00
 Interval: **3208.00 ft (KB) To 3232.00 ft (KB) (TVD)**
 Total Depth: 3232.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Kevin Mak
 Unit No: 66
 Reference Elevations: 2400.00 ft (KB)
 2395.00 ft (CF)
 KB to GR/CF: 5.00 ft

Serial #: 8653 Outside
 Press@RunDepth: 77.40 psig @ 3209.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2014.08.18 End Date: 2014.08.18 Last Calib.: 2014.08.18
 Start Time: 10:47:00 End Time: 17:27:00 Time On Btm: 2014.08.18 @ 12:11:50
 Time Off Btm: 2014.08.18 @ 15:47:00

TEST COMMENT: 30 - IF- Surface Blow built to 10 1/4"
 60 - IS- Weak Surface Return started at 5 min. Built to 1/8" then died
 30 - FF- Blow built to 10 1/2"
 90 - FS- Surface Return started at 3 1/2 min. Built to 1/4" then died



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1526.83	93.53	Initial Hydro-static
1	20.38	93.16	Open To Flow (1)
30	48.41	96.00	Shut-In(1)
88	658.47	96.06	End Shut-In(1)
90	51.34	95.62	Open To Flow (2)
119	77.40	96.66	Shut-In(2)
213	662.82	96.76	End Shut-In(2)
216	1494.54	95.29	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
96.00	OCMW 10o 10M 80W	1.35
45.00	Free Oil 100o	0.63
0.00	45' GIP	0.00

19.2
 Ocm
 76.8 water

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Marexco, Inc.

14-1s-26w Decatur, KS

3033 NW 83rd. St. STE #151
Oklahoma City, OK 73116

Holtze #14-14

Job Ticket: 55907

DST#: 1

ATTN: Scott Alberg

Test Start: 2014.08.18 @ 10:46:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

30 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

50000 ppm

Viscosity: 42.00 sec/qt

Cushion Volume:

bbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 500.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
96.00	OCMW 10o 10M 80W	1.347
45.00	Free Oil 100o	0.631
0.00	45' GIP	0.000

Total Length: 141.00 ft Total Volume: 1.978 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Oil API 34 @ 100 Deg = 30 corrected

RW .10 @ 101 deg = 50,000ppm

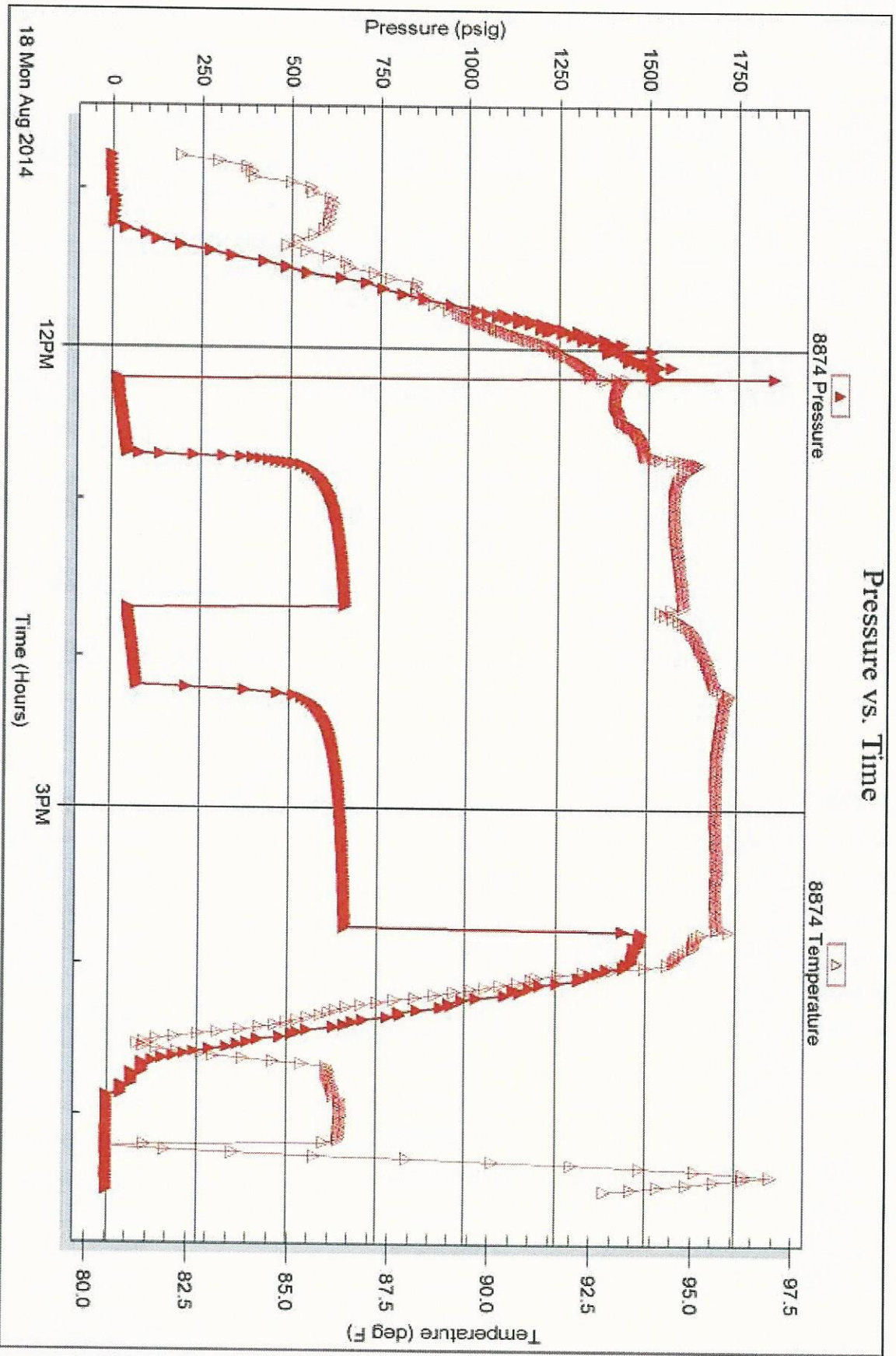
Serial #: 8874

Inside

Marexco, Inc.

Hoize #14-14

DST Test Number: 1



TriMobile Testing, Inc

Ref. No: 55907

Printed: 2014.08.20 @ 17:22:49