

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1239613

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 |
| ☐ Gas | ☐ D&A | ☐ ENHR |
| ☐ 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: _____



1239613

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 (Attach Additional Sheets)	☐ Yes ☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes ☐ No	Name	Top	Datum
Cores Taken	☐ Yes ☐ No			
Electric Log Run	☐ Yes ☐ No			
List All E. Logs Run:				

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)	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: ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled (Submit ACO-5) ☐ Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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DRILLERS LOG

Company: JOHN MEARS

Contractor: EK Energy LLC

License# 33977

Farm: MEARS M

County: WOODSON

Well No: MO-14

Sec: 34 TWP: 26 Range: 16E

API: 15-207-28940-00-00

Location: 3431 FSL

Surface Pipe: 41.1'

Location: 4110 FEL

Spot: SE-NE-SW-NW

[illegible]

Payless Concrete Products, Inc.



NOTICE TO OWNER
Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road, under its own power. Due to delivery at owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request. A \$30 charge will be added per truck if contractor does not supply a place to wash truck. Tow charges are buyers responsibility.

4100 240TH RD

MEARS M.

54 W TO YC S ON 75HWY TO 2400RD

E 2 MI TO BEND RD N 1MI TO 10TH

E 1/2 MT N SD

WARNING

Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water, If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

A \$30 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.
Express Delay Time Charged @ \$60/HR.

Dear Customer: The driver of this truck in presenting this RELEASE to you is not making any claim as to the opinion that the size and weight of this property may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility for any damage that may occur to the premises and/or adjacent property during the process of delivery. It is also requested that you sign the delivery of this material, and that you agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as an additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.

X

GAL X

WEIGHMASTER

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING
NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED
WHEN DELIVERING INSIDE CURB LINE.

LOAD RECEIVED BY:

x

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
		12:44	1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		TIME DUE
11:36	12:15	12:25		
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

TAX 6.15

ADDITIONAL CHARGE 1

ADDITIONAL CHARGE 2

GRAND TOTAL ▶

MARK MORRISON
1651 50th Road
Yates Center, KS 66783

WORK ORDER

MEARS M

<u>DATE</u>	<u>WELL</u>	<u>DESCRIPTION</u>
11/21/2014	MO-14	mixed 8 sacks of cement to cement surface
11/26/2014	MO-14	established circulation; circulate 125 sacks of cement to surface pumped plug and set float shoe

Building Materials
Farm & Ranch Supplies
Structural Steel Products
Hardware & Paint

CLEAVER FARM & HOME

A Division of Cleaver Farm Supply, Inc.

2103 S. SANTA FE
CHANUTE, KS 66720
(620)431-6070

RETURN POLICY - within 30 days only -
merchandise must be in saleable
condition and accompanied by invoice.

No refunds on Special Order non-stock
items

Account due 10th of month
following purchase. 1 1/2%
interest per month added for an
annual percentage rate of 18%.

SOLD TO
JOHN C. MEARS
4100-240TH.

SHIP TO
JOHN C. MEARS
4100-240TH.

CHANUTE, KS 66720-9803
431-2129

CHANUTE, KS 66720-9803
431-2129

Shipment #: 1



ACCOUNT #	CUSTOMER P.O.#	TERMS		ORDER #	ORDER DATE	SLSMN	INVOICE #	INVOICE DATE			
M1478		NET 10TH		1318972	11/16/14	CB	880460	11/16/14			
ORDERED	BACKORDERED	SHIPPED	U/M	DESCRIPTION		PRICE	AMOUNT				
8	0	8	EA	CEMENT STANDARD TYPE 1 94LB MONARCH STD PALLET ?		11.250	90.00*				
INVOICE Mears-m # mo-14											
November 26, 2014 09:34:39 CUTTER BOONE						0 / 1		MERCHANDISE	90.00		
***** * INVOICE * ***** 10 PAGE 1 OF 1						SHIP VIA	FILLED BY	CHK'D BY	DRIVER	OTHER	0.00
										TAX 8.400%	7.56
										FREIGHT	0.00
										TOTAL	97.56