



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1240137
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: _____



1240137

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Empire Energy E&P, LLC
Well Name	Carmichael A 19
Doc ID	1240137

Tops

Name	Top	Datum
Anhydrite	1084	+771
Topeka	2779	-931
Heebner	3006	-1158
Toronto	3023	-1175
Lansing	3047	-1199
BKC	3281	-1433
Arbuckle	3334	-1486
TD	3461	-1613

AFE 01L37 KSELOD1419



QUALITY OILWELL CEMENTING, INC.
PO Box 32 - 740 West Wichita Ave, Russell KS 67665
Phone:785-324-1041 fax:785-483-1087
Email: cementing@ruraltel.net

Date: 11/12/2014
Invoice # 882

P.O.#:
Due Date: 12/12/2014
Division: Russell

Invoice

Contact:
EMPIRE ENERGY
Address/Job Location:
EMPIRE ENERGY
PO Box 548
Great Bend Ks 67530

Reference:
~~GARIGHEALA 19~~ Carmichael A #19

Description of Work:
LONG SURFACE JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 1'	No				
Common-Class A	525	\$	Yes				
Calcium Chloride	19	\$	Yes				
Bulk Truck Matl-Material Service Charge	554	\$	No				
Pump Truck Mileage-Job to Nearest Camp	19	\$	No				
Premium Gel (Bentonite)	10	\$	Yes				
8 5/8" Top Rubber Plug	1	\$	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	19	\$	No				
Baffle Plate Aluminum, 8 5/8"	1	\$	Yes				

Invoice Terms:

Net 30

SubTotal: \$

Discount Available ONLY if Invoice is Paid & Received within listed terms of invoice: \$

SubTotal for Taxable Items: \$

SubTotal for Non-Taxable Items: \$

Total: \$

Tax: \$

6.15% Ellis County Sales Tax

Amount Due: \$

Applied Payments:

Balance Due: \$

Thank You For Your Business!

Past Due Invoices are subject to a service charge (annual rate of 24%)
This does not include any applicable taxes unless it is listed.
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AFE # 01L37

9208 9308

11/17/14

Received w/ Log for Randy

J.D. Farthing
11/20/14

RECEIVED NOV 18 2014

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. 882

Date	11-12-14	Sec.	18	Twp.	11	Range	17	County	Ellis	State	KS	On Location		Finish	2:45 PM
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Location *Hays, Ks - N to River Rd, 2 1/2 E 3/5*

Lease	<i>Carmichael A</i>	Well No.	<i>19</i>	Owner	
Contractor	<i>American Eagle #3</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>Empire Energy</i>	
Hole Size	<i>12 1/4"</i>	T.D.	<i>1082'</i>	Street	
Csg.	<i>8 5/8"</i>	Depth	<i>1082'</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.	<i>17'</i>	Shoe Joint	<i>17'</i>	Cement Amount Ordered <i>425 Common 3% CC</i>	
Meas Line		Displace	<i>67 3/4</i>	<i>2% Gel - 100 SX Comm 3% CC 2 1/2 gel</i>	

EQUIPMENT

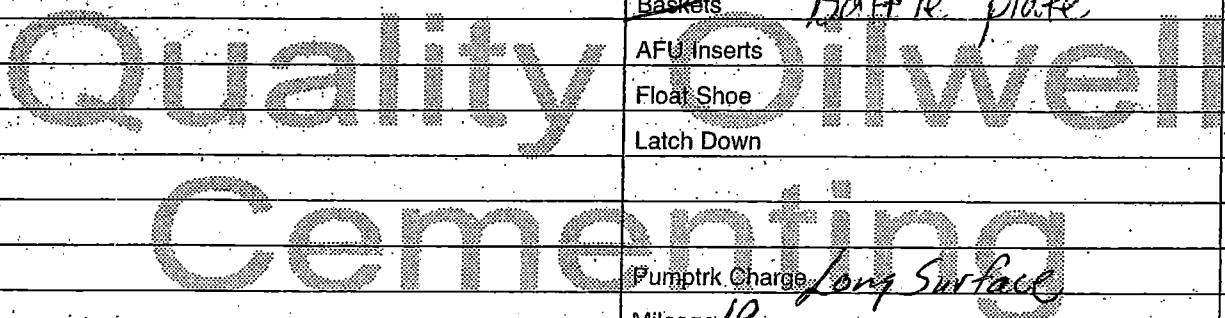
Pumptrk	<i>20</i>	No.		Cementer	<i>Nick</i>		Common	<i>52.5</i>
				Helper				
Bulktrk	<i>21</i>	No.		Driver	<i>Ryan</i>		Poz. Mix	
				Driver			Gel.	<i>10</i>
Bulktrk	<i>pile</i>	No.		Driver	<i>Rick</i>		Calcium	<i>19</i>
				Driver				

JOB SERVICES & REMARKS

Remarks:	<i>Cement did not circulate</i>	Hulls	
Rat Hole		Salt	
Mouse Hole	<i>Ran 42' of 1" +</i>	Flowseal	
Centralizers	<i>mix 100 SX Cement</i>	Kol-Seal	
Baskets		Mud CLR 48	
D/V or Port Collar	<i>Cement did circulate</i>	CFL-117 or CD110 CAF 38	
		Sand	
		Handling	<i>554</i>
		Mileage	

FLOAT EQUIPMENT

Guide Shoe	<i>Rubber plug</i>
Centralizer	
Baskets	<i>Baffle plate</i>
AFU Inserts	
Float Shoe	
Latch Down	
Pumptrk Charge	<i>Long Surface</i>
Mileage	<i>19</i>



X Signature *[Handwritten Signature]*

Tax	
Discount	
Total Charge	

AFE 01L37 KSEL 001419



QUALITY OILWELL CEMENTING, INC.

PO Box 32 - 740 West Wichita Ave, Russell KS 67665
Phone:785-324-1041 fax:785-483-1087
Email: cementing@ruraltel.net

Date: 11/20/2014
Invoice # 727

P.O.#:
Due Date: 12/20/2014
Division: *Russell*

Invoice

Contact:
EMPIRE ENERGY
Address/Job Location:
EMPIRE ENERGY
PO Box 548
Great Bend Ks 67530

Reference:
CARMICHEAL 19

Description of Work:
PROD STRING

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 0.00	No	Bulk Truck Mileage-Job to Nearest Bulk Plant	19	\$124.01	No
Common-Class A	175	\$	Yes				
Gilsonite	875	\$	Yes				
5 1/2" Turbolizer	10	\$	Yes				
Bulk Truck Matl-Material Service Charge	208	\$	No				
Mud Clear	500	\$	Yes				
5 1/2" Basket	1	\$	Yes				
Auto Fill Float Shoe, 5 1/2"	1	\$	Yes				
Latch Down Plug & Baffle, 5 1/2"	1	\$	Yes				
Salt (Fine)	16	\$	Yes				
Pump Truck Mileage-Job to Nearest Camp	19	\$	No				

Invoice Terms:

Net 30

SubTotal: \$
Discount Available ONLY if Invoice is Paid & Received
within listed terms of invoice: \$

SubTotal for Taxable Items: \$
SubTotal for Non-Taxable Items: \$

6.15% Ellis County Sales Tax

Total: \$
Tax: \$

Thank You For Your Business!

Amount Due: \$
Applied Payments:
Balance Due: \$

Past Due Invoices are subject to a service charge (annual rate of 24%)
This does not include any applicable taxes unless it is listed.
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AFE # 01L37

9308

11/25/14

Arthur M. Jacy for Randy

Arthur M. Jacy
12/3/14

RECEIVED DEC - 1 2014

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. 727

Date: 11-20-14	Sec.	Twp.	Range	County Ellis	State KS	On-Location	Finish 2:00 PM
Location Hays N River Road 2 1/2 E Sinto							

Lease Carmichael	Well No. # 19	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.
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Contractor American Eagle	Charge To Empire Energy
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Type Job Production String	Hole Size 7 7/8	T.D. 3430'
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Csg. 5 1/2	Depth 3428	Street
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Tbg. Size	Depth	City	State
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Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.	
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Cement Left in Csg. 18.27	Shoe Joint 18.27	Cement Amount Ordered 175 com 10% Salt 5% Gilsco
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Meas Line	Displace 83 bbl	Common 175
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EQUIPMENT		Poz. Mix
Pumptrk 20 No. Cementer Helper Nick		Gel.
Bulktrk 14 No. Driver Driver Lonnie M		Calcium
Bulktrk Pu No. Driver Driver Brett		Hulls 16

JOB SERVICES & REMARKS		Salt
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Remarks:	Flowseal 8
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Rat Hole - 30 sx	Kol-Seal 875 #
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Mouse Hole	Mud CLR 48 - 500 Gal
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Centralizers - 2, 4, 6, 9, 10, 12, 14, 16, 19, 20	CFL-117 or CD110 CAF 38
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Baskets - 3	Sand
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D/V or Port Collar	Handling 208
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Run 40 Jrs. + Est. cir	Mileage 5 1/2	FLOAT EQUIPMENT
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Mix 500 Gal Mud Plug	Guide Shoe
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Plug Rat 30 sx	Centralizer - 10
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Mix 145 sx down 5 1/2	Baskets - 1
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Drop plug + Displace 83 bbl	AFU inserts
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Lift pressure @ 700 lbs	Float Shoe - 1
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Landed Plug @ 1600 lbs	Latch Down - 1
------------------------	----------------

Pumptrk Charge prod string	Tax
----------------------------	-----

Mileage 19	Discount
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Total Charge	
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X Signature *Randy Wenzel*