

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1238504  
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: \_\_\_\_\_

1238504

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](mailto: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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

20589

REMIT TO  
Consolidated Oil Well Services, LLC  
Dept:970  
P.O.Box 4346  
Houston, TX 77210-4346

MAIN OFFICE

P.O.Box 884  
Chanute, KS 66720  
620/431-9210, 1-800/467-8676  
Fax 620/431-0012

Invoice

Invoice#

802469

Invoice Date: 12/08/14

Terms: Net 30

Page 1

TAOS RESOURCES OPERATING, LLC  
1455 WEST LOOP SOUTH, ST. 600  
HOUSTON TX 77254  
USA  
7139930774

RECEIVED  
DEC 15 2014  
BY: AZ

WEBBER 34-1

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401S	Cement Pump Truck - Surface	1.000	870.0000	0.000	870.00
5406	Mileage Charge	42.000	4.2000	0.000	176.40
5407A	Ton Mileage Delivery Charge	361.200	1.4100	0.000	509.29
1104S	Class A Cement	175.000	15.7000	30.000	1,923.25
1102	Calcium Chloride (50#)	450.000	0.7800	30.000	245.70
1118B	Premium Gel / Bentonite	350.000	0.2200	30.000	53.90
1107	Flo-Seal	100.000	2.4700	30.000	172.90
4411	8 5/8 Rubber Plug (Top)	1.000	113.5000	0.000	113.50

Subtotal 5,091.69

Discounted Amount 1,026.75

SubTotal After Discount 4,064.94

Amount Due 5,318.00 If paid after 01/07/15

Tax: 160.59

Total: 4,225.53

WELL ID/AFE # 1750552  
CODE 830.130  
N OR R Penup  
APPROVAL

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7554

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
786/672-6822

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4914

CUSHING, OK  
918/225-2650





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Oil Well Services, LLC

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Dept:970  
P.O.Box 4346  
Houston, TX 77210-4346

20589

MAIN OFFICE

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Terms: Net 30

Page 1

TAOS RESOURCES OPERATING, LLC  
1455 WEST LOOP SOUTH, ST. 600  
HOUSTON TX 77254  
USA  
7139930774

RECEIVED  
DEC 16 2014  
A2

WEBBER 34-1

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,085.0000	0.000	1,085.00
5406	Mileage Charge	50.000	4.2000	0.000	210.00
5407A	Ton Mileage Delivery Charge	645.000	1.4100	0.000	909.45
5402	Casing Footage	1,000.000	0.2300	0.000	230.00
1104S	Class A Cement	275.000	15.7000	30.000	3,022.25
1118B	Premium Gel / Bentonite	800.000	0.2200	30.000	123.20
1102	Calcium Chloride (50#)	550.000	0.7800	30.000	300.30
1107	Flo-Seal	1,375.000	0.4600	30.000	442.75
1144G	Mud Flush	500.000	1.1000	0.000	550.00
4159	Float Shoe AFU 5 1/2	1.000	433.7500	0.000	433.75
4154	Float Shoe 3 8V THD (3 1/2) Flapper	1.000	459.5000	0.000	459.50
4136S	Turbolizer S Band 5 1/2"	10.000	132.5000	0.000	1,325.00
4104	Cement Basket 5-1/2	2.000	290.0000	0.000	580.00

WELL ID/APE # 175D552  
CODE 840.130  
NOR R APPROVAL

Subtotal 11,337.70  
Discounted Amount 1,666.50  
SubTotal After Discount 9,671.20

Amount Due 11,907.51 If paid after 01/11/15

Tax: 463.15  
Total: 10,134.35



**CONSOLIDATED**  
Oil Well Services, U.S.

JM 1430

FT 1386

TICKET NUMBER 48529

LOCATION El Dorado

FOREMAN Fuzzy

INVOICE # 802584

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

**CEMENT**

125

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-10-14	2871	Webb 34-1	34	32	5	Cowley
CUSTOMER Taps Oper Resources Inc			Cowley #14			
MAILING ADDRESS 1455 W. Loop South Ste 600			160			
CITY Houston			1-S			
STATE TX			1/2 E			
ZIP CODE 77254			S 1/2 N			
TRUCK #		DRIVER		TRUCK #		DRIVER
760		CHRIS				
713		TERRY				

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 3645' CASING SIZE & WEIGHT 5 1/2 15.5  
 CASING DEPTH 3640' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.7 SLURRY VOL 64.5 WATER gal/sk \_\_\_\_\_ CEMENT LEFT In CASING \_\_\_\_\_  
 DISPLACEMENT 85.6 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Oct 13. Float equip - Turbolizers - 3-6-9-12-16  
 19-22-25-31-34 Baskets 15-28 (#16 marker J+) Rig up and circulate  
 1/2 hr. Pump 5 gal water, 500 gal mud flush, 588L water mix 30sps in  
 Rgt. Mix 245 sbs class A 390cc, 290cc, w/5# Kdsal, wash pump and  
 lines, Drop plug and replace 86 BBL 1100# list land plug @  
 1600 ft. Flow held

Thanks  
Fuzzy & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	1085.00
5406	50	MILEAGE	4.20	210.00
5407A	12.9 don	Tow mileage Delivery	1.51	909.55
5402	1000'	Casing footage	.23	230.00
1104	2106 275 sbs	Class A	15.20	4317.30
1118B	800*	Gal	.22	176.00
1102	550*	Calcium Chloride	.78	429.00
1107	1375*	Kal-sal	.46	632.50
1146	2107 500 gal	Mud Flush	1.10	550.00
4159	1	5 1/2 - AFE Float shoe (w)	453.25	453.25
4154	1	5 1/2 - Kickdown Assy (w)	459.50	459.50
4136A	10	5 1/2 - S-Band Turbolizers (w)	132.50	1325.00
4104	2	5 1/2 - Baskets	290.00	580.00
		Subtotal		11337.20
		discount		1666.50
		Subtotal		9670.70
		6.4	SALES TAX	468.15
			ESTIMATED TOTAL	10,138.85

Revin 8787

AUTHORIZATION [Signature]

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

