

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1239503
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: _____

1239503

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)*

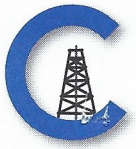
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
P INV
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 # 271772

=====
Invoice Date: 10/16/2014 Terms: 10/10/10,n/30 Page 1
=====

NAE, INC.
317 SIDNEY BAKER SOUTH, PMB 137
KERRVILLE TX 78028
(830) 370-1500

RJ SUTTON 1-13
13-17-29
47717
10/09/2014
KS

=====

Description	Hours	Unit Price	Total
CEMENT PUMP (SURFACE)	1.00	1150.00	1150.00
EQUIPMENT MILEAGE (ONE WAY)	40.00	5.25	210.00

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	165.00	18.5500	3060.75
1102	CALCIUM CHLORIDE (50#)	465.00	.9400	437.10
1118B	PREMIUM GEL / BENTONITE	310.00	.2700	83.70

Sublet Performed	Description	Total
9995-130	CEMENT EQUIPMENT DISCOUNT	-190.32
9996-130	CEMENT MATERIAL DISCOUNT	-358.15

Description	Hours	Unit Price	Total
693 MIN. BULK DELIVERY	1.00	543.20	543.20

*pd ck
1400
10-24-14
5166.74*

Amount Due 5740.82 if paid after 10/26/2014

=====
Parts: 3581.55 Freight: .00 Tax: 230.46 AR 5166.74
Labor: .00 Misc: .00 Total: 5166.74
Sublt: -548.47 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

271777

TICKET NUMBER 47717
LOCATION Oakley, K.
FOREMAN Darren

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

FIELD TICKET & TREATMENT REPORT
CEMENT

Ko.

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/9/14	5035	RJ Sutton 1-13	13	17	29	Lane
CUSTOMER NAE Inc.			Shields			
MAILING ADDRESS 317 Sidney Baker S			3 S			
CITY Kerrville			1 W			
STATE Tx.			Ninto			
ZIP CODE 78028						
TRUCK #		DRIVER		TRUCK #		DRIVER
731		Cory				
693		Cody				

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 226 CASING SIZE & WEIGHT 8 5/8 20'
 CASING DEPTH 226 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8 SLURRY VOL 1.36 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 13.43 DISPLACEMENT PSI 200* MIX PSI 150* RATE mix 4 bbl Per min. Dis. 6 bbl

REMARKS: Safety Meeting Rig upon H2*2 Run Casing Break Circulation with Rig
Pump Hook up to Pump truck mix 165 sks Com 3%CC 2%Gel Washup Pump Lines
Displace with 13.43 bbls Water Shut in

Cement Did Circulate

Approx 1 bbl To Pit

Thanks Darren + Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	\$1150.00	\$1150.00
5406	40	MILEAGE	\$5.25	\$210.00
5407 A	7.76	Ton Mileage Delivery	\$1.75	\$13.68
1104 S	165 sks	Class "A" Cement	\$18.55	\$3060.75
1102	465 #	Calcium Chloride	\$0.94	\$437.10
1118 B	310 #	Bentonite	\$0.27	\$83.70
			Sub Total	\$5484.75
			Less 10%	\$548.48
			Sub Total	\$4936.27
			SALES TAX	230.40
			ESTIMATED TOTAL	5166.67

Rawin 3737 P.H. 785-662-8000

AUTHORIZATION

[Signature]

TITLE

[Signature]

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.



REMIT TO
FINV
 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 # 271895
 =====
 Invoice Date: 10/21/2014 Terms: 10/10/10,n/30 Page 1

NAE, INC.
 317 SIDNEY BAKER SOUTH, PMB 137
 KERRVILLE TX 78028
 (830) 370-1500

RJ SUTTON #1-13
 13-17S-29W
 46741
 10/17/2014
 KS

Part Number	Description	Qty	Unit Price	Total
1107	FLO-SEAL (25#)	75.00	2.9700	222.75
1118B	PREMIUM GEL / BENTONITE	1032.00	.2700	278.64
1131	60/40 POZ MIX	300.00	15.8600	4758.00

Sublet Performed	Description	Total
9995-130	CEMENT EQUIPMENT DISCOUNT	-265.50
9996-130	CEMENT MATERIAL DISCOUNT	-525.93

Description	Hours	Unit Price	Total
399 P & A NEW WELL	1.00	1395.00	1395.00
399 EQUIPMENT MILEAGE (ONE WAY)	45.00	5.25	236.25
529 TON MILEAGE DELIVERY	1.00	1023.75	1023.75

*PAID
 #1402
 10-29-14*

Amount Due 8290.44 if paid after 10/31/2014

Parts:	5259.39	Freight:	.00	Tax:	338.45	AR	7461.41
Labor:	.00	Misc:	.00	Total:	7461.41		
Sublt:	-791.43	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

271895

TICKET NUMBER 46741
LOCATION Oakley KS
FOREMAN Miles Shaw

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

FIELD TICKET & TREATMENT REPORT

CEMENT

Lane KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
10-17-14	15635	RJ Sutton #1-13	13	17S	29W	Lane	
CUSTOMER UAE		Dighton KS N to N1210 1W Winto		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 1306 OAK ST				399	Scoban		
CITY Hays		STATE KS	ZIP CODE 67601	597127	Rob S		

JOB TYPE PTA HOLE SIZE 45 8/16" HOLE DEPTH _____ CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8 SLURRY VOL 1.4 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting and rig up on H2 drilling Rig #2 plug as ordered
1st plug 50 Sks @ 2180'
2nd plug 80 Sks @ 1320'
3rd plug 50 Sks @ 700'
4th plug 50 Sks @ 250'
5th plug 20 Sks @ 60'
MH 70 Sks RH 20 Sks
300 Sks Coloco per 4 8 1/2" 1/4" Hosen

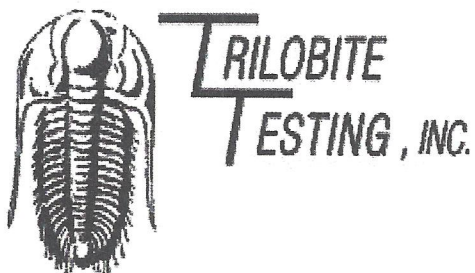
Thanks Miles & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405W	1	PUMP CHARGE	1395.00	1395.00 ✓
5406	45	MILEAGE	5.25	236.25 ✓
5407A	13 Tons	Ton Mileage delivery	1.75	1023.75 ✓
1107	75 #	Flaseal	2.97	222.75 ✓
118B	10.32 #	Bentonite gel	2.70	278.64 ✓
1131	300 Sks	60/40 per	15.86	4758.00 ✓
			Subtotal	7914.35 ✓
			less 10% discount	791.43 ✓
			Subtotal	7122.96 ✓
			SALES TAX	338.45 ✓
			ESTIMATED TOTAL	7461.41 ✓

Form 3737

AUTHORIZATION Jeff Crawford 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.



DRILL STEM TEST REPORT

Prepared For: **NAE Inc**

317 Sidney Baker S
Kerville, TX 78028

ATTN: Frank Taggart

RJ Sutton #1-13

13-17s-29w Lane,KS

Start Date: 2014.10.16 @ 05:26:01

End Date: 2014.10.16 @ 14:37:01

Job Ticket #: 59046 DST #: 1

Trilobite Testing, Inc

1515 Commerce Parkway Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2014.10.19 @ 14:45:24

NAE Inc

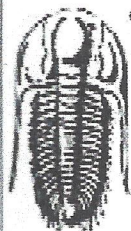
13-17s-29w Lane,KS

RJ Sutton #1-13

DST # 1

Johnson - Cong L

2014.10.16



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

NAE Inc
317 Sidney Baker S
Kerrville, TX 78028

ATTN: Frank Taggart

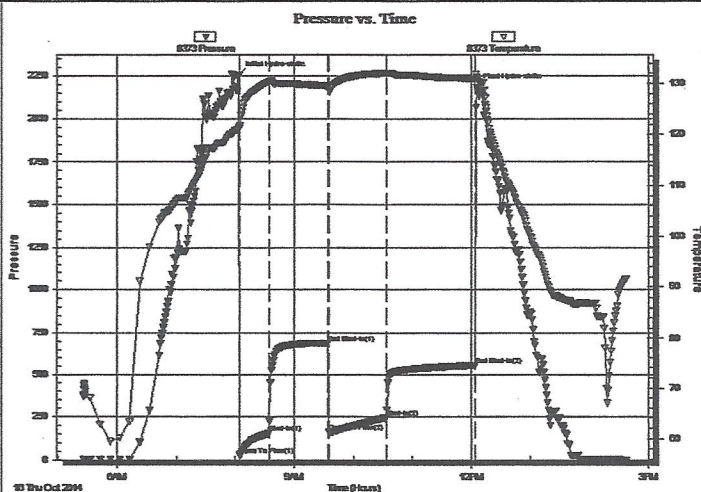
13-17s-29w Lane,KS
RJ Sutton #1-13
Job Ticket: 59046 DST#: 1
Test Start: 2014.10.16 @ 05:26:01

GENERAL INFORMATION:

Formation: **Johnson - Cong L**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 08:04:31
Time Test Ended: 14:37:01
Interval: **4493.00 ft (KB) To 4520.00 ft (KB) (TVD)**
Total Depth: 4520.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition: Good
Test Type: Conventional Bottom Hole (Initial)
Tester: Brandon Turley
Unit No: 60
Reference Elevations: 2754.00 ft (KB)
2743.00 ft (CF)
KB to GR/CF: 11.00 ft

Serial #: 8373 Inside
Press@RunDepth: 245.00 psig @ 4494.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2014.10.16 End Date: 2014.10.16 Last Calib.: 2014.10.16
Start Time: 05:26:06 End Time: 14:37:01 Time On Btm: 2014.10.16 @ 08:04:01
Time Off Btm: 2014.10.16 @ 12:05:31

TEST COMMENT: IF: 1/4" blow BOB in 11 min.
IS: Surface blow built to 8" in 60 min.
FF: BOB in 12 min.
FS: BOB in 20 min.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2256.52	121.39	Initial Hydro-static
1	26.77	121.11	Open To Flow (1)
31	153.29	130.41	Shut-In(1)
90	689.68	129.46	End Shut-In(1)
91	161.93	128.66	Open To Flow (2)
150	245.00	132.05	Shut-In(2)
240	553.54	130.97	End Shut-In(2)
242	2182.57	131.35	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
186.00	mcw 90%w 10%m	0.91
124.00	w cm 30%w 70%m	1.15
124.00	gocm 20%g 20%o 60%m	1.74
134.00	go 30%g 70%o	1.88
0.00	672 GIP	0.00

Gas Rates

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



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

NAE Inc
317 Sidney Baker S
Kerrville, TX 78028
ATTN: Frank Taggart

13-17s-29w Lane,KS
RJ Sutton #1-13
Job Ticket: 59046 **DST#: 1**
Test Start: 2014.10.16 @ 05:26:01

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API: 36 deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity: 22000 ppm
Viscosity: 61.00 sec/qt	Cushion Volume: bbl	
Water Loss: 7.99 in ³	Gas Cushion Type:	
Resistivity: 0.00 ohm.m	Gas Cushion Pressure: psig	
Salinity: 2000.00 ppm		
Filter Cake: 1.00 inches		

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
186.00	mcw 90%w 10%m	0.915
124.00	w cm 30%w 70%m	1.147
124.00	gocm 20%g 20%o 60%m	1.739
134.00	go 30%g 70%o	1.880
0.00	672 GIP	0.000

Total Length: 568.00 ft Total Volume: 5.681 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments: 39@90=36
 .27@81=22000



DRILL STEM TEST REPORT

Prepared For: **NAE Inc**

317 Sidney Baker S
Kerrville, TX 78028

ATTN: Frank Taggart

RJ Sutton #1-13

13-17s-29w Lane,KS

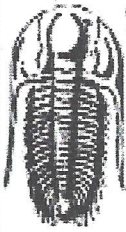
Start Date: 2014.10.17 @ 03:54:21

End Date: 2014.10.17 @ 11:19:21

Job Ticket #: 59047 DST #: 2

Trilobite Testing, Inc
1515 Commerce Parkway Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2014.10.19 @ 14:45:02



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

NAE Inc
317 Sidney Baker S
Kerrville, TX 78028
ATTN: Frank Taggart

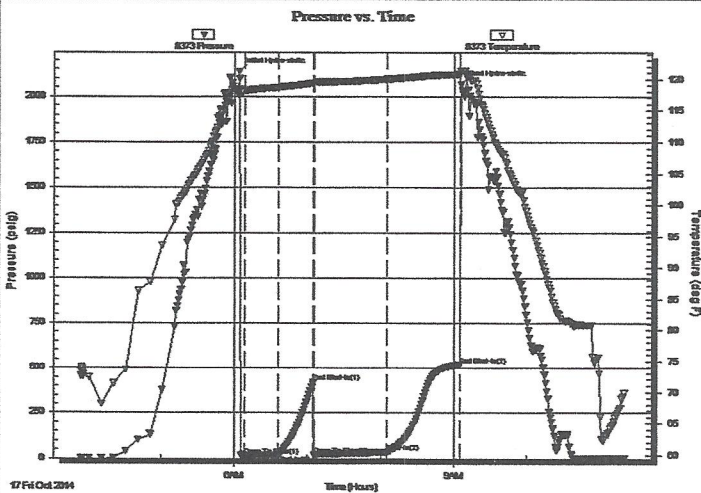
13-17s-29w Lane, KS
RJ Sutton #1-13
Job Ticket: 59047 DST#: 2
Test Start: 2014.10.17 @ 03:54:21

GENERAL INFORMATION:

Formation: **LKC K**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 06:08:21
 Time Test Ended: 11:19:21
 Interval: **4183.00 ft (KB) To 4210.00 ft (KB) (TVD)**
 Total Depth: 4587.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Straddle (Reset)
 Tester: Brandon Turley
 Unit No: 60
 Reference Elevations: 2754.00 ft (KB)
 2743.00 ft (CF)
 KB to GR/CF: 11.00 ft

Serial #: 8373 Inside
 Press@RunDepth: 37.30 psig @ 4184.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2014.10.17 End Date: 2014.10.17 Last Calib.: 2014.10.17
 Start Time: 03:54:26 End Time: 11:19:20 Time On Btm: 2014.10.17 @ 06:03:51
 Time Off Btm: 2014.10.17 @ 09:05:21

TEST COMMENT: IF: 1/4" blow built to 7" in 30 min.
 IS: No return.
 FF: 2" blow BOB in 43 min.
 FS: No return.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2137.65	118.35	Initial Hydro-static
5	15.81	118.07	Open To Flow (1)
33	20.73	118.70	Shut-In(1)
61	422.04	119.34	End Shut-In(1)
62	19.77	119.27	Open To Flow (2)
121	37.30	119.98	Shut-In(2)
181	519.91	120.78	End Shut-In(2)
182	2064.96	121.35	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
40.00	ocm 10%o 90% m	0.20
0.00	392 GIP	0.00

* Recovery from multiple tests

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

NAE Inc

13-17s-29w Lane, KS

317 Sidney Baker S
Kerrville, TX 78028

RJ Sutton #1-13

Job Ticket: 59047

DST#: 2

ATTN: Frank Taggart

Test Start: 2014.10.17 @ 03:54:21

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 53.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.59 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 1800.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
40.00	ocm 10%o 90%m	0.197
0.00	392 GIP	0.000

Total Length: 40.00 ft

Total Volume: 0.197 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: