



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1244713  
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: \_\_\_\_\_



1244713

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: <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

**RECEIVED**  
NOV 06 2014  
BY: AZ

**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 # 272229

=====  
Invoice Date: 10/31/2014 Terms: 0/30/10,n/30 Page 1  
=====

TAOS RESOURCES OPERATING, LLC  
1455 WEST LOOP SOUTH, ST. 600  
HOUSTON TX 77027  
(713)993-0774

MCCONAGHY 17-1  
46545  
17/33/5  
10/31/2014  
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	185.00	15.7000	2904.50
1102	CALCIUM CHLORIDE (50#)	550.00	.7800	429.00
1118B	PREMIUM GEL / BENTONITE	350.00	.2200	77.00
1107	FLO-SEAL (25#)	150.00	2.4700	370.50
4310	MISC. EQUIPMENT	25.00	1.4000	35.00

SUGAR

Sublet Performed	Description	Total
9996-180	CEMENT MATERIAL DISCOUNT	-1134.30

Description	Hours	Unit Price	Total
603 CEMENT PUMP (SURFACE)	1.00	870.00	870.00
603 EQUIPMENT MILEAGE (ONE WAY)	50.00	4.20	210.00
681 TON MILEAGE DELIVERY	435.00	1.41	613.35

WELL ID/AFE #	_____
CODE	<u>830</u>
N OR R	<u>NON</u>
APPROVAL	_____

Amount Due 5753.58 if paid after 11/10/2014

Parts:	3816.00	Freight:	.00	Tax:	171.63	AR	4546.68
Labor:	.00	Misc:	.00	Total:	4546.68		
Sublt:	-1134.30	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK 918/338-0808    EL DORADO, KS 316/322-7022    EUREKA, KS 620/583-7664    PONCA CITY, OK 580/762-2303    OAKLEY, KS 785/672-8822    OTTAWA, KS 785/242-4044    THAYER, KS 620/839-5269    GILLETTE, WY 307/686-4914    CUSHING, OK 918/225-2650



**CONSOLIDATED**  
Oil Well Services, LLC

JM=530

FT=514

TICKET NUMBER 46545  
LOCATION CL Dando  
FOREMAN Fuzz Y

272229

PO Box 884, Chanute, KS 66720  
820-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-31-14	2891	McCormagh 17-1	17	33	5	Cowley
CUSTOMER		Cowley #1		TRUCK #		DRIVER
MAILING ADDRESS		160		603		Toney
CITY		45#202		681		Stevon
STATE		1 1/2 W				
ZIP CODE		514				

JOB TYPE surface HOLE SIZE 12 1/4 HOLE DEPTH 265' CASING SIZE & WEIGHT 8 5/8  
 CASING DEPTH 265' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.7 SLURRY VOL 1.36 WATER gal/sk 6.5 CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 15.6 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Val #3. Pump and circulate mix  
185 lbs Class 'A' cement 29 gal 29 gal 1 1/2 poly glue. Displace 15 1/2 gal  
and shut in.

Cement did circulate approx 4 gal to pit

Thanks  
Fuzz Y Crow

773

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00
5406	50	MILEAGE	4.20	210.00
5407A	8.7 gal	Tow mileage Delivery	1.45	613.32
11045	185	Class 'A' cement	15.20	2904.30
1102	550 #	Calcium Chloride	.78	429.00
1188	350 #	Gal	.22	77.00
1107	150 #	Poly-Glue	2.47	370.50
4310	25 #	Sugar	1.40	35.00
		sub total		5509.32
		sub discount		1134.30
		sub total		4375.02

Revin 3737

*[Signature]*

TITLE TAOS RICK

SALES TAX 171.63  
ESTIMATED TOTAL 4546.68  
DATE 10/31/2014

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



**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

**RECEIVED**  
NOV 24 2014  
A2

INVOICE #

Invoice # 801889

Invoice Date: 11/18/2014

Terms: Net 30

Page 1

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

MCCONAUGHY 17-1

Part Number	Description	Qty	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.00	1,085.00	0.00	1,085.00
5406	Mileage Charge	50.00	4.20	0.00	210.00
5407A	Ton Mileage Delivery Charge	645.00	1.41	0.00	909.45
5402	Casing Footage	1,500.00	0.23	0.00	345.00
1104S	Class A Cement	275.00	15.70	30.00	3,022.25
1118B	Premium Gel / Bentonite	800.00	0.22	30.00	123.20
1102	Calcium Chloride (50#)	550.00	0.78	30.00	300.30
1110A	Kol Seal (50# BAG)	1,375.00	0.46	30.00	442.75
1144G	Mud Flush	500.00	1.10	0.00	550.00
4159	Float Shoe AFU 5 1/2	1.00	433.75	0.00	433.75
4154	Float Shoe 3 8V THD (3 1/2)	1.00	459.50	0.00	459.50
4136S	Turbolizer S Band 5 1/2"	7.00	132.50	0.00	927.50
4104	Cement Basket 5 1/2	2.00	290.00	0.00	580.00

Sub Total 11,055.20

Discounted Amount 1,666.50

SubTotal After Discount 9,388.70

WELL ID/AFE # 175D539  
CODE 840.130  
N OR R [Signature]  
APPROVAL

Amount Due 11,599.57 if paid after 12/18/2014

Tax: 437.71  
Total: 9,826.41



**CONSOLIDATED**  
Oil Well Services, LLC

JM 742

FT 763

INVOICE # 801889

TICKET NUMBER 46549

LOCATION El Dorado

FOREMAN Fuzz

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-7-14	2871	McCormachy 17-1	17	33S	5E	Com. Co.
CUSTOMER			country 1			
TADS OPER. Resources Inc			+160			
MAILING ADDRESS			4-S			
1455 W. Loop South Ste 600			202			
CITY			2-W			
Houston			SIN			
STATE			TX			
ZIP CODE			72254			

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 3750' CASING SIZE & WEIGHT 5 1/2 15.5  
 CASING DEPTH 3744' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.7 SLURRY VOL 64.1 gal WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 20'  
 DISPLACEMENT 88.6 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Uel #3 float equip Cont 5-6-9-12-16-19  
25 Baskets 15-28. Rig up and circulate 30 min. Pump 3 BBL  
water, 500 gal mud flush, 5 BBL water. Mix 20 Sgs in RH.  
Mix 24 Sgs class 'A' 37000. 290cc w/5 #100 seal/SK. Bunch  
pump and lines. Drop plug and displace 89 BBL. 1000' lift  
hand plug @ 1500'. Float hold.

THANK YOU  
FUZZ & CREW

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085	1085.00
5406	50 miles	MILEAGE	420	210.00
5407A	12.9 Ton	Ton mileage delivery	14	909.45
5402	1500'	Casing footage	.23	345.00
11045	275 Sgs	Class 'A'	15.20	4317.50
11185	800 #	Gel	.22	176.00
1102	550 #	Calcium chloride	.78	429.00
1110A	1375 #	Kal-seal	.46	632.50
11446	500 gal	Mud flush	1.10	550.00
4159	1	5 1/2 - ATU Float shoe (w)	433.25	433.25
4154	1	5 1/2 - Latchdown Assy (w)	459.00	459.00
41368	7	5 1/2 - S-Brand Turbodrills (w)	132.50	927.50
4104	2	5 1/2 - Baskets (w)	290.00	580.00
		subtotal		11055.20
		disc		1666.50
		subtotal		9388.70
		SALES TAX		437.71
		ESTIMATED TOTAL		9826.41

Revin 3737

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

Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair  
Jay Scott Emler, Commissioner  
Pat Apple, Commissioner

Sam Brownback, Governor

March 04, 2015

J. G. Murphey  
Taos Resources Operating Company LLC  
1455 W LOOP S  
SUITE 600  
HOUSTON, TX 77027

Re: ACO-1  
API 15-035-24605-00-00  
McConaghy 17-1  
NW/4 Sec.17-33S-05E  
Cowley County, Kansas

Dear J. G. Murphey:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 10/30/2014 and the ACO-1 was received on March 04, 2015 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department