



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1246419
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
-----------------------------------	-----------------	---

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: _____



1246419

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: _____ _____
--	---	---

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. 348

Date	Sec.	Twp.	Range	County	State	On Location	Finish
9-14-14	22	10	19	Roos	KS	12:30pm	
Location				Zulich 4 1/2 S E into			
Tomaseck				Well No. 2-22		Owner	
Contractor Discovery 4				To Quality Oilwell Cementing, Inc.			
Type Job 2 Stage bottom Stage				You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size 7 7/8		T.D. 3762		Charge To		11	
Csg. 5 1/2		Depth 3788.39		Street		American Oil	
Tbg. Size		Depth		City		State	
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg. 19.83		Shoe Joint 15.83		Cement Amount Ordered		200 Com 10 1/2 #	
Meas Line 19.50		Displace 89		5% Silicate			
EQUIPMENT				Common 200			
Pumptrk 20 No.		Cement Helper Mike		Poz. Mix			
Bulktrk 3 No.		Driver Mike		Gel.			
Bulktrk 4 No.		Driver Bonnie Chad		Calcium			
JOB SERVICES & REMARKS				Hulls			
Remarks:				Salt 17			
Rat Hole				Flowseal			
Mouse Hole				Kol-Seal 1000 #			
Centralizers 2579 11, 1315, 55				Mud CLR 48 500 gal			
Baskets 2, 54				CFL-117 or CD110 CAF 38			
DN or Port Collar # 54 14 79ft				Sand			
Dropped Ball Circulated				Handling 227			
43 min Run Plumb				Mileage 5 1/2			
But not down hole				FLOAT EQUIPMENT			
100 mixed down hole displace				Guide Shoe			
with 54 inwd 34 wtd				Centralizer 8 tubos			
				Baskets 3			
				AFU Inserts			
				Float Shoe 1			
				Latch Down 1			
Lift 700 PSI				DV Weather Tool			
Land 1900 PSI				Flex plug and Baffle			
				Pumptrk Charge prod string			
				Mileage 35			
				Bottom stage			
				Tax			
				Discount			
				Total Charge			
Signature <i>Chad Mayfield</i>							

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. 349

Date	9-14-14	Sec.	22	Twp.	10	Range	19	County	Rooks	State	KS	On Location	12.30 PM	Finish	5.15 PM
------	---------	------	----	------	----	-------	----	--------	-------	-------	----	-------------	----------	--------	---------

Location Zurich 4 1/2 S E 10

Lease # Tomascheck Well No. 2-22 Owner _____

Contractor Discovery 1 To Quality Oilwell Cementing, Inc.
You are hereby requested to rent cementing equipment and furnish
Type Job 2 Stage top Stage cementer and helper to assist owner or contractor to do work as listed.

Hole Size 7 7/8 T.D. 3762 Charge _____

Csg. 5 1/2 Depth 3758.39 Street American Oil

Tbg. Size _____ Depth _____ City _____ State _____

Tool _____ Depth _____ The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. _____ Shoe Joint _____ Cement Amount Ordered 380 Qmde

Meas Line 15.5 Displace 35.42 BBL Y flow

EQUIPMENT Common 380 Qmde

Pumptrk	<u>20</u>	No.	Cementer	<u>mit</u>			Poz. Mix
			Helper				

Bulktrk	<u>21</u>	No.	Driver	<u>Mick</u>			Gel.
			Driver				

Bulktrk	<u>pu</u>	No.	Driver	<u>Chad</u>	<u>Lennie</u>		Calcium
			Driver				

JOB SERVICES & REMARKS Hulls _____

Remarks: _____ Salt _____

Rat Hole 30 SHS Flowseal 95

Mouse Hole 75 SHS Kol-Seal _____

Centralizers _____ Mud CLR 48 _____

Baskets _____ CFL-117 or CD110 CAF 38 _____

D/V or Port Collar _____ Sand _____

Circulated 30 min plug put Handling 380

mouse hole mix Mileage _____

305 down hole **FLOAT EQUIPMENT**

Displaced with water Guide Shoe _____

Centralizer _____

Baskets _____

AFU Inserts _____

Float Shoe _____

Latch Down _____

LPI 400 psi Pumptrk Charge prod string Top stage

Land 800 psi Mileage 35

used 350 SHS Tax _____

Cement did Circulate Discount _____

X Signature Ch Mayfield Total Charge _____

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. 345

Date	9-9-14	Sec.	22	Twp.	10	Range	19	County	Boonville	State	Ks	On Location	3:30pm	Finish	7:15
------	--------	------	----	------	----	-------	----	--------	-----------	-------	----	-------------	--------	--------	------

Lease v.	Tomascheck-4		Well No.	2-22	Owner	Einto
----------	--------------	--	----------	------	-------	-------

Contractor	Discover 1	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	Surface	Charge To	American Oil
----------	---------	-----------	--------------

Hole Size	12 1/4	T.D.	221	Street	American Oil
-----------	--------	------	-----	--------	--------------

Csg.	8 5/8	Depth	220	City		State	
------	-------	-------	-----	------	--	-------	--

Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.		
-----------	--	-------	--	--	--	--

Tool		Depth		Cement Amount Ordered	150 3% CC
------	--	-------	--	-----------------------	-----------

Cement Left in Csg.	20 ft	Shoe Joint	20 ft	Meas Line	Displace 12.3/4
---------------------	-------	------------	-------	-----------	-----------------

EQUIPMENT			Common	130
------------------	--	--	--------	-----

Pumptrk	20	No.		Cementer	Matt	Helper		Poz. Mix	
---------	----	-----	--	----------	------	--------	--	----------	--

Bulktrk	15	No.		Driver	Nick	Driver		Gel.	3
---------	----	-----	--	--------	------	--------	--	------	---

Bulktrk	pu	No.		Driver	Clayton B	Driver		Calcium	5
---------	----	-----	--	--------	-----------	--------	--	---------	---

JOB SERVICES & REMARKS			Hulls	
-----------------------------------	--	--	-------	--

Remarks:		Salt	
----------	--	------	--

Rat Hole		Flowseal	
----------	--	----------	--

Mouse Hole		Kol-Seal	
------------	--	----------	--

Centralizers		Mud CLR 48	
--------------	--	------------	--

Baskets		CFL-117 or CD110 CAF 38	
---------	--	-------------------------	--

D/V or Port Collar		Sand	
--------------------	--	------	--

Cement did		Handling	150
------------	--	----------	-----

Circulate		Mileage	
-----------	--	---------	--

FLOAT EQUIPMENT			
------------------------	--	--	--

Guide Shoe			
------------	--	--	--

Centralizer			
-------------	--	--	--

Baskets			
---------	--	--	--

AFU Inserts			
-------------	--	--	--

Float Shoe			
------------	--	--	--

Latch Down			
------------	--	--	--

Pumptrk Charge	Surface		
----------------	---------	--	--

Mileage	35		
---------	----	--	--

Tax		
Discount		
Total Charge		

X Signature	Cliff Meffell
-------------	---------------