



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1248929
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: _____



1248929

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

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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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Achenbach 5
Doc ID	1248929

All Electric Logs Run

Dual Induction
Neutron Density
Microlog
Frac log
Sonic



RECEIVED

DEC 15 2014

INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 147479

Invoice Date: Dec 6, 2014

Page: 1

Voice: (817) 546-7282
Fax: (817) 246-3361

Federal Tax I.D.#: 20-8651475

Bill To:
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

Customer ID	Field Ticket #	Payment Terms	
Lotus	64878	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Dec 6, 2014	1/5/15

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Achenbach #5		
225.00	CEMENT MATERIALS	Class A Common	17.90	4,027.50
423.00	CEMENT MATERIALS	Gel	0.50	211.50
634.00	CEMENT MATERIALS	Chloride	1.10	697.40
243.29	CEMENT SERVICE	Cubic Feet Charge	2.48	603.36
277.59	CEMENT SERVICE	Ton Mileage Charge	2.75	763.37
1.00	CEMENT SERVICE	Surface	1,512.25	1,512.25
25.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	110.00
25.00	CEMENT SERVICE	Pump Truck Mileage	7.70	192.50
1.00	CEMENT SUPERVISOR	Jake Heard		
1.00	OPERATOR ASSISTANT	Wayne Rucker		

GL# 9208
 DESC. Cement
Surf chg, #5

 WELL # Achen

Subtotal	8,117.88
Sales Tax	352.95
Total Invoice Amount	8,470.83
Payment/Credit Applied	
TOTAL	8,470.83

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 1,623.58

ONLY IF PAID ON OR BEFORE
Jan 5, 2015

ENTERED

DEC 17 2014

- 1623.58

6847.25

ALLIED OIL & GAS SERVICES, LLC 064878

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT
Mediana Lodge KS

DATE <i>12-16-14</i>	SEC. <i>1</i>	TWP <i>35s</i>	RANGE <i>13w</i>	CALLED OUT	ON LOCATION <i>5145A</i>	JOB START <i>7:45 A</i>	JOB FINISH <i>8:15 A</i>
LEASE <i>Achenbach</i>	WELL# <i>5</i>	LOCATION <i>Hardtner KS w to Gyp Hill Rd</i>		COUNTY <i>Barber</i>	STATE <i>KS</i>		
OLD OR NEW (Circle one)				<i>N I E into</i>			

CONTRACTOR <i>Duke J</i>	OWNER <i>Lotus</i>
TYPE OF JOB <i>Surface</i>	CEMENT
HOLE SIZE <i>14 3/4</i>	AMOUNT ORDERED <i>225 Sx Class A1</i>
CASING SIZE <i>10 3/4</i>	<i>3% cc + 2% Gel</i>
TUBING SIZE	
DEPTH	
DRILL PIPE	
DEPTH	
TOOL	
DEPTH	
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <i>20</i>
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT <i>28 bbl Fresh</i>	

EQUIPMENT

PUMP TRUCK CEMENTER <i>Bill Heard</i>	
# <i>518/545</i> HELPER <i>Jake Heard</i>	
BULK TRUCK	
# <i>999/741</i> DRIVER <i>Wayne Pucker</i>	
BULK TRUCK	
#	DRIVER

REMARKS:

Safety Meeting Rig up
Safety Meeting Pressure Test
Pump spacer Mix + pump cmt
Displace shut in Release psi

CMFD id CVB

CHARGE TO: *Lotus*

STREET _____

CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME *X Galed D Ranch*

SIGNATURE *X Galed D Ranch*

COMMON <i>225 Sx A</i>	@ <i>17.90</i>	<i>4027.50</i>
POZMIX	@	
GEL <i>423#</i>	@ <i>.50</i>	<i>211.50</i>
CHLORIDE <i>634#</i>	@ <i>1.10</i>	<i>697.40</i>
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	@	
MILEAGE		
<i>20% = 987.28</i>		TOTAL <i>4936.40</i>

SERVICE

DEPTH OF JOB <i>302</i>		
PUMP TRUCK CHARGE		<i>1512.25</i>
EXTRA FOOTAGE <i>LU 25</i>	@ <i>4.46</i>	<i>110.00</i>
MILEAGE <i>25</i>	@ <i>7.70</i>	<i>192.50</i>
MANIFOLD	@	
<i>Handling 243.29</i>	@ <i>2.48</i>	<i>603.85</i>
<i>Drayage 11.10/25</i>	@ <i>2.75</i>	<i>763.38</i>
<i>20% = 636.29</i>		TOTAL <i>3181.48</i>

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
	@	
TOTAL _____		

SALES TAX (If Any) _____

TOTAL CHARGES *8117.88*

DISCOUNT *6494.30* IF PAID IN 30 DAYS



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 147681
Invoice Date: Dec 11, 2014
Page: 1

Federal Tax I.D.#: 20-8651475

Bill To:
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

RECEIVE
DEC 20 2014

Customer ID	Field Ticket #	Payment Terms	
Lotus	65082	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Dec 11, 2014	1/10/15

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Achenbach #5		
175.00	CEMENT MATERIALS	ASC	23.50	4,112.50
50.00	CEMENT MATERIALS	60/40/4% Gel Blend	18.92	946.00
875.00	CEMENT MATERIALS	Kol Seal	0.98	857.50
82.00	CEMENT MATERIALS	FI-160	18.90	1,549.80
44.00	CEMENT MATERIALS	Flo Seal	2.97	130.68
281.00	CEMENT SERVICE	Cubic Feet Charge	2.48	696.88
301.37	CEMENT SERVICE	Ton Mileage Charge	2.75	828.77
1.00	CEMENT SERVICE	Production Casing	3,099.25	3,099.25
25.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	110.00
25.00	CEMENT SERVICE	Pump Truck Mileage	7.70	192.50
1.00	CEMENT SERVICE	Manifold Rental	275.00	275.00
1.00	EQUIPMENT SALES	5-1/2 Guide Shoe	281.00	281.00
1.00	EQUIPMENT SALES	5-1/2 AFU Insert	335.00	335.00
5.00	EQUIPMENT SALES	5-1/2 Centralizer	57.00	285.00
1.00	EQUIPMENT SALES	5-1/2 Basket	395.00	395.00
1.00	EQUIPMENT SALES	5-1/2 Rubber Plug	85.00	85.00
1.00	CEMENT SUPERVISOR	Justin Bower		
1.00	CEMENT SUPERVISOR	Jake Heard		
1.00	OPERATOR ASSISTANT	Paul Mazzalongo		

ENTERED
DEC 23 2014

GL# 9308
DESC. cement prod
CSG
#5
WELL # Achen

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 2,559.78

ONLY IF PAID ON OR BEFORE
Jan 10, 2015

Subtotal	14,179.88
Sales Tax	641.89
Total Invoice Amount	14,821.77
Payment/Credit Applied	
TOTAL	14,821.77

-2,559.78
12,261.99

ALLIED OIL & GAS SERVICES, LLC 065082

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Medicine Lake K.S.

DATE <u>12-11-14</u>	SEC. <u>1</u>	TWP. <u>35S</u>	RANGE <u>13W</u>	CALLED OUT	ON LOCATION <u>9:00am</u>	JOB START <u>12:15am</u>	JOB FINISH <u>2:20am</u>
LEASE <u>Achenbach</u>		WELL # <u>5</u>		LOCATION <u>Hardner KS west to Eyr Hill Rd</u>		COUNTY <u>Barber</u>	STATE <u>K.S.</u>
OLD OR (NEW) (Circle one)			<u>1 north East into</u>				

CONTRACTOR <u>Duke #7</u>	OWNER <u>Lotus operating</u>
TYPE OF JOB <u>Production</u>	
HOLE SIZE <u>7 7/8</u> T.D.	CEMENT
CASING SIZE <u>5 1/2</u> DEPTH <u>5,618.93</u>	AMOUNT ORDERED <u>50.5x (6014014 9/2 In)</u>
TUBING SIZE DEPTH	<u>175.5x ASC + 5" Kolseal + .5" F1160 + 1/4"</u>
DRILL PIPE DEPTH	<u>Flaseal</u>
TOOL DEPTH	
PRES. MAX MINIMUM	COMMON @
MEAS. LINE SHOE JOINT <u>42.43</u>	POZMIX @
CEMENT LEFT IN CSG. <u>40.43 FT</u>	GEL @
PERFS.	CHLORIDE @
DISPLACEMENT	ASC <u>175.5x</u> @ <u>23.50</u> <u>4112.50</u>

EQUIPMENT

PUMP TRUCK # <u>548/545</u>	CEMENTER <u>Justin Bower</u>
BULK TRUCK # <u>981/987</u>	HELPER <u>Jake Heard</u>
BULK TRUCK #	DRIVER <u>Paul</u>
BULK TRUCK #	DRIVER

60:40:4 <u>50.5x</u>	@ <u>18.92</u>	<u>946.00</u>
Kolseal <u>875"</u>	@ <u>.98</u>	<u>857.50</u>
F1-160 <u>82"</u>	@ <u>18.90</u>	<u>1549.80</u>
Flaseal <u>44"</u>	@ <u>2.97</u>	<u>130.68</u>
	@	
	@	
	@	
	@	
HANDLING	@	
MILEAGE		
20% = <u>1519.29</u>	TOTAL	<u>7596.48</u>

REMARKS:

SERVICE

DEPTH OF JOB <u>5,618.93</u>		
PUMP TRUCK CHARGE <u>3099.25</u>		
EXTRA FOOTAGE LV <u>25</u>	@ <u>4.40</u>	<u>110.00</u>
MILEAGE <u>Hwy 25</u>	@ <u>7.70</u>	<u>192.50</u>
MANIFOLD	@	<u>275.00</u>
Handling <u>281</u>	@ <u>2.48</u>	<u>696.88</u>
Mileage <u>301.50</u>	@ <u>2.75</u>	<u>828.78</u>
20% = <u>1040.48</u>	TOTAL	<u>5202.41</u>

CHARGE TO: Lotus operating
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1 Guide Shoe	@	<u>281.00</u>
1 API Inset	@	<u>335.00</u>
5 Centralizers	@ <u>5200</u>	<u>285.00</u>
1 Basket	@	<u>375.00</u>
1 Rubber	@	<u>85.00</u>
	TOTAL	<u>1381.00</u>

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
TOTAL CHARGES 14,179.89
DISCOUNT _____ IF PAID IN 30 DAYS
NET 11,620.11

PRINTED NAME X Robin Brown
SIGNATURE X Robin Brown

*Total Water Volume sources may include fresh water, produced water, and/or recycled water
** Information is based on the maximum potential for concentration and thus the total may be over 100%

All component information listed was obtained from the supplier's Material Safety Data Sheets (MSDS). As such, the Operator is not responsible for inaccurate and/or incomplete information. Any questions regarding the content of the MSDS should be directed to the supplier who provided it. The Occupational Safety and Health Administration's (OSHA) regulations govern the criteria for the disclosure of this information. Please note that Federal Law protects "proprietary", "trade secret", and "confidential business information" and the criteria for how this information is reported on an MSDS is subject to 29 CFR 1910.1200(i) and Appendix D.

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

April 09, 2015

Tim Hellman
Lotus Operating Company, L.L.C.
100 S MAIN ST, STE 420
WICHITA, KS 67202-3737

Re: ACO-1
API 15-007-24258-00-00
Achenbach 5
NW/4 Sec.01-35S-13W
Barber County, Kansas

Dear Tim Hellman:

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 12/5/2014 and the ACO-1 was received on April 08, 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