



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1250586  
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: \_\_\_\_\_



1250586

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)*

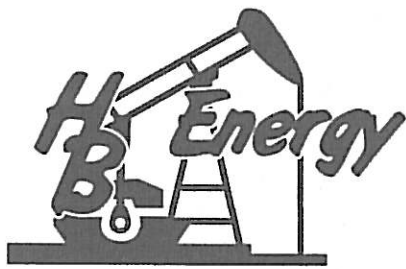
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  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

<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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Fueling American Prosperity™

# Oil and Gas Well Drilling

3137 Virginia Rd, Wellsville KS 66092

Owners: Clay Hughes  
Isaac Burbank

Phone: (785) 979-9493  
(913) 963-9127

Fax: (785) 883-2305

## Well Log

DE & TZ LLC

Knabe Well #: I-24

Sec. 31 Twp. 14 Rng. 22

FSL: 3590 FEL: 1050

API: 15-091-24412

Start: 03/25/15

End: 03/26/15

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>	
7	Soil & Clay	7'	
35	Sand Stone	42	Red & grey, making water
6	Limey Sandstone	48	Grey, hard sandstone, making water
6	Sandstone	54	
48	Shale	102	
4	Lime	106	
3	Shale	109	
15	Lime	124	
6	Shale	130	
9	Lime	139	Making little fresh water
7	Shale	146	
18	Lime	164	
12	Shale	176	
2	Lime	178	
6	Shale	184	
28	Lime	212	
25	Shale	237	
3	Lime	240	
14	Shale	254	
24	Lime	278	
15	Shale	293	
8	Lime	301	
19	Shale	320	
10	Lime	330	
3	Shale	333	
26	Lime	359	
12	Shale	371	
1	Lime	372	
12	Shale	384	
6	Lime	390	
2	Shale	392	
1	Lime	393	
2	Shale	395	

12	Lime	407	
6	Shale	413	
24	Lime	437	
3	Shale	440	
4	Lime	444	
5	Shale	449	
5	Lime	454	Base of Kansas City / Hertha
28	Shale	482	
3	Broken Sand	485	Grey sand & shale, no odor
6	Sand	491	Grey, no odor
3	Broken Sand	494	
2	Silty Shale	496	
69	Shale	565	
2	Silty Shale	567	
3	Broken Sand	570	40% brown sand, 60% shale, ok bleed
1	Silty Shale	571	
52	Shale	623	
3	Lime	626	
2	Shale	628	
1	Coal	629	
6	Shale	635	
6	Lime	641	
16	Shale	657	
6	Lime	663	Making water
9	Shale	672	
4	Lime	676	
27	Shale	703	Red Bed
1	Lime	704	
9	Shale	713	
3	Broken Sand	716	Brown sand & grey shale, light bleed
57	Shale	773	
1	Lime & Shells	774	
3	Shale	777	
6	Broken Sand	783	Grey sand & shale, no show, no odor
4	Silty Shale	787	
22	Shale	809	
1	Coal	810	
3	Shale	813	
7	Silty Shale	820	
9	Shale	829	
1	Coal	830	
4	Shale	834	
1	Oil Sand	835	Brown soft sand, good bleed
3	Limey Sand	838	
35	Shale	873	
1	Coal	874	

22	Shale	896	
3	Oil Sand	899	Soft black sand, good bleed
2	Limey Sand	901	White Limey sand & black oil sand, good bleed
6	Broken Sand	907	70% black sand, 30% shale, ok bleed
2	Oil Sand	909	Black sand with few thin shale seems, ok bleed
7	Silty Shale	916	Shale with very thin laminated sand seems, no oil
1	Shale	917	
1	Coal	918	
66	Shale	984	TD

Drilled an 11" hole to 67'

Drilled a 5 5/8" hole to 984'

03/24/15 set 67' of 7" surface casing, cemented with 14 sacks of cement.

03/25/15 chip sampled Bartlesville zone.

03/25/15 set 969' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 clamp, 1 float-shoe, and baffle.

Baffle set at 938'.



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

MAIN OFFICE  
 P.O.Box884  
 Chanute, KS 66720  
 620/431-9210, 1-800/467-8676  
 Fax 620/431-0012

Invoice Invoice# 803791

Invoice Date: 03/30/15 Terms: C.O.D. Page 1

D.E. EXPLORATION

P.O. BOX 128  
 WELLSVILLE KS 66092  
 USA  
 7858834057

KNABE #I-24

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,085.0000	10.000	976.50
5406	Mileage Charge	30.000	4.2000	10.000	113.40
5402	Casing Footage	969.000	0.0000	0.000	0.00
5407	Min. Bulk Delivery Charge	1.000	368.0000	10.000	331.20
5502C	80 Vacuum Truck Cement	2.000	100.0000	10.000	180.00
1124	Poz Cement Mix	146.000	11.5000	30.000	1,175.30
1118B	Premium Gel / Bentonite	1,295.000	0.2200	30.000	199.43
1111	Sodium Chloride (Granulated Salt)	307.000	0.3900	30.000	83.81
1110A	Kol Seal (50# BAG)	730.000	0.4600	30.000	235.06
4402	2 1/2 Rubber Plug	1.000	29.5000	0.000	29.50
1401	HE 100 Polymer	0.500	47.2500	0.000	23.63

Subtotal 4,251.56  
 Discounted Amount 903.73  
 SubTotal After Discount 3,347.83

Amount Due 4,433.91 If paid after 03/30/15

Tax: 128.82  
 Total: 3,476.65



**CONSOLIDATED**  
Oil Well Services, LLC

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

2497  
2430

Invoice #803791

TICKET NUMBER 50821  
LOCATION Ottawa, KS  
FOREMAN Casey Kennedy

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3/25/15	2355	Knabe # I-24	NE 31	14	22	JO
CUSTOMER DE + TZ c/o DE Exploration			TRUCK #			
MAILING ADDRESS PO Box 128			DRIVER		TRUCK #	
CITY Wellsville			DRIVER		TRUCK #	
STATE KS			DRIVER		TRUCK #	
ZIP CODE 66092			DRIVER		TRUCK #	

JOB TYPE long string HOLE SIZE 5 5/8" HOLE DEPTH 984' CASING SIZE & WEIGHT 2 7/8" EUE  
CASING DEPTH 916' DRILL PIPE \_\_\_\_\_ TUBING baffle - 938' OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT IN CASING 31'  
DISPLACEMENT 5.43 lbs DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5.4 bpm

REMARKS: hold safety meeting, established circulation, mixed & pumped 1/2 gal Polymer, circulated for 1 hr to condition hole, mixed & pumped 300 # gel followed by 5 hrs fresh water, mixed & pumped 146 sks 50/50 Pozmix cement w/ 2% gel, 5% salt, & 5 # Kalseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 5.43 lbs fresh water, pressured to 800 PSI, released pressure, shut in casing.

\* mixed & pumped 300 # gel to get circulation

*[Handwritten signature]*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085.00	
5406	30 mi	MILEAGE	126.00	
5402	916'	casing footage		
5407	minimum	tax mileage	3108.00	
5502c	2 hrs	80 Vac	200.00	
		trucks	1779.00	
		-10%	177.90	
		subtotal		1601.10
1124	146 sks	50 Pozmix cement	1679.00	
1118B	1295 #	Gel	284.90	
1111	307 #	Salt	119.73	
1110A	730 #	Kalseal	335.80	
		materials	2419.43	
		-30%	725.83	
		subtotal		1693.60
4402	1	2 1/2" rubber plug		29.50
1401	1/2 gal	Polymer		23.63
		7.375%		128.82
		SALES TAX		128.82
		ESTIMATED TOTAL		3476.65

Revin 3737 AUTHORIZATION Bryan Nick TITLE \_\_\_\_\_ DATE 4/4/3/17

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.