

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1248868  
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: \_\_\_\_\_

1248868

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:  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> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# GLOBAL CEMENTING, L.L.C.

1598

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT:  
RUSSELL KS

DATE <u>1-26-2015</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>YOUNKIN</u>	WELL #. <u>1</u>	LOCATION			COUNTY <u>LOGAN</u>	STATE <u>KS</u>	
OLD OR <u>(NEW)</u> (CIRCLE ONE)							

CONTRACTOR LANDMARK DRILLING RIG #6 OWNER \_\_\_\_\_

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. \_\_\_\_\_

CASING SIZE 8 5/8 DEPTH 264.45

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 20'

PERFS \_\_\_\_\_

DISPLACEMENT 15.5 BBL

EQUIPMENT \_\_\_\_\_

PUMP TRUCK CEMENTER BRAD

# P1 HELPER BUD

BULK TRUCK

# B1 DRIVER AUSTIN

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

CEMENT AMOUNT ORDERED 225 SK COM  
3% CC / 4% GFC

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

REMARKS:  
RUN IN 6 JOINTS 8 5/8 CASING W/ 12'  
LANDING JOINT - CIRCULATE MUD  
HOPE UP CEMENT - MIX 225 SK -  
HOPE UP & DISPLACE W/ 15.5 BBL H2O  
SHOW W/ WITH 200 PSI - CEMENT DID  
CIRCULATE

CHARGE TO: BACK TFA

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Cementing, L.L.C.,  
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 \_\_\_\_\_

SIGNATURE [Signature]

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE 29 @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS



FIELD RECEIPT NO. 110021283

CUSTOMER BLACK TEA OIL LLC		PURCHASE ORDER NO.		CUSTOMER NUMBER 0040140007 - 0040140007		INVOICE NUMBER 905657035	
MAIL STREET OR BOX NUMBER 1014 EAST 29TH		CITY HAYS		STATE Kansas		ZIP CODE 67601	
DATE WORK MO. DAY YEAR 02 04 2015		WELL API NO: 15108213440000		WELL TYPE: New Well			
COMPLETED Jack A Roberts		JOB DEPTH(ft) 4,590		WELL CLASS: Gas			
DISTRICT PP, PERRYTON		TD WELL DEPTH(ft) 4,600		GAS USED ON JOB: No Gas			
WELL NAME AND NUMBER Youngkin A 1		COUNTY/PARISH Logan		JOB TYPE CODE: Long String			
WELL LOCATION:		LEGAL DESCRIPTION		UNIT OF MEASURE		QUANTITY	
PRODUCT CODE	DESCRIPTION	UNIT OF MEASURE	QUANTITY	LIST PRICE UNIT	GROSS AMOUNT	% DISC.	NET AMOUNT
100022	Class H Cement	sacks	140				2,526.30
100275	Sodium Metasilicate	lbs	97				178.97
100295	Cello Flake	lbs	54				123.93
100404	Sodium Chloride	lbs	332				77.69
488019	FP-6L	gals	2				93.83
488073	FL-62	lbs	97				940.66
499634	Kol Seal	lbs	880				495.00
499680	Static Free	lbs	3				54.95
499702	ClayCare, tote	gals	5				330.75
L425411-00	Lafarge Red Rock Poz	sacks	410				811.80
SUB-TOTAL FOR Product Material							5,633.88
A152	Personnel Per Diem Chrg - Cement Svc	ea	1				210.00
M100	Bulk Materials Blending Charge	cu ft	280				686.70
SUB-TOTAL FOR Service Charges							896.70

SERVICE RECEIPT: I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.

CUSTOMER AUTHORIZED AGENT

BHI APPROVED

SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.

CUSTOMER AUTHORIZED AGENT

Gerald

SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS



FIELD RECEIPT NO. 110021283

<b>CUSTOMER</b> BLACK TEA OIL LLC STREET OR BOX NUMBER 1014 EAST 29TH CITY HAYS STATE Kansas ZIP CODE 67601		<b>PURCHASE ORDER NO.</b> 0040140007 - 0040140007		<b>INVOICE NUMBER</b> 0040140007 - 0040140007	
<b>MAIL INVOICE TO</b> DATE WORK COMPLETED MO. 02 DAY 04 YEAR 2015 BHI REPRESENTATIVE Jack A Roberts		<b>WELL API NO.</b> 15109213440000		<b>WELL TYPE :</b> New Well	
<b>DISTRICT</b> PP, PERRYTON		<b>JOB DEPTH (ft)</b> 4,590		<b>WELL CLASS :</b> Gas	
<b>WELL NAME AND NUMBER</b> Younkin A 1		<b>TD WELL DEPTH (ft)</b> 4,600		<b>GAS USED ON JOB :</b> No Gas	
<b>WELL LOCATION :</b> LEGAL DESCRIPTION Logan		<b>COUNTY/PARISH</b> Kansas		<b>JOB TYPE CODE :</b> Long String	
<b>PRODUCT CODE</b> F061A F090 J050 J225 J390 J391		<b>DESCRIPTION</b> Cement Pumping, 4001 - 5000 ft Fuel per pump charge - cement Cement Head Data Acquisition, Cement, Standard Mileage, Heavy Vehicle Mileage, Auto, Pick-Up or Treating Van		<b>UNIT OF MEASURE</b> 6hrs pump/hr job job miles miles	
<b>QUANTITY</b> 1 6 1 1 400 800		<b>PRICE UNIT</b> 1 6 1 1 400 800		<b>GROSS AMOUNT</b> 2,902.50 421.50 373.50 958.50 2,133.00 <del>2,412.00</del> <del>9,204.00</del>	
<b>NET AMOUNT</b> 4,035.35 4,035.35		<b>% DISC.</b> 19,766.93		1206 18560.93	
<b>J401</b> Bulk Delivery, Dry Products SUB-TOTAL FOR Freight/Delivery Charges		2276 ton-mi		4,035.35 4,035.35	
<b>FIELD ESTIMATE</b> SUB-TOTAL FOR Equipment		400 800		2,133.00 <del>2,412.00</del> <del>9,204.00</del>	
<b>ARRIVE LOCATION :</b> MO. 02 DAY 03 YEAR 2015 TIME 21:30 CUSTOMER REP. Gerald		<b>SERVICE ORDER:</b> I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH THE TERMS AND CONDITIONS PRINTED ON THE LAST PAGE OF THIS FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.		<b>SERVICE RECEIPT:</b> I CERTIFY THAT THE MATERIALS AND SERVICES LISTED WERE RECEIVED AND ALL SERVICES PERFORMED IN A WORKMANLIKE MANNER.	
<b>SEE LAST PAGE FOR GENERAL TERMS AND CONDITIONS</b>		<b>CUSTOMER AUTHORIZED AGENT</b> _____ _____		<b>CUSTOMER AUTHORIZED AGENT</b> _____ _____	

Black Tea Oil

Younkin A1

RTD 4600'

LTD Cased Hole 4552

Port Collar @ 2310 750 sks

5 ½ set @ 4590' 220 sks

8 5/8 set @ 264' 200 sks

Anhydrite 2300-2342

Perfs- Did not shoot any

(Darrel Dipman with the kcc said when we pressured up the csg to 1000# during out Port Collar Job it would count as our MIT)