

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1249027  
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: \_\_\_\_\_

1249027



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: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____					
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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**QUALITY OILWELL CEMENTING, INC.**

PO Box 32 - 740 West Wichita Ave, Russell KS 67665  
 Phone: 785-324-1041 fax: 785-483-1087  
 Email: cementing@ruraltel.net

Date: 1/9/2015  
 Invoice # 747

P.O.#:  
 Due Date: 2/8/2015  
 Division: Russell

# Invoice

**RECEIVED**

JAN 16 2015

KAHAN & ASSOCIATES

**Contact:**  
 KAHAN & ASSOCIATES  
**Address/Job Location:**  
 KAHAN & ASSOCIATES  
 P.O. BOX 700780  
 TULSA OK 74170

**Reference:**  
 R OESER 1 SEC 29-16-11

**Description of Work:**  
 SURFACE JOB

Services / Items Included:	Quantity	Price	Taxable	Item	Quantity	Price	Taxable
Labor		\$ 963.85	No				
Common-Class A	150	\$ 2,612.50	Yes				
Calcium Chloride	7	\$ 411.27	Yes				
Bulk Truck Matl-Material Service Charge	200	\$ 422.22	No				
Pump Truck Mileage-Job to Nearest Camp	32	\$ 337.10	No				
POZ Mix-Standard	40	\$ 266.00	Yes				
Bulk Truck Mileage-Job to Nearest Bulk Plant	32	\$ 197.26	No				
Premium Gel (Bentonite)	3	\$ 51.55	Yes				

**Invoice Terms:**

Net 30

SubTotal: \$ 5,261.75  
 Discount Available ONLY if Invoice is Paid & Received  
 within listed terms of invoice: \$ (789.26)

SubTotal for Taxable Items:	\$ 2,840.12
SubTotal for Non-Taxable Items:	\$ 1,632.37
<b>Total:</b>	<b>\$ 4,472.49</b>
<b>Tax:</b>	<b>\$ 203.07</b>

7.15% Barton County Sales Tax

**Thank You For Your Business!**

**Amount Due: \$ 4,675.56**  
**Applied Payments:**  
**Balance Due: \$ 4,675.56**

Past Due Invoices are subject to a service charge (annual rate of 24%)  
 This does not include any applicable taxes unless it is listed.  
 ©2008-2013 Straker Investments, LLC. All rights reserved.

Approved  
 1-16-15  
 W

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

RECEIVED

Home Office P.O. Box 32 Russell, KS 67665

No. 747

Phone 785-483-2025

JAN 16 2015

Cell 785-324-1041

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-8-15	29	16	11	Barton	KS	KAHAN & ASSOCIATES	7:45 AM

Location Hitchman 1E N1070

Lease R Oeser Well No. #1 Owner

Contractor Royal #2 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 Kahan & Associates

Hole Size 12 1/4 T.D. 407' Street

Csg. 8 3/8 Depth City State

Tbg. Size Depth

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

Cement Left in Csg. 20' Shoe Joint Cement Amount Ordered 190 80/20 3% cc 2% Gel

Méas Line Displace 24 1/2 bbi

**EQUIPMENT**

Pumptrk	No.	Cementer	Common
5		Helper <u>David</u>	150
Bulktrk	No.	Driver	Poz. Mix
3		Driver <u>Ryan</u>	40
Bulktrk	No.	Driver	Gel.
Pu		Driver <u>Brett</u>	3
			Calcium
			7

**JOB SERVICES & REMARKS**

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand
	Handling <u>200</u>
	Mileage

**FLOAT EQUIPMENT**

Cement	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down

Circulated!!

Pumptrk Charge Surface

Mileage 32

X Signature [Signature]

Tax
Discount
Total Charge



**CONSOLIDATED**  
Oil Well Services, LLC

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

Invoice

Invoice#

802994

Invoice Date: 01/16/15

Terms: Net 30

Page 1

KAHAN & ASSOCIATES INC

P.O. BOX 700780  
TULSA OK 74170  
USA  
9184929797

R. OESER #1

**RECEIVED**

JAN 22 2015

KAHAN & ASSOCIATES

Part No	Description	Quantity	Unit Price	Discount(%)	Total
5401	Cement Pumper	1.000	1,395.0000	0.000	1,395.00
5406	Mileage Charge	40.000	4.2000	0.000	168.00
5407A	Ton Mileage Delivery Charge	300.000	1.4100	0.000	423.00
1104S	Class A Cement	150.000	15.7000	0.000	2,355.00
1118B	Premium Gel / Bentonite	450.000	0.2200	0.000	99.00
1102	Calcium Chloride (50#)	240.000	0.7800	0.000	187.20
1110A	Kol Seal (50# BAG)	750.000	0.4600	0.000	345.00
4159	Float Shoe AFU 5 1/2	1.000	361.0000	0.000	361.00
4454	5 1/2 Latch Down Plug	1.000	266.7500	0.000	266.75
4130	Centralizer 5 1/2	4.000	50.5000	0.000	202.00
4104	Cement Basket 5 1/2	1.000	240.0000	0.000	240.00
4310	Misc. Equipment	1.000	0.0000	0.000	0.00

Subtotal 6,041.95

Discounted Amount 0.00

SubTotal After Discount 6,041.95

Amount Due 6,331.95 If paid after 02/15/15

Tax: 290.00

Total: 6,331.95

Approved  
1-22-15  
ID



**CONSOLIDATED**  
Oil Well Services, LLC

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

JM 1786 FT 1724

TICKET NUMBER 48546  
LOCATION FL Dorado  
FOREMAN Fuzzz

**Invoice #802994**

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
1-14-15	4514	B. OBER #1	29	165	11w	Barton KS	
CUSTOMER Kahan and Associates Inc			CLASS. #				
MAILING ADDRESS P.O. Box 700780			7N				
CITY Tulsa			18E4W				
STATE OK			114W				
ZIP CODE 74170			N1R				
TRUCK #		DRIVER		TRUCK #		DRIVER	
760		Chris		713		Dugan	
		Scotty					

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 3365' CASING SIZE & WEIGHT 5 1/2 14#  
 CASING DEPTH 3352' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.8 SLURRY VOL 39.5 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 17.65  
 DISPLACEMENT 81.3 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting, Royal #1 float equip. Cent 1-4-7-10  
Basket Top of #8, R.S up and circulate 1/2 hr. Pump 5 BBL water spacer  
Mix 15 SKS. 1 MH - 30 SKS. 1 RT. Mix 10 SKS CLASS 'A' 370 gal, 290 cc  
w 5# Kolsral plug. Wash pump and lines, Drop plug and displace  
8 2 1/4 BBL. 700\* first, 1200\* land. float held.

Thanks  
Fuzzz crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1395.00	1395.00
5406	40	MILEAGE	4.20	168.00
5407A	7.5 ton	Ton mileage Delivery	56.40	423.00
11045	150 SKS	Class 'A'	15.70	2355.00
1118B	450*	Gel	.22	99.00
1102	240*	Calcium Chloride	.78	187.20
1110A	750*	Kolsral	.46	345.00
4159	1	5 1/2" ACO float shoe	361.00	361.00
4454	1	5 1/2" hatchdown Assy	266.25	266.25
4130	4	5 1/2" Centralizers	50.50	202.00
4104	1	5 1/2" Basket	240.00	240.00
4310	1	5 1/2" Rotating head	250.00	N/C
				6041.95
		7.15	SALES TAX	290.00
			ESTIMATED TOTAL	6331.95

Revin 3737 AUTHORIZATION John Huey 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