

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1250886
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: _____

1250886



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

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	Lawco Holdings, LLC
Well Name	Fulsom 3-8
Doc ID	1250886

Tops

Name	Top	Datum
Pawhuska	792	1165 GR
Stalnaker	1474	1165 GR
Hog Shooter	1976	1165 GR
Altamont	2440	1165 GR
Fort Scott	2567	1165 GR
Mississippian Chat	2874	1165 GR
Meramecian	2874	1165 GR
Woodford	3306	1165 GR
Arbuckle	3310	1165 GR

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report

Ticket No. 2249
 Foreman Shannon Feet
 Camp Eureka KS

APP # 15-035-24638

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
4-15-15	1136	Folsom H 3-8	8	355	7E	Cowley	KS
Customer			Unit #	Driver	Unit #	Driver	
Lawco holding LLC			105	Dave G			
Mailing Address			110	Kevin M			
113 N. main P.O. Box 423			113	Chris B			
City	State	Zip Code					
Bentonville	AR	72712					

Job Type L/S Hole Depth 3365' Slurry Vol. 42 + 56 = 98 Bbl Tubing ---
 Casing Depth 3285, 48 bl. Hole Size 7 7/8" Slurry Wt. 128 + 137 # Drill Pipe ---
 Casing Size & Wt. 5 1/2" @ 15.5 # Cement Left in Casing 0 Water Gal/SK 80 + 90 Other ---
 Displacement 80 3/4 Bbl Displacement PSI 1250 Bump Plug to 1750 BPM Displacement @ 5 BPM

Remarks: Safety meeting, Rig up to 5 1/2" casing, Break circulation w/ 5 Bbl H2O mixed 12 Bbl caustic soda, pre flush, 8 Bbl H2O, spacer, mixed 150 SKS 60/40 Pozmix cement w/ 6% gel + 2# phenoseal/sk @ 128 #/gal as our lead cement, Tailed in w/ 175 SKS Thick set cement w/ 5# kol-seal/sk + 1# phenoseal/sk @ 137 #/gal. Shut down wash out pump + lines + displace w/ 80 3/4 Bbl H2O. Final pumping pressure of 1250 psi, bumped plug to 1750 psi. Good circulation while cementing, @ 40 Bbl into displacement we lost circulation, Annulus was staying full just not circulating. Rig down, job complete.

centralizers on 2, 8, 16, 24, 37, 45, 54 Baskets # 12, 32

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1050.00	1050.00
C107	70	Mileage	3.95	276.50
C203	150 SKS	60/40 Pozmix Cement	12.75	1912.50
C206	775 #	Gel @ 6%	.20	155.00
C208	300 #	Phenoseal @ 2 #/SK	1.25	375.00
C201	175 SKS	Thick set cement	19.50	3412.50
C207	875 #	kol-seal @ 5 #/SK	.45	373.75
C208	175 #	Phenoseal @ 1 #/SK	1.25	218.75
C217	100 #	caustic soda pre flush	1.60	160.00
C108B	16.07 Ton	Ton mileage	1.35	1518.62
C661	1	5 1/2 AFU Float Shoe	294.00	294.00
C421	1	5 1/2 Latch down plug	230.00	230.00
C604	2	5 1/2 cement Baskets	225.00	450.00
C504	7	5 1/2 x 7 7/8 centralizers	48.00	336.00
C222	8 gal	KCL	34.00	272.00
"Thank you Shannon & crew"				
			Sub Total	11,054.62
			Sales Tax 6.40%	525.40
Authorization <u>[Signature]</u> Title <u>Co. Rep.</u>			Total	11,580.02

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report

Ticket No. **2248**

Foreman Shannon Fock

Camp Eureka, KS

API # 15-025-24638

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
4-10-15	1136	Fulsom	# 3-8	8	355	7E	Cowley	KS
Customer				Unit #	Driver	Unit #	Driver	
Lowco Holding LLC				105	Dave G			
Mailing Address				110	Kevin m			
113 N. Main P.O. Box 423								
City	State	Zip Code						
Bentonville	AR	72712						

Job Type Surface Hole Depth 325' Slurry Vol. 46 Bbl Tubing ---
 Casing Depth 316.40 b.L Hole Size 12 1/4" Slurry Wt. 15 # Drill Pipe ---
 Casing Size & Wt. 8 5/8" 23 # Cement Left in Casing 15-20' Water Gal/SK 6.5 Other ---
 Displacement 20 Bbl Displacement PSI --- Bump Plug to --- BPM Displace @ 5BPM

Remarks: Safety meeting, Rig up to 8 5/8" casing, Break circulation w/ 5 bbl H2O, mixed 190 sxs class "A" cement w/ 3% calcium, 2% gel & 1/4# Floseal/SK @ 15#/gal. Displace w/ Pbl H2O & shut casing in. Good circulation @ all times, 14-15 Bbl cement to put, rig down job complete.

"Thank you"
 Shannon & crew

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	840.00	840.00
C107	70	Mileage	3.95	276.50
C200	190 SXS	Class "A" Cement	15.00	2850.00
C205	540 #	Calcium @ 3%	.60	324.00
C206	360 #	Gel @ 2%	.20	72.00
C209	50 #	Floesal @ 1/4#/SK	2.25	112.50
C108B	8.93 Ton	Ton mileage bulk Trk	1.35	843.88
			Sub Total	5318.88
			Sales Tax	214.94
Authorization <u>[Signature]</u> Title <u>Co P. p.</u>			Total	5533.82

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