



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1251420  
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<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |
|-----------------------------------|-----------------|---|

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: \_\_\_\_\_



1251420

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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>List All E. Logs Run: _____ | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>Name Top Datum |
|--|---|

| 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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><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><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____<br><i>(Submit ACO-4)</i> | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|---|---|

# ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:  
Medicine Lodge #3

|                                |               |                    |                         |                       |                        |                        |                         |
|--------------------------------|---------------|--------------------|-------------------------|-----------------------|------------------------|------------------------|-------------------------|
| DATE <u>2-13-15</u>            | SEC <u>76</u> | TWP. <u>35S</u>    | RANGE <u>16W</u>        | CALLED OUT <u>530</u> | ON LOCATION <u>700</u> | JOB START <u>11:50</u> | JOB FINISH <u>12:55</u> |
| LEASE <u>MUSSEY</u>            |               | WELL # <u>7-16</u> | LOCATION <u>HARDNER</u> | COUNTY <u>Barber</u>  | STATE <u>KS</u>        |                        |                         |
| OLD OR <u>NEW</u> (Circle one) |               |                    |                         |                       |                        |                        |                         |

**CONTRACTOR**

TYPE OF JOB Production

HOLE SIZE 7 7/8 T.D. 5568

CASING SIZE 5 1/2 DEPTH 5568

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

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

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

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

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

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER VAUGHN GOOD OIL & GAS

**CEMENT**

AMOUNT ORDERED 200SK #

10% Gyp, 10% Salt, 6% to 1 seal

8" FL-160, 25% to 28" De Bant

|                    |               |   |              |                |
|--------------------|---------------|---|--------------|----------------|
| COMMON             | <u>200SK</u>  | @ | <u>25.28</u> | <u>5056.00</u> |
| POZMIX Gyp         | <u>1880 #</u> | @ | <u>.88</u>   | <u>1654.40</u> |
| GEL Salt           | <u>1080 #</u> | @ | <u>1.68</u>  | <u>734.40</u>  |
| CHLORIDE to 1 seal | <u>1200 #</u> | @ | <u>.98</u>   | <u>1176.00</u> |
| MSC FL-160         | <u>150 #</u>  | @ | <u>18.90</u> | <u>2835.00</u> |
| De Bant            | <u>50 #</u>   | @ | <u>3.50</u>  | <u>175.00</u>  |
| Mud Clean          | <u>12</u>     | @ | <u>41.00</u> | <u>492.00</u>  |

**EQUIPMENT**

856-499

PUMP TRUCK CEMENTER Roger Smith

# 988-989 HELPER Jeremy Vance

BULK TRUCK

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

BULK TRUCK

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

HANDLING \_\_\_\_\_

MILEAGE \_\_\_\_\_

2000 = 2464.77 TOTAL 12123.00

**REMARKS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SERVICE**

|                   |               |   |                             |
|-------------------|---------------|---|-----------------------------|
| DEPTH OF JOB      | <u>5568</u>   |   |                             |
| PUMP TRUCK CHARGE |               |   | <u>3099.25</u>              |
| EXTRA FOOTAGE     |               | @ |                             |
| LD MILEAGE        | <u>2.5</u>    | @ | <u>4.40</u> <u>110.00</u>   |
| MANIFOLD          | <u>1 ea</u>   | @ | <u>275.00</u> <u>275.00</u> |
| HV Mileage        | <u>2.5</u>    | @ | <u>7.70</u> <u>192.50</u>   |
| Drayage           | <u>350.71</u> | @ | <u>2.57</u> <u>796.13</u>   |
| Handling          | <u>300</u>    |   | <u>2.49</u> <u>759.88</u>   |
|                   |               |   | TOTAL <u>528.77</u>         |

CHARGE TO: Vaughn Good Oil & Gas

STREET \_\_\_\_\_

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

**PLUG & FLOAT EQUIPMENT**

|                |              |   |                             |
|----------------|--------------|---|-----------------------------|
| Latch Down Pkg | <u>5 1/2</u> | @ | <u>66.00</u> <u>660.00</u>  |
| Res Guide Shoe |              | @ | <u>281.00</u> <u>281.00</u> |
| Centralizer    | <u>15 ea</u> | @ | <u>57.00</u> <u>855.00</u>  |

18961.39 TOTAL 1746.00

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 19151.64

PRINTED NAME \_\_\_\_\_

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

SIGNATURE Vaughn Good

NET-  
15321.31

DATE 07/12 10:30 AM 7:40 7:20  
 LEASE Nusser WELL # 7-16 LOCATION Hardtner 1 South to COUNTY Barber STATE Kansas  
 OLD OR NEW (Circle one) State Mine Rd. East N/S

CONTRACTOR Mendenhall  
 TYPE OF JOB surface  
 HOLE SIZE 12 1/4 T.D. 352'  
 CASING SIZE 8 5/8" DEPTH 352  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX 250 MINIMUM —  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS.  
 DISPLACEMENT 19 1/2 Bobb Freshwater

OWNER Vaughn Good Oil + Gas

CEMENT AMOUNT ORDERED  
150 sk 65.35:67.6eL + 37.00 + 1/4 Floseal  
100 sk Class A + 37.00 + 27.00

EQUIPMENT  
 PUMP TRUCK CEMENTER Carl Baldin  
 # 548-545 HELPER Jason Thimesch  
 BULK TRUCK  
 # 949-741 DRIVER JAMES Bowen  
 BULK TRUCK  
 # DRIVER

|                |                         |                |                |
|----------------|-------------------------|----------------|----------------|
| COMMON         | <u>Class A 100sk @</u>  | <u>17.90</u>   | <u>1790.00</u> |
| POZMIX         |                         | @              |                |
| GEL            | <u>188<sup>oz</sup></u> | @ <u>1.05</u>  | <u>197.40</u>  |
| CHLORIDE       | <u>674<sup>oz</sup></u> | @ <u>1.10</u>  | <u>741.40</u>  |
| ASC            |                         | @              |                |
| <u>AWW</u>     | <u>150 sk</u>           | @ <u>19.88</u> | <u>2982.60</u> |
| <u>Floseal</u> | <u>38<sup>sk</sup></u>  | @ <u>2.97</u>  | <u>112.86</u>  |
|                |                         | @              |                |
|                |                         | @              |                |
|                |                         | @              |                |
|                |                         | @              |                |
|                |                         | @              |                |
| HANDLING       |                         | @              |                |
| MILEAGE        |                         | @              |                |

REMARKS:  
see Job log

TOTAL 5823.66  
 200% = 1164.73

CHARGE TO: Vaughn Good Oil  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE  
 DEPTH OF JOB 352'  
 PUMP TRUCK CHARGE 1512.25  
 EXTRA FOOTAGE LU 25 @ 4.40 110.00  
 MILEAGE 25 @ 7.70 192.50  
 MANIFOLD @ 275.00  
Handling 282.02 @ 2.48 699.41  
Drayage 301.65 @ 2.75 829.54

TOTAL 3618.70  
 200% = 723.74

To: Allied Oil & Gas Services, LLC.  
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PLUG & FLOAT EQUIPMENT  
1-Rubber plug @ 131.00  
1-Fiber Baffle plate @ 91.25  
3-Centralizers @ 75.00 225.00  
 @  
 @

TOTAL 447.25  
 200% = 89.45

PRINTED NAME Wesley Mendenhall

SALES TAX (if Any) \_\_\_\_\_  
 TOTAL CHARGES 9889.61  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS