

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1254161

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

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: \_\_\_\_\_



1254161

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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)

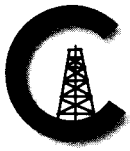
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No (If No, skip question 3)

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> 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 (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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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**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 # 271968

Invoice Date: 10/23/2014 Terms: 0/30/10,n/30

Page 1

LEGEND OIL & GAS, LTD  
STE. 400 555 N. POINT CTR EAST  
ALPHARETTA GA 30022  
(760) 846-6295

LANDER #6  
45996  
28/29S/15E  
10/17/2014  
KS

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Description	Hours	Unit Price	Total
WATER TRANSPORT (CEMENT)	4.00	120.00	480.00

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	105.00	13.1800	1383.90
1118B	PREMIUM GEL / BENTONITE	650.00	.2200	143.00
1107A	PHENOSEAL (M) 40# BAG)	160.00	1.3500	216.00
1110A	KOL SEAL (50# BAG)	300.00	.4600	138.00
1126	OIL WELL CEMENT	55.00	19.7500	1086.25
1111	SODIUM CHLORIDE (GRANULA	350.00	.3900	136.50
1123	CITY WATER	5400.00	.0173	93.42
4404	4 1/2" RUBBER PLUG	1.00	47.2500	47.25

Sublet Performed	Description	Total
9996-170	CEMENT MATERIAL DISCOUNT	-931.10

Description	Hours	Unit Price	Total
485 CEMENT PUMP	1.00	1085.00	1085.00
485 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.20	189.00
515 MIN. BULK DELIVERY	1.00	368.00	368.00
667 MIN. BULK DELIVERY	1.00	368.00	368.00

Amount Due 5933.84 if paid after 11/02/2014

Parts:	3244.32	Freight:	.00	Tax:	142.26	AR	4945.48
Labor:	.00	Misc:	.00	Total:	4945.48		
Sublt:	-931.10	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_


**CONSOLIDATED**  
**OIL & GAS, LLC**

 PO Box 884, Chanute, KS 66720  
 620-431-9210 or 800-467-8676
TICKET NUMBER **45996**LOCATION EunhaFOREMAN Jason Cooper

271968

## FIELD TICKET &amp; TREATMENT REPORT

## CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-17-14	4759	Lancker #6	28	29S	15E	Wilson
CUSTOMER <u>Legend Oil &amp; Gas</u>						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			485	Zevu		
			515	Brent Mann		
			667	Jed		
			452 T103	Brent Mollen		

 JOB TYPE L.S. HOLE SIZE 6 3/4 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 4 1/2  
 CASING DEPTH 1358 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 136/14 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING -0-  
 DISPLACEMENT 21.6 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

 REMARKS: Rigged up to 4 1/2 casing, pumped 300# Gel Slush, Est circulation, pumped 105 sks 60/40, 4% Gel, 5# Kol-Seal, 1# Pheno, back @ 13.6ppg + 55 sks THX Seal, flushed pump & line, displaced plug to bottom @ 600psi Bump Plug @ 1100psi, shut shoe, released pressure, float held, shut in. Rigged down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	45	MILEAGE		189.00
5407	2	Mun Bulk Delivery		736.00
1131	105 sks	60/40 Poz		1383.90
1118B	650#	Gel		143.00
1102A	160#	Pheno-Seal		216.00
1110A	300#	Kol-Seal		138.00
1126	55 sks	THX Cement		1086.25
1111	350#	Seal		136.50
5501C	4hr	Transport		482.00
1123	5400 gal	City water		93.42
4404	1	4 1/2 Rubber Plug		47.25
		30% Discount # - 931.10		
				4803.22
		6.15%	SALES TAX	147.26
			ESTIMATED TOTAL	4950.48

Ravin 3737

Rich Coody

AUTHORIZATION \_\_\_\_\_

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.



McPherson Drilling LLC

[illegible]

Inj water @ 390'			Well Log					
Formation	Top	Btm.	Formation	Top	Btm.	Formation	Top	Btm.
Top Soil	0	4	lime	632	641	coal	1062	1063
lime	4	41	Shale	641	657	Shale	1063	1077
Shale	41	67	lime	657	679	Sand/Shale	1077	1109
lime	67	94	Shale	679	695	Shale	1109	1119
Shale	94	265	lime	695	711	Sand	1119	1145
lime	265	267	Shale	711	778	Oil Sand	1145	1214
Shale	267	277	Sand	778	794	Shale	1214	1252
Sand	277	345	Sand/Shale	794	826	coal	1252	1253
coal	345	346	lime	826	828	Shale	1253	1291
Sand	346	353	coal	828	829	coal	1291	1292
Sand/Shale	353	375	Shale	829	832	Shale	1292	1299
lime	375	378	lime	832	854	Sand & oil	1299	1302
Shale	378	396	Shale	854	887	Mississippi	1302	1380
lime	396	485	lime	887	908			
Shale	485	492	Shale	908	918			
lime	492	494	lime	918	929			
Sand	494	504	Shale	929	933			
Sand/Shale	504	509	coal	933	935			
Sand	509	529	lime	935	941			
Shale	529	535	Sand/shale	941	954			
lime	535	562	Shale	954	1048			
Shale	562	603	coal	1048	1049			
lime	603	617	Sand/Shale	1049	1060			
Shale	617	632	lime	1060	1062			