



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1255004
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: _____



1255004

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. # 20-8651475

25382
846
063804

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

SERVICE POINT
Oakley, KS

DATE <u>12/10/14</u>	SEC <u>30</u>	TWP. <u>14</u>	RANGE <u>41</u>	CALLED OUT	ON LOCATION	JOB START <u>11:00</u>	JOB FINISH <u>11:30</u>
LEASE <u>Pratt Co. Well # 2</u>		LOCATION <u>Shannon Springs S. to Gooseburg</u>		COUNTY <u>Wallace</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one)		<u>NEW</u>					

CONTRACTOR <u>Wild Cat</u>
TYPE OF JOB <u>5" LBS</u>
HOLE SIZE <u>5 7/8</u>
CASING SIZE <u>5 7/8</u>
TUBING SIZE
DRILL PIPE
TOOL
PRES. MAX
MEAS. LINE
CEMENT LEFT IN CSG. <u>40'</u>
PERFS.
DISPLACEMENT <u>23.74</u>

OWNER <u>SWMC</u>
CEMENT AMOUNT ORDERED <u>270SK Com 372 CC</u>
COMMON <u>220</u> @ <u>12.90</u> <u>4832.00</u>
POZMIX @
GEL <u>508</u> @ <u>1.50</u> <u>253.20</u>
CHLORIDE <u>261</u> @ <u>32.10</u> <u>8377.10</u>
ASC @

EQUIPMENT
PUMP TRUCK CEMENTER <u>Alan Ryan</u>
#457-281 HELPER <u>George George</u>
BULK TRUCK DRIVER <u>Jeff F (Tues)</u>
#892 DRIVER

Material Tester @ <u>5.924.10</u>
(1309.13/23%)
HANDLING <u>953</u> @ <u>2.40</u> <u>2287.20</u>
MILEAGE <u>225</u> @ <u>13.325</u> <u>2998.125</u>

REMARKS:
Pratt Co. Well # 2 Displace
Cement 5" LBS
Cement 5" LBS
5" LBS

TOTAL
SERVICE
DEPTH OF JOB
PUMP TRUCK CHARGE <u>1512.35</u>
EXTRA FOOTAGE @
MILEAGE <u>70</u> @ <u>53.90</u> <u>3773.00</u>
MANIFOLD @ <u>275.00</u>
Material <u>20</u> @ <u>308.00</u>
(1309.13/23%) TOTAL <u>5,923.35</u>

CHARGE TO Red Oak Energy
 STREET
 CITY STATE ZIP

PLUG & FLOAT EQUIPMENT
Washer Plug @ <u>110.00</u> <u>110.00</u>
Centralizer @ <u>25.00</u>
Griffith Plug @ <u>300.00</u>
TOTAL <u>505.00</u>

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 12,252.45
 DISCOUNT 2,724.91 (22%) IF PAID IN 30 DAYS

PRINTED NAME John Rouse
 SIGNATURE John Rouse

9,627.55 Net



INVOICE NUMBER

91683576

Liberal (620) 624-2277

B RED OAK ENERGY INC
 I PO BOX 783140
 L WICHITA
 L KS US 67278
 T
 O ATTN: VICTORIA DAVIS

J LEASE NAME Prairie Wind # 2
 O LOCATION
 B COUNTY Wallace
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.		TERMS	DUE DATE
40799818	19570			Net - 30 days	01/21/2015
For Service Dates: 12/20/2014 to 12/20/2014					
0040799818					
171705529A Cement-New Well Casing/Pi 12/20/2014 5 1/2 Long String D.V.					
AA2 Cement		150.00	EA	13.65	2,047.50 T
A-Con' Blend		300.00	EA	13.95	4,185.00 T
60/40 POZ		50.00	EA	9.00	450.00 T
Gypsum		705.00	EA	0.56	396.56 T
Salt		330.00	EA	0.38	311.25 T
C-15		85.00	EA	9.38	796.88 T
C-41P		36.00	EA	3.00	108.00 T
Gilsonite		750.00	EA	0.50	376.88 T
Calcium Chloride		846.00	EA	0.79	666.23 T
Celloflake		76.00	EA	2.78	210.90 T
C-51		57.00	EA	18.75	1,068.75 T
Cement Gel		86.00	EA	0.19	16.13 T
"Auto Fill Float Shoe 5 1/2" (Blue)"		1.00	EA	270.00	270.00
"5 1/2" Latch Down Plug & Assembly (Red		1.00	EA	791.14	791.14
"Two Stage Cement Collar, 5 1/2" (Red)"		1.00	EA	4,575.00	4,575.00
"Cmt Basket, Canvas 5 1/2"		1.00	EA	716.25	716.25
Antelope 5 1/2 X 7 7/8 Turbo		10.00	EA	56.25	562.50
Mud Flush		500.00	EA	0.65	322.50 T
Heavy Equipment Mileage		450.00	MI	5.25	2,362.50
Blending & Mixing Service Charge		500.00	BAG	1.05	525.00
"Proppant & Bulk Del. Chgs., per ton mil		3,495.00	EA	1.87	6,553.10
Depth Charge; 5001-6000'		1.00	EA	2,160.00	2,160.00
Additional Stage Charge		1.00	EA	1,620.00	1,620.00
Plug Container Util. Chg.		1.00	EA	187.50	187.50



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Red Oak Energy, Inc.
 7701 E Kellogg STE 710
 Wichita KS, 67207-1738
 ATTN: Kevin Davis

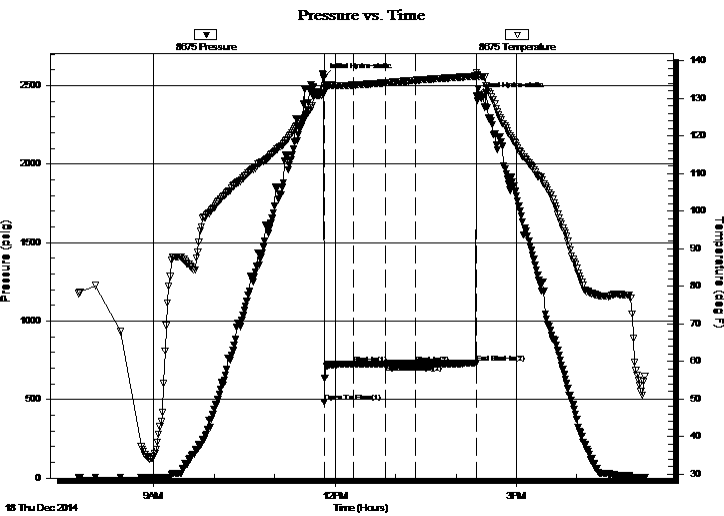
31-14s-41w Wallace Co, KS`
Prairie Wind #2-35
 Job Ticket: 58514 **DST#: 1**
 Test Start: 2014.12.18 @ 07:45:00

GENERAL INFORMATION:

Formation: **Morrow Sand**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 11:49:00
 Time Test Ended: 17:07:45
 Interval: **4970.00 ft (KB) To 5030.00 ft (KB) (TVD)**
 Total Depth: 5030.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Poor
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Jace McKinney
 Unit No: 75
 Reference Elevations: 3796.00 ft (KB)
 3780.00 ft (CF)
 KB to GR/CF: 16.00 ft

Serial #: 8675 Inside
 Press @ RunDepth: 728.49 psig @ 4981.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2014.12.18 End Date: 2014.12.18 Last Calib.: 2014.12.18
 Start Time: 07:45:15 End Time: 17:07:45 Time On Btm: 2014.12.18 @ 11:48:45
 Time Off Btm: 2014.12.18 @ 14:20:15

TEST COMMENT: B.O.B. in 45 sec, died to 10" blow in 30 min.
 Bled off for 5 min, No return blow
 No blow
 Bled off for 5 min, No return blow



PRESSURE SUMMARY

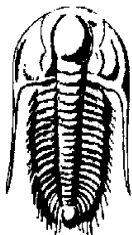
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2549.35	132.23	Initial Hydro-static
1	484.47	131.60	Open To Flow (1)
30	725.89	133.53	Shut-In(1)
62	727.90	134.16	End Shut-In(1)
62	727.91	134.17	Open To Flow (2)
91	728.49	134.78	Shut-In(2)
152	730.57	135.92	End Shut-In(2)
152	2431.49	136.91	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
20.00	100% Mud w ith oil spots in tool	0.10

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Red Oak Energy, Inc.
7701 E Kellogg STE 710
Wichita KS, 67207-1738

ATTN: Kevin Davis

31-14s-41w Wallace Co, KS`
Prairie Wind #2-35
Job Ticket: 58514 **DST#: 1**
Test Start: 2014.12.18 @ 07:45:00

GENERAL INFORMATION:

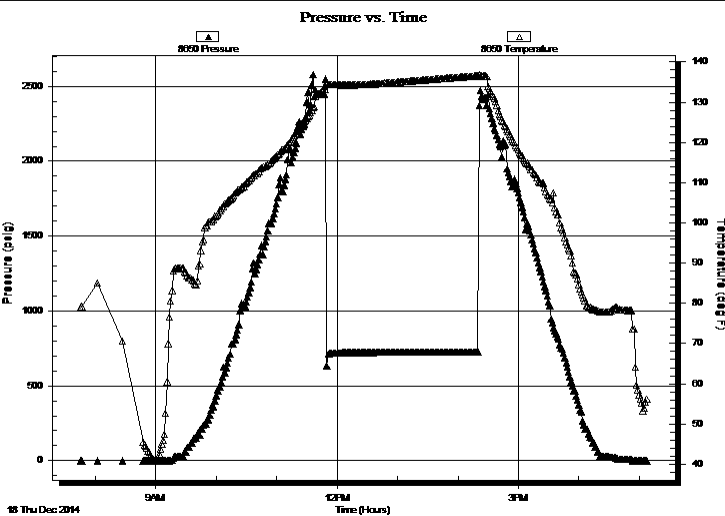
Formation: Morrow Sand	Test Type: Conventional Bottom Hole (Initial)
Deviated: No Whipstock: ft (KB)	Tester: Jace McKinney
Time Tool Opened: 11:49:00	Unit No: 75
Time Test Ended: 17:07:45	Reference Elevations: 3796.00 ft (KB)
Interval: 4970.00 ft (KB) To 5030.00 ft (KB) (TVD)	3780.00 ft (CF)
Total Depth: 5030.00 ft (KB) (TVD)	KB to GR/CF: 16.00 ft
Hole Diameter: 7.88 inches Hole Condition: Poor	

Serial #: 8650

Outside

Press @RunDepth: psig @ 4981.00 ft (KB)	Capacity: 8000.00 psig
Start Date: 2014.12.18 End Date: 2014.12.18	Last Calib.: 2014.12.18
Start Time: 07:45:15 End Time: 17:07:30	Time On Btm:
	Time Off Btm:

TEST COMMENT: B.O.B. in 45 sec, died to 10" blow in 30 min.
Bled off for 5 min, No return blow
No blow
Bled off for 5 min, No return blow



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
20.00	100% Mud w ith oil spots in tool	0.10

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

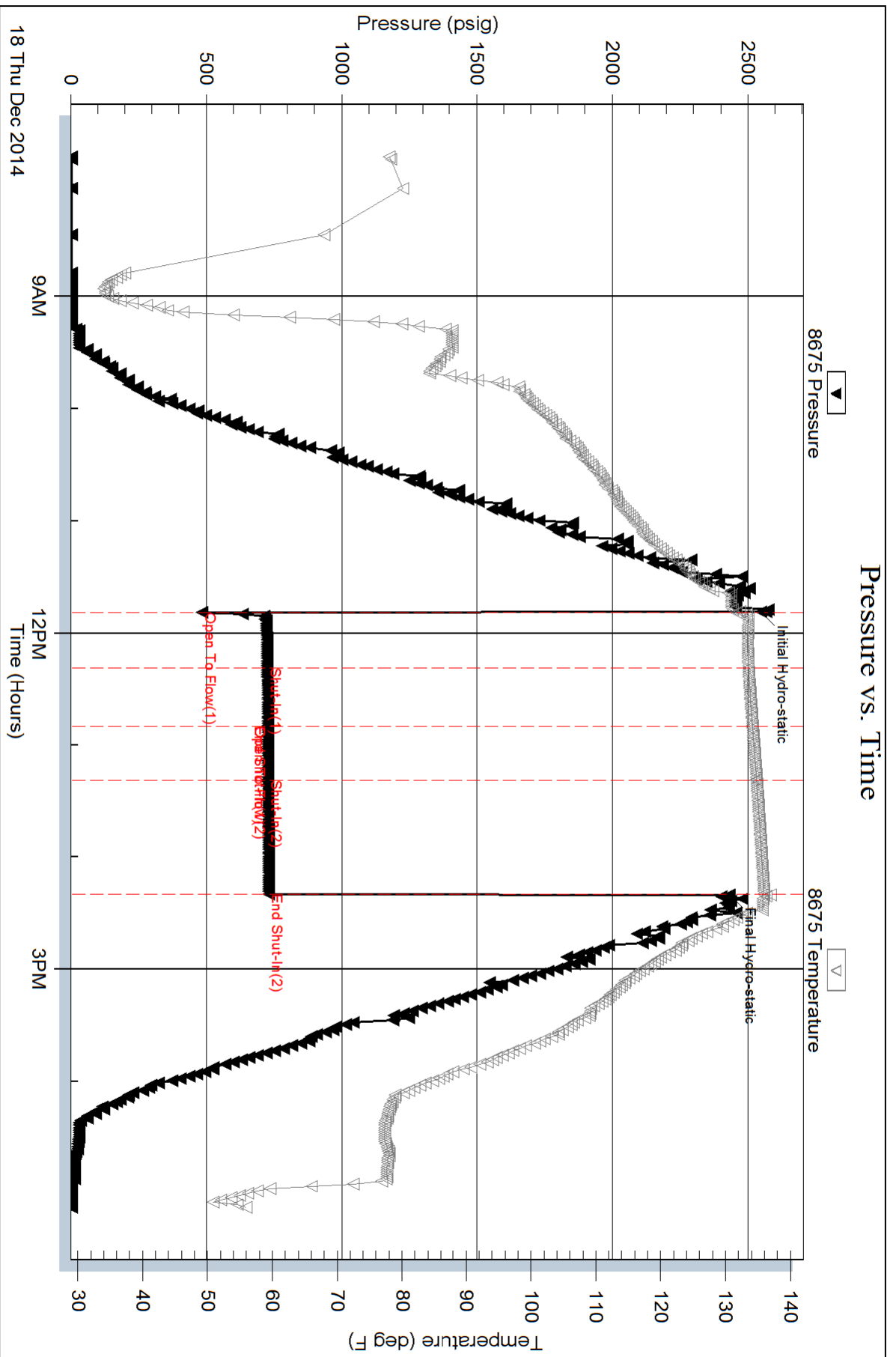
Serial #: 8675

Inside

Red Oak Energy, Inc.

Prairie Wind #2-35

DST Test Number: 1

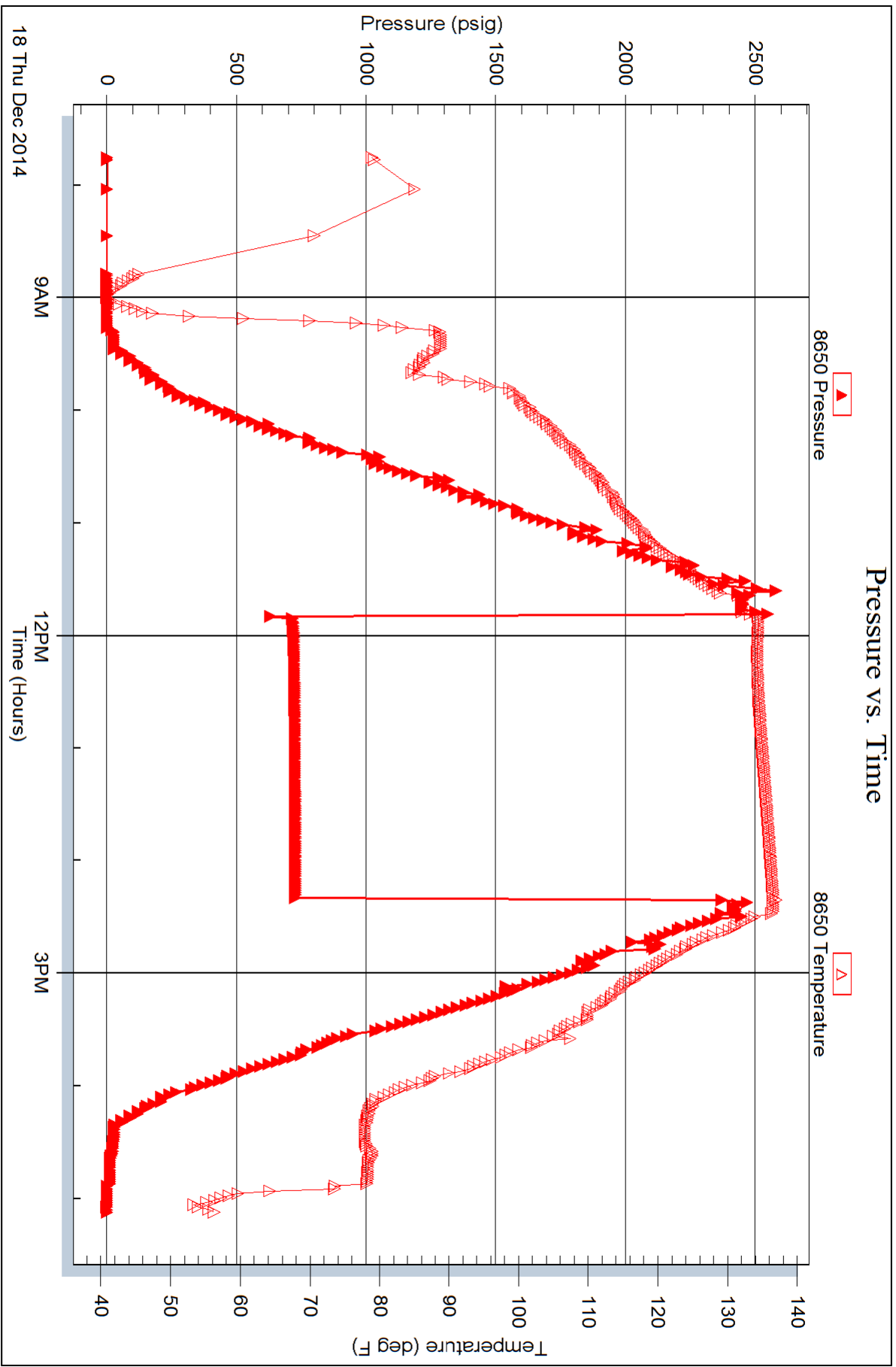


Serial #: 8650

Outside Red Oak Energy, Inc.

Prairie Wind #2-35

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 58514

Printed: 2014.12.18 @ 19:57:26