



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1255888
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: _____



1255888

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 <i>(Attach Additional Sheets)</i>	<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 <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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Redtail Investments LLC
Well Name	Murphy 1
Doc ID	1255888

Tops

Name	Top	Datum
Layton Sd	2320	1071
Kansas City Lime	2482	1233
Maramaton Shale	2710	1461
Cherokee Shale	2884	1635
Mississippi	3046	1797
Woodford Shale	3466	2217
Misner Series	3486	2237
Wilcox	3510	2251

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



Cement or Acid Field Report
 Ticket No. 2237
 Foreman Kevin McCoy
 Camp EUREKA

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
4-7-15	1150	Murphy #1					Cowley	Ks
Customer			Safety Meeting KM DG CB	Unit #	Driver	Unit #	Driver	
Red Tail Investments				105	DAVE G.			
Mailing Address				112	CHRIS B.			
P.O. Box 120								
City	State	Zip Code						
Wheatland	Ks	73097						

Job Type Longstring Hole Depth 3564' Slurry Vol. 65 BBL Tubing _____
 Casing Depth 3541' G.L. Hole Size 7 7/8 Slurry Wt. 13.7 # Drill Pipe _____
 Casing Size & Wt. 5 1/2" 17 # Cement Left in Casing 0' Water Gal/SK 9.0 Other _____
 Displacement 84.7 BBL Displacement PSI 1300 Bump Plug to 1800 PSI BPM _____

Remarks: Safety Meeting: Rig up to 5 1/2 Casing. Break Circulation w/ 5 BBL Fresh water, Pump 12 BBL Metasilicate Pre Flush, 5 BBL water Spacer. Mixed 200 SKS Thick Set Cement w/ 5" Kol-Seal/SK, 1" PhenoSeal 1SK @ 13.7 #/gal, yield 1.85 = 370 FT³ = 65 BBL Slurry. Wash out Pump & Lines. Shut down, Release, Latch down Plug. Displace Plug to seat w/ 84.7 BBL Fresh water. Final Pumping Pressure 1300 PSI. Bump Plug to 1800 PSI. Wait 2 minutes. Release Pressure. Float & Plug Held. Good Circulation while Cementing. Job Complete. Rig down.

Centralizers on * 1, 2, 4, 5, 8, 10, 12, 15

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge	1050.00	1050.00
C 107	0	Mileage LEFT TRUCK ON LOCATION	0	N/C
C 201	200 SKS	THICK Set Cement	19.50	3900.00
C 207	1000	Kol-Seal 5"/SK	.45 *	450.00
C 208	200 #	PhenoSeal 1"/SK	1.25 *	250.00
C 216	100 *	Sodium Metasilicate Pre Flush w/ 12 BBL water	2.00 *	200.00
C 108B	11.0 TONS	Ton Mileage 70 miles	1.35	1039.50
C 691	1	5 1/2 Guide Shoe	167.00	167.00
C 674	1	5 1/2 AFU Float Collar	342.00	342.00
C 504	8	5 1/2 x 7 7/8 Centralizers	48.00	384.00
C 421	1	5 1/2 Latch down Plug	230.00	230.00
			6.4%	
			Sub Total	8012.50
			Sales Tax	379.07
			Total	8391.57

590 (41958)
 \$1971.99

[Signature]

THANK YOU
 M

Authorization _____

Title _____

Total

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. 2068
 Foreman Shannon Feck
 Camp Eureka, KS

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
4-2-15	1150	murphy #1					Rawley	KS
Customer <u>Red tail Investments</u>				Safety Meeting SF DL SM	Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 120</u>					105	Dave G		
City <u>Wheatland</u> State <u>OK</u> Zip Code <u>73097</u>					111	Stevem		

Job Type Surface Hole Depth 395' Slurry Vol. 60 Bbl Tubing _____
 Casing Depth 395.6 K.B. 379.6' Hole Size 12 1/4" Slurry Wt. 15# Drill Pipe _____
 Casing Size & Wt. 8 5/8" 24# Cement Left in Casing 15-20' Water Gal/SK 6.40 Other _____
 Displacement 24 Bbl Displacement PSI _____ Bump Plug to _____ BPM Displace @ 5BPM

Remarks: Safety meeting, Rig up to 8 5/8" casing, Break circulation w/ 8 Bbl H2O, mixed 240 SKS Class "A" Cement w/ 3% Calcium, 2% gel + 1/4# FloSeal/SK @ 15#/gal. Shut down launch plug & displace w/ 24 Bbl H2O + shut casing in. Good circulation @ all times 18 Bbl Slurry to pit, 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	240 SKS	Class "A" Cement	15.00	3600.00
C205	680 #	Calcium @ 3%	.60	408.00
C206	450 #	Gel @ 2%	.20	90.00
C209	60 #	FloSeal @ 1/4 #/SK	2.25	135.00
C108B	11.28 Ton	Ton mileage bulk Trk	1.35	1065.96
C116	50 #	Sugar	.60	30.00
C413	1	8 5/8" wooden Plug	80.00	80.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> 590 (340.11) \$6463.24 </div>				
			Sub Total	6525.46
			Sales Tax 6.40%	277.95
Authorization _____ Title _____			Total	6803.41

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.

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

August 07, 2015

Steve Howard
Redtail Investments LLC
8045 SW 36th ST.
OKLAHOMA CITY, OK 73179

Re: ACO-1
API 15-035-24635-00-00
Murphy 1
NW/4 Sec.12-33S-05E
Cowley County, Kansas

Dear Steve Howard:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 04/02/2015 and the ACO-1 was received on August 07, 2015 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department