

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1254872
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: _____

1254872

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 <i>(Explain)</i> _____					
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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Max R. Lovely

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY Ritchie Exploration

LEASE #1 Taylor 9B

FIELD Wildcat

LOCATION S/2 SE NW

SEC 9 T13 R13

COUNTY Logan STATE KS

CONTRACTOR WW #8

SPUD 2-26-15 COMP 3-8-15

RID 4/15 LTD 4/15

MUD UP 333 TYPE Mud Chem

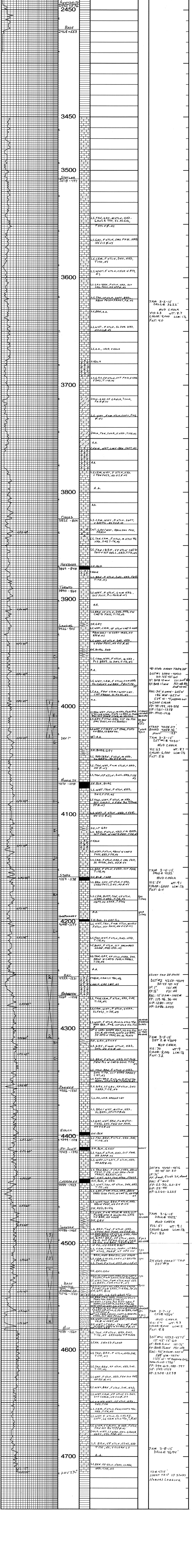
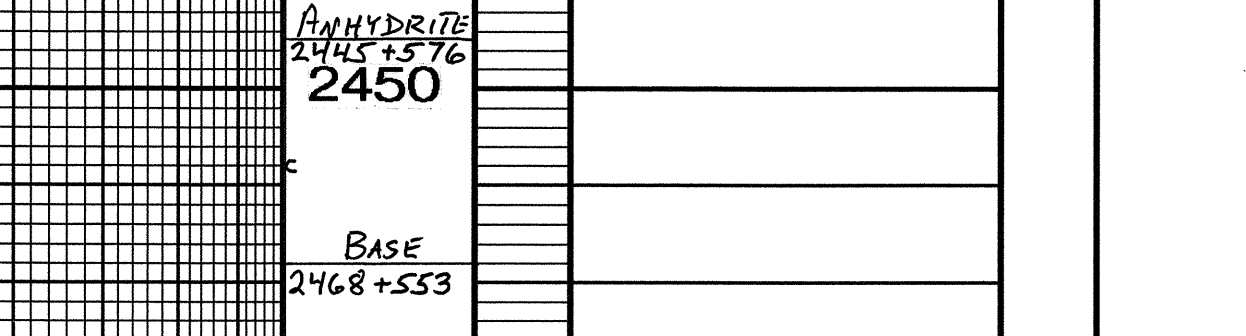
FORMATION TOOLS AND STRUCTURAL POSITION

FORMATION TOOLS AND STRUCTURAL POSITION

FORMATION	START	ELECTRIC	SUR-SEA	STRUCTURAL POSITION
	LOG	LOG	LOG	
Andover	2445	2446	477	576
Andover	2446	2447	477	576
Andover	2447	2448	477	576
Andover	2448	2449	477	576
Andover	2449	2450	477	576
Andover	2450	2451	477	576
Andover	2451	2452	477	576
Andover	2452	2453	477	576
Andover	2453	2454	477	576
Andover	2454	2455	477	576
Andover	2455	2456	477	576
Andover	2456	2457	477	576
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Andover	2467	2468	477	576
Andover	2468	2469	477	576
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Andover	2492	2493	477	576
Andover	2493	2494	477	576
Andover	2494	2495	477	576
Andover	2495	2496	477	576
Andover	2496	2497	477	576
Andover	2497	2498	477	576
Andover	2498	2499	477	576
Andover	2499	2500	477	576

REMARKS

LEGEND



LOG 7710

7



#1 Taylor 9B

2150' FNL & 2105' FWL

160' N & 125' E of S/2 SE NW Section 9-13S-34W

Logan County, Kansas

API# 15-109-21391-0000

Elevation: GL: 3016', KB: 3021'

Sample Tops			Ref. Well
Anhydrite	2446'	+575	-1
B/Anhydrite	2468'	+553	-2
Heebner	3869'	-848	+6
Toronto	3890'	-869	+5
Lansing	3926'	-905	-3
Muncie Shale	4070'	-1049	+5
Stark Shale	4159'	-1138	+6
Hush	4198'	-1177	+6
BKC	4252'	-1231	-1
Marmaton	4269'	-1248	+8
Altamont	4284'	-1263	+14
Pawnee	4356'	-1335	+4
Myrick	4399'	-1378	+3
Fort Scott	4413'	-1392	+6
Cherokee Shale	4444'	-1423	+2
Johnson	4486'	-1465	+7
Mississippian	4581'	-1560	+3
RTD	4715'	-1694	

ALLIED OIL & GAS SERVICES, LLC 062045

Federal Tax I.D. # 20-8651478

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

SERVICE POINT: Oakley

DATE <u>2-26-15</u>	SEC. <u>9</u>	TWP. <u>13</u>	RANGE <u>34</u>	CALLED OUT	ON LOCATION <u>7:30 pm</u>	JOB START <u>9:30 am</u>	JOB FINISH <u>10:00 pm</u>
LEASE <u>Taylor 9-B</u>	WELL# <u>1</u>	LOCATION <u>Monument 5 to Plains Rd,</u>		COUNTY <u>Logan</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)		<u>W to R. 310, 2 N, 1/2 W, Sinto</u>					

CONTRACTOR W.W. 8 OWNER Same

TYPE OF JOB Surface

HOLE SIZE 1 3/4 T.D. 218' CEMENT AMOUNT ORDERED 155 sks Com

CASING SIZE 8 5/8 DEPTH 223' AMOUNT ORDERED 3' CC

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13661 H₂O

EQUIPMENT

PUMP TRUCK # 431 CEMENTER Paul Beaver

BULK TRUCK # 373/306 DRIVER George Grant

BULK TRUCK # DRIVER

REMARKS:

Mix 155 sks Com 3' CC

Displace w/ water

cement did circulate

Thank You!

Paul + Crew

CHARGE TO: Ritchie Exploration

STREET

CITY STATE ZIP

BID

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.

PRINTED NAME Sid Deutscher

SIGNATURE Sid Deutscher

COMMON 155 sks @ 17.90 2774.50

POZMIX @

GEL @

CHLORIDE 4.34 @ 1.10 481.80

ASC @

Maintenance Total @ 3,226.30

(1302.52/40%)

HANDLING 113.66 ft³ @ 2.48 405.87

MILBAGE 37.52 ton/mi @ 2.75 103.17

TOTAL

SERVICE

DEPTH OF JOB 223'

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @

MILEAGE MILV 5 @ 7.70 38.50

MANIFOLD @

MILV 5 @ 4.40 22.00

TOTAL 2,081.79

PLUG & FLOAT EQUIPMENT

TOTAL

SALES TAX (If Any)

TOTAL CHARGES 5,338.09

DISCOUNT 2,135.23 (40%) IF PAID IN 30 DAYS

3,202.85 Net.

BID