



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1300169
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: _____

1300169

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> _____
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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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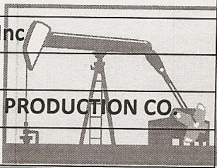
Billing Statement

Invoice #

Dale Jackson Production
Box 266, Mound City, Ks 66056
Cell # 620-363-2683

Date	Well#	Lease Name	Work Description	Price	Total
12/11/15	#1-2	Brownback	Surface Drilling & Cementing		
			Drilling 580' 5 5/8" Hole	\$7.00	\$4060.00
			Portable Pit		\$200.00
			Cementing & Longstring		\$600.00
			M.I.T. 300 PSI for 30 Minutes		4860.00
12/9/15	#2	Pumphouse	Drilling 796' 5 5/8" Hole	\$7.00	\$5572.00
			Portable Pit		\$200.00
			Cementing		\$600.00
					6372.00
Total Due					\$11,232.00
Well Plugging					
			TD 746' 8 sacks Cement		
			746-550 .5 sacks Sodium Bentonite Gel		
			550-500 8 sacks Cement		
			500-250 .5 sacks Sodium Bentonite Gel		
			250- Surface 34 Sacks Cement		
D & L Services Inc. 9567 W 1150 Rd Mound City, KS 66056 12/14/15					

Lease:	Brownback	
Owner:	D & L Services Inc	
OPR #:	34694	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	
Surface: 20' of 6"	Cemented: 5 Sacks	Hole Size: 8 3/4"
Longstring: 573' of 2 7/8" 8 round pipe	Cemented: 63 sacks	Hole Size: 5 5/8"



Dale Jackson Production Co.
Box 266, Mound City, Ks 66056
Cell # 620-363-2683
Office # 913-795-2991



Well #: I-2
Location: E2 SW SE NW S17-T21-R22E
County: Linn
FSL: 2970 S
FEL: 3310 E
API#: 15-107-25166-00-00
Started: 12/9/15
Completed: 12/11/15

SN:	Packer:	TD: 580'
Plugged:	Bottom Plug:	

Well Log

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
7	7	Clay	3	460	Black Shale
5	12	Shale	7	467	Shale
10	22	Lime	3	470	Shale (Limey)
9	31	Shale	2	472	Shale
39	70	Lime	8	480	Light Shale
4	74	Shale	1	481	Light Sandy Shale
5	79	Black Shale	5	486	Light Sandy Shale (Slight Oil show)
14	93	Lime	2	488	Light Sandy Shale (oder)
4	97	Shale	6	494	Light Sandy Shale (Slight Oil show)
3	100	Black Shale	2	496	Oil Sand (Shaley)(Poor Bleed)
3	103	Lime	1	497	Oil Sand (Very Shaley)(Poor Bleed)
4	107	Shale (Limey)	2	499	Oil Sand (Some Shale)(Poor Bleed)
4	111	Lime	3.5	502.5	Oil Sand (fair Bleed)
10	121	Light Shale (Limey)	3	505.5	Oil Sand (Shaley)(fair Bleed)
5	126	Light Shale	.5	506	Black Sand
15	141	Shale	2	508	Oil Sand(Good Bleed)(Slight Black Sand stks)
5	146	Sandy Shale	1	509	Shale (Oil Sand Stks)(Poor Bleed)
12	158	Sand (Dry)	1	510	Shale
9	167	Sand (Limey)	2	512	Lime
49	216	Sandy Shale	26	538	Shale Dark
33	249	Shale	10	548	Dark Shale (Limey)
1	250	Coal	2	550	Coal
7	257	Shale (Limey)	16	566	Shale
21	278	Shale	2	568	Lime
1	279	Coal	3	571	Black Shale
14	293	Shale	TD	580	Shale
16	309	Shale (Limey)			
6	315	Lime			
9	324	Shale (Limey)			
12	336	Sandy Shale			
22	258	Shale			
1	259	Coal			
5	364	Shale			
11	375	Lime			
15	390	Shale (Limey)			
4	394	Lime			
2	396	Black Shale			
26	422	Shale			
14	436	Lime			SET SURFACE -- 2:30 PM -- 12/9/15
8	444	Shale (Limey)			CALLED IN 11:00 AM -- TALKED TO Mishelle
5	449	Shale			LONGSTRING -- 573' of 2 7/8" 8' ROUND PIPE
3	452	Lime			SET TIME 1:30 PM -- 12/11/15
5	457	Shale (Limey)			CALLED IN 12:30 PM - TALKED TO ALAN

M.I.T. 300 P.S.I. held 30 minutes.