

Confidentiality Requested:

Yes  No

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION**

Form ACO-1

January 2018

**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

Gas  DH  EOR

OG  GSW

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 EOR  Conv. to SWD

Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: \_\_\_\_\_

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  Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

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](mailto: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 Geologist Report / Mud Logs <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				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
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)*

Date of first Production/Injection or Resumed Production/Injection:	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> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Lottie 12-2
Doc ID	1303732

All Electric Logs Run

ANNULAR HOLE VOLUME PLOT
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 5 INCH
BOREHOLE COMPENSATED SONIC ARRAY LOG
MICROLOG
QUAD COMBO LOG

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Lottie 12-2
Doc ID	1303732

Tops

Name	Top	Datum
2336	Hutchinson Salt	
2570	Chase	
2837	Council Grove	
3929	Heebner	
3943	Toronto	
4023	Lansing	
4200	Iola	
4436	Swope	
4596	Marmaton	
4693	Pawnee	
4719	Labette	
4745	Cherokee	
4935	Atoka	
5050	Morrow	
5386	St Genevieve	
5479	St Louis	



Field Ticket Number: LIK16010597

Field Ticket Date:

Tuesday, January 05, 2016

**Bill To:**  
MERIT ENERGY COMPANY  
Liberal, KS 67901  
P O Box 1293 / 1900 W 2nd St

**Job Name:** Top Off  
**Well Location:** Finney, KS  
**Well Name:** LOTTIE  
**Well Number:** 12-2  
**Well Type:** New Well  
**Rig Number:** DUKE #9  
**Shipping Point:** Liberal, KS  
**Sales Office:** Mid Con

*Handwritten:*  
Pipe = 8 5/8"  
Hole = 12 1/4"

PERSONEL		EQUIPMENT	
KIRBY HARPER	ALDO ESPINOSA	903	501
	JOSE CALDERON		
		993	1066

**SERVICES - SERVICES - SERVICES**

Description	QTY	UOM	Unit Amt	Gross Amt	Unit Net	Discount	Net Amount
PLAB	1.00	min. 4 hr	1,250.00	1250.00	437.50	65.0%	437.50
PHDL	200.00	per cu. Ft.	2.48	496.00	0.87	65.0%	173.60
DRYG	470.00	ton-mile	2.75	1292.50	0.96	65.0%	452.38
MILV	50.00	per mile	4.40	220.00	1.54	65.0%	77.00

**FLOAT EQUIPMENT -- FLOAT EQUIPMENT -- FLOAT EQUIPMENT**

**MATERIALS - MATERIALS - MATERIALS**

CCAC	200.00	sack	17.90	3,580.00	6.27	65.0%	1,253.00
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**ADDITIONAL ITEMS - ADDITIONAL ITEMS - ADDITIONAL ITEMS**

Additional hours, in excess of set hours	0.00	per hour	440.00	0.00	154.00	65.0%	0.00
Calcium Chloride	94.00	per pound	1.10	103.40	0.39	65.0%	36.19

*Handwritten:* Well AFE, LOTTIE 12-2, 45625, 83001075, Ulysses, 1-5-16

	Gross	Discount	Final
Services Total	3,258.50	2,118.03	1,140.48
Equipment Total	0.00	0.00	0.00
Materials Total	3,580.00	2,327.00	1,253.00
Additional Items	103.40	67.21	36.19
<b>Final Total</b>	<b>6,941.90</b>	<b>4,512.24</b>	<b>2,429.67</b>

Allied Rep  
Customer Agent: \_\_\_\_\_

*Handwritten:* 1-5-16

This output does NOT include taxes. Applicable sales tax will be billed on the final invoice.  
Customer hereby acknowledges receipt of the materials and services described above and on the attached documents.  
I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the following page.

X \_\_\_\_\_  
Customer Signature

Field Ticket Total (USD): **\$2,429.67**

**GENERAL TERMS AND CONDITIONS**

**DEFINITIONS:** In these terms and conditions, "ALLIED" shall mean Allied Oil & Gas Services, LLC, and "CUSTOMER" shall refer to the party identified by that term on the front of this contract. As applicable, "JOB" relates to the services described on the front side of this contract, "MERCHANDISE" refers to the material described on the front of this contract and to any other materials, products, or supplies used, sold, or furnished under the requirements of this contract.

**-TERMS:** Unless satisfactory credit has been established, CUSTOMER must tender full cash payment to ALLIED before the job is undertaken or merchandise is delivered. If satisfactory credit has been established, the terms of payment for the job and/or merchandise, including bulk cement, are net cash, payable in 30 days from the completion of the job and/or delivery of the merchandise. For all past due invoices, CUSTOMER agrees to pay interest on amounts invoiced at a rate of 18 percent per annum until paid. Notwithstanding the foregoing, in no event shall this Contract provide for interest exceeding the maximum rate of interest that CUSTOMER may agree to pay under applicable law. If any such interest should be provided for, it shall be and hereby is deemed to be a mistake, and this contract shall be automatically reformed to lower the rate of interest to the maximum legal contract rate. Any amounts previously paid as excess interest shall be deducted from the amounts owing from the CUSTOMER or at the option of ALLIED, refunded directly to CUSTOMER. For purposes of this paragraph, ALLIED and CUSTOMER agree that Kansas law shall apply. Any discounts granted with this contract are null and void if the charges are not paid when due.

**-ATTORNEY FEES:** In any legal action or proceeding between the parties to enforce any of the terms of this Service Contract, or in any way pertaining to the terms of this Contract, the prevailing party shall be entitled to recover all expenses, including, but not limited to, a reasonable sum as and for attorney's fees.

**-PRICES AND TAXES:** All merchandise listed in ALLIED'S current price schedule are F.O.B. ALLIED'S local station and are subject to change without notice. All prices are exclusive of any federal, state, local, or special taxes for the sale or use of the merchandise or services listed. The amount of taxes required to be paid by ALLIED shall be added to the quoted prices charged to CUSTOMER.

**-TOWING CHARGES:** ALLIED will make a reasonable attempt to get to and from each job site using its own equipment. Should ALLIED be unable to do so because of poor or inadequate road conditions, and should it become necessary to employ tractor or other pulling equipment to get to or from the job site, the tractor or pulling equipment will be supplied by CUSTOMER or, if furnished by ALLIED, will be charged to and paid by the CUSTOMER.



Field Ticket Number: **LIB1601100940** Field Ticket Date: **Sunday, January 10, 2016**

**Bill To:**  
MERIT ENERGY COMPANY  
Liberal, KS 67901  
P O Box 1293 / 1900 W 2nd St

**Job Name:** 02 Production/Long String  
**Well Location:** GRANT, KS  
**Well Name:** LOTTIE 12-2  
**Well Number:**  
**Well Type:** New Well  
**Rig Number:** DUKE #9  
**Shipping Point:** Liberal, KS  
**Sales Office:** Mid Con

**TPD 5260'**  
**TPR 5260'**  
**SS @ 42**  
**Pipe = 5 1/2"**  
**Hole = 7 7/8"**

PERSONEL		EQUIPMENT	
RAMON ESCARCEGA	Aldo Espinoza	984	
ALEX AYALA		903-501	
		868-642	

**SERVICES - SERVICES - SERVICES**

Description	QTY	UOM	Unit Amt	Gross Amt	Unit Net	Discount	Net Amount
PUMP, CASING CEMENT 5001-6000 FT	1.00	min. 4 hr	3,099.25	3099.25	1,022.75	67.0%	1,022.75
CMLP	1.00	per day	275.00	275.00	90.75	67.0%	90.75
PHDL	377.00	per cu. Ft.	2.48	934.96	0.82	67.0%	308.54
DRYG	789.00	ton-mile	2.75	2169.75	0.91	67.0%	716.02
MILV	50.00	per mile	4.40	220.00	1.45	67.0%	72.60
MIHV	50.00	per mile	7.70	385.00	2.54	67.0%	127.05

**FLOAT EQUIPMENT -- FLOAT EQUIPMENT -- FLOAT EQUIPMENT**

GS-5.5	1.00	each	281.00	281.00	126.45	55.0%	126.45
SSFC-5.5	1.00	each	725.00	725.00	326.25	55.0%	326.25
CEN-5.5	25.00	each	57.00	1,425.00	25.65	55.0%	641.25
TRP - 5.5	1.00	each	85.00	85.00	38.25	55.0%	38.25

**MATERIALS - MATERIALS - MATERIALS**

CW-HVS	12.00	bbl	58.70	704.40	19.37	67.0%	232.45
CB-APA-40604	50.00	sack	18.92	946.00	6.24	67.0%	312.18
CB-ASA	235.00	sack	23.50	5,522.50	7.76	67.0%	1,822.43
CFL-210	111.00	pound	18.90	2,097.90	6.24	67.0%	692.31
CLC-KOL	1175.00	pound	0.98	1,151.50	0.32	67.0%	380.00
CLC-CPF	59.00	pound	2.97	175.23	0.98	67.0%	57.83

**ADDITIONAL ITEMS - ADDITIONAL ITEMS - ADDITIONAL ITEMS**

Additional hours, in excess of set hours	2.00	per hour	440.00	880.00	145.20	67.0%	290.40
Derrick Charge	1.00	per event	577.50	577.50	190.58	67.0%	190.58

Well **Lottie 12-2**  
AFE **45625**  
GL **83001075**  
**Misses**  
**1/10-16**

	Gross	Discount	Final
Services Total	7,083.96	4,746.25	2,337.71
Equipment Total	2,516.00	1,383.80	1,132.20
Materials Total	10,597.53	7,100.35	3,497.18
Additional Items	1,457.50	976.53	480.98
<b>Final Total</b>	<b>21,654.99</b>	<b>14,206.92</b>	<b>7,448.07</b>

Allied Rep  
Customer Agent:

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I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the following page.

X   
Customer Signature

Field Ticket Total (USD):

**\$7,448.07**



Field Ticket Number: **LIK16010586**

Field Ticket Date:

Monday, January 04, 2016

**Bill To:**  
MERIT ENERGY COMPANY  
Liberal, KS 67901  
P O Box 1293 / 1900 W 2nd St

**Job Name:** 01 Surface  
**Well Location:** Finney, KS  
**Well Name:** LOTTIE  
**Well Number:** 12-2  
**Well Type:** New Well  
**Rig Number:** DUKE #9  
**Shipping Point:** Liberal, KS  
**Sales Office:** Mid Con

*Handwritten:* TDE 1585'  
TPE 1585'  
SJE 42'  
Pipe 8 5/8"  
Hole = 12 1/4"

PERSONEL		EQUIPMENT	
KIRBY HARPER	ALDO ESPINOSA	903	501
ALEX AYALA	JOSE CALDERON	562	467
		993	1066

**SERVICES - SERVICES - SERVICES**

Description	QTY	UOM	Unit Amt	Gross Amt	Unit Net	Discount	Net Amount
PUMP, CASING CEMENT 1001-2000 FT	1.00	min. 4 hr	2,213.75	2213.75	774.81	65.0%	774.81
CMLP	1.00	per day	275.00	275.00	96.25	65.0%	96.25
PHDL	642.00	per cu. Ft.	2.48	1592.16	0.87	65.0%	557.26
DRYG	1416.00	ton-mile	2.75	3894.00	0.96	65.0%	1,362.90
MILV	50.00	per mile	4.40	220.00	1.54	65.0%	77.00
MIHV	50.00	per mile	7.70	385.00	2.70	65.0%	134.75

**FLOAT EQUIPMENT -- FLOAT EQUIPMENT -- FLOAT EQUIPMENT**

GS-8.625	1.00	each	460.00	460.00	207.00	55.0%	207.00
SSFC-8.625	1.00	each	1,214.00	1,214.00	546.30	55.0%	546.30
CEN-8.625	15.00	each	75.00	1,125.00	33.75	55.0%	506.25
TRP - 8.625	1.00	each	131.00	131.00	58.95	55.0%	58.95
SSFC-8.625	1.00	each	725.00	725.00	326.25	55.0%	326.25
GS-8.625	1.00	each	281.00	281.00	126.45	55.0%	126.45

**MATERIALS - MATERIALS - MATERIALS**

CB-AMDAL	300.00	sack	26.57	7,971.00	9.30	65.0%	2,789.85
CA-100	846.00	pound	1.10	930.60	0.39	65.0%	325.71
CLC-CPF	75.00	pound	2.97	222.75	1.04	65.0%	77.96
CCAC	255.00	sack	17.90	4,564.50	6.27	65.0%	1,597.58
CA-100	480.00	pound	1.10	528.00	0.39	65.0%	184.80
CLC-CPF	64.00	pound	2.97	190.08	1.04	65.0%	66.53

**ADDITIONAL ITEMS - ADDITIONAL ITEMS - ADDITIONAL ITEMS**

Additional hours, in excess of set hours		per hour	440.00	0.00	154.00	65.0%	0.00
Derrick Charge		per event	577.50	0.00	202.13	65.0%	0.00

	Gross	Discount	Final
Services Total	8,579.91	5,576.94	3,002.97
Equipment Total	3,936.00	2,164.80	1,771.20
Materials Total	14,406.93	9,364.50	5,042.43
Additional Items	0.00	0.00	0.00
<b>Final Total</b>	<b>26,922.84</b>	<b>17,106.25</b>	<b>9,816.59</b>

Allied Rep  
Customer Agent

*Handwritten:* Lot # 12-2  
45625  
83001075

*Red Stamp:* OFFICE

This output does NOT include taxes. Applicable sales tax will be billed on the final invoice.  
Customer hereby acknowledges receipt of the materials and services described above and on the attached documents.  
I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the following page.

X

Office  
Date

Field Ticket Total (USD):

**\$9,816.59**