



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1313565
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: _____

1313565

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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ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. #20-5975804

067775

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

SERVICE POINT: Wadley

DATE <u>7/19/15</u>	SEC. <u>3</u>	TWP. <u>14</u>	RANGE <u>39</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00am</u>	JOB FINISH <u>2:30pm</u>
LEASE <u>7001066</u>	WELL # <u>3-1</u>	LOCATION <u>Wallace 2W 2 1/4 S 1W</u>			COUNTY <u>Wallace</u>	STATE <u>TX</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Munoz 21

TYPE OF JOB Sealant

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 1/2 DEPTH 226

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 44 bbl 1/20

OWNER Some

CEMENT AMOUNT ORDERED 125 can

EQUIPMENT

PUMP TRUCK CEMENTER Alan Ryan

495-181 HELPER Kevin Ryan

BULK TRUCK

801 DRIVER Wayne Magrath

BULK TRUCK

DRIVER

COMMON 125 can @ 17.20 3122.50

POZMIX @

GEL @

CHLORIDE 494 @ 1.00 543.40

ASC @

TOTAL 3,675.90

DISCOUNT 50% 1837.95

REMARKS:

Andy, Conclude, replacement displacement

Shot in

Conclude and Conclude 7 bbl to

P.T.

Task for

don't mix, mix

SERVICE

HANDLING 185 CF @ 2.48 458.80

MILEAGE 2 1/2 mile 339 700 932.25

DEPTH OF JOB

PUMP TRUCK CHARGE 1512.25

EXTRA FOOTAGE @

HV MILEAGE 40 @ 7.20 308.00

LV MILEAGE 40 @ 4.40 176.00

CHARGE TO: Exchange Avenue Productions Co

STREET

CITY STATE ZIP

TOTAL 3,387.80

DISCOUNT 50% 1693.65

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.

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

DISCOUNT %

PRINTED NAME

SIGNATURE [Signature]

SALES TAX (if Any)

TOTAL CHARGES 7,063.20

DISCOUNT, 3,531.60 (50%) IF PAID IN 30 DAYS

NET TOTAL 3,531.60 IF PAID IN 30 DAYS

Bid

ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. #20-5975804

067637

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

SERVICE POINT:

Oakley
Bottom Top Bottom TOP

DATE <u>2-19-15</u>	SEC. <u>3</u>	TWP. <u>14S</u>	RANGE <u>39W</u>	CALLED OUT	ON LOCATION <u>11:30 P.M.</u>	JOB START <u>4:20 8:00</u>	JOB FINISH <u>4:30 9:00</u>
LEASE <u>Quinn-Jon LLC</u>	WELL # <u>3-1</u>	LOCATION <u>Wallace 2W 25 1W</u>	COUNTY <u>Wallace</u>		STATE <u>KS</u>		
OLD OR (NEW) (Circle one)				<u>1/25 E INTO</u>			

CONTRACTOR Murkin 21

TYPE OF JOB Production (2 stage)

HOLE SIZE 2 7/8" T.D. 5232'

CASING SIZE 5 1/2 (15.5") DEPTH 5242.22

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL DV TOOL DEPTH 2922'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 41.34

CEMENT LEFT IN CSG. 41.34

PERFS. _____

DISPLACEMENT Bottom 125.73 49.54 TOP 49.54

EQUIPMENT

OWNER Same

CEMENT Bottom stage -

AMOUNT ORDERED 100 stks ASC 10' 1.58 1/4 2 1/2 gal, 5 gal Gilsonite, 1000 lbs 1/4" FL-160, 14" Deformer 156 stks Lite 65/35 1/4" 6 1/2 gal 1/4" Flo-seal

Top stage - 600 stks Lite 65/35 6 1/2 gal, 1/4" 1/4" Flo-seal

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
ASC 100 stks	@	23.50 2350.00
Gilsonite 500#	@	.98 490.00
FL-160 47#	@	18.90 888.30
Deformer 14#	@	3.50 49.00
Lite 250 stks	@	19.88 4970.00
Flo-seal 187#	@	2.97 555.39

PUMP TRUCK # 431 CEMENTER Andrew Forstlund

BULK TRUCK # 890/241 DRIVER Wayne McElhughy

BULK TRUCK # 891/287 DRIVER Allen Ryan

HELPER Paul Deaver

TOTAL 19,193.69

DISCOUNT 50% 9,596.85

REMARKS:

Mix 150 stks Lite followed by 100 stks ASC down 5/2 casing. Wash pump and line clean. Displace plug with water and mix 1000# LIFT 1500# Land plug. Float held. Open DV 900# plug more hole plug rat hole. mix 500 stks Lite down 5/2 casing. Wash pump and line clean. ~~plug~~ release plug and displace. 1000# LIFT land plug 2500# Tool closed cement Circulate. Thank you

SERVICE

HANDLING 955.44 cu/ft @ 2.48	2369.49
MILEAGE 2.25 ton/mile 40.25 ton	4427.50
DEPTH OF JOB <u>5242.22</u>	
PUMP TRUCK CHARGE <u>Bottom 3099.25 TOP 2406.25</u>	
EXTRA FOOTAGE	@ _____
HV MILEAGE 40 miles @ 2.70	308.00
LV MILEAGE 40 miles @ 4.40	176.00
Head + manifold	@ 225.00

CHARGE TO: Exchange Avenue Production

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 13,061.49

DISCOUNT 50% 6,530.74

PLUG & FLOAT EQUIPMENT

<u>5/2</u>		
1 AFU float shoe	@	545.00
1 latch down plug Assy	@	660.00
1 DV TOOL	@	5335.00
2 Baskets	@	395.00 790.00
10 Turbolizers	@	95.00 950.00
TOTAL		8,270.00
DISCOUNT 50%		4140.00

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PRINTED NAME Joe Dordeman

SIGNATURE _____

SALES TAX (If Any) _____

TOTAL CHARGES 40,535.18

DISCOUNT 20,267.59 (50%) IF PAID IN 30 DAYS

NET TOTAL 20,267.59 IF PAID IN 30 DAYS

Bid