



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1316049
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: _____

1316049

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 Yes No
(Attach Additional Sheets)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No

Log Formation (Top), Depth and Datum Sample
Name Top Datum

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 (Amount and Kind of Material Used)	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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Commingled (Submit ACO-4)



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

6084
5990

807941

TICKET NUMBER 50056
LOCATION Chanute, KS
FOREMAN Cory Kennedy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/28/16	10370	Knabe C # 5-A	NW 32	14	22	JO
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Petroleum Technologies Inc.			729	Casey	✓	Safety Meetings
MAILING ADDRESS			407	KeiCar	✓	
801 West 47th St. Ste 412			516	ArtMed	✓	
CITY	STATE	ZIP CODE	675	KeiDet	✓	
Kansas City	MO	64112				

JOB TYPE bugstring HOLE SIZE 5 5/8" HOLE DEPTH 973' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 953' DRILL PIPE _____ TUBING baffle - 945' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 8'
 DISPLACEMENT 5.47 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: held safety meeting, established circulation, mixed & pumped 200 # gel followed by 5 bbls fresh water, mixed & pumped 117 sls Pezblend IA cement w/ 2% gel + 1/4 # Floreal per sk, cement 1/6 surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 5.47 bbls fresh water, pressured to 800 PSI, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450 ✓	1	✓ PUMP CHARGE	1500.00	
CE0002 ✓	30 mi	✓ MILEAGE	214.50	
CE0711 ✓	Min	✓ Non mileage	600.00	
WE0853 ✓	2 hrs	✓ 80 Vac	200.00	
		trucks	2574.50	
		- 60%	1544.70	
		subtotal		1029.80
CC5840 ✓	117 sks	✓ Pezblend IA cement	1579.50	
CC5965 ✓	397 #	✓ Gel	119.10	
CC10075 ✓	29 #	✓ Floreal	58.00	
CP8176 ✓	1	✓ 2 1/2" rubber plug	45.00	
		materials	1801.60	
		- 60%	1080.96	
		Subtotal		720.64
		7.725%	SALES TAX	55.67
			ESTIMATED TOTAL	1806.11

AUTHORIZATION _____ TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



11 Lewis Drive

Paola, KS 66071

Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Petroleum Technologies, Inc.

Knabe C #5A

API #15-091-24,423

June 24 - June 28, 2016

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
32	sandstone	37
28	shale	65
22	lime	87
10	shale	97
8	lime	105
8	shale	113
21	lime	134
23	shale	157
29	lime	186
2	shale	188
17	lime	205
12	shale	217
26	lime	243
14	shale	257
9	lime	266
31	shale	297
3	lime	300
2	shale	302
4	lime	306
44	shale	350
26	lime	376
6	shale	382
23	lime	405
4	shale	409
20	lime	429 base of the Kansas City
28	shale	457
6	sand	463
137	shale	600
3	lime	603
9	shale	612
4	lime	616
17	shale	633
5	lime	638
13	shale	651
4	lime	655
56	shale	711
3	lime	714
41	shale	755

1	coal	756
24	shale	780
4	lime	784
89	shale	873
3	limey sand	876
10	limey sand	886
87	shale	973 TD

Drilled a 9 7/8" hole to 21.6'

Drilled a 5 5/8" hole to 973'

Set 21.6' of 7" casing cemented with 6 sacks cement.

Set 953' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 float shoe, 1 clamp, and 1 baffel.