



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1316484
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: _____

1316484

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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**CEMENT BOND LOG
WITH GAMMA RAY**

Company **ABERCROMBIE ENERGY LLC**

Well **SHOWALTER #4 SWD**

Field

County **SCOTT** State **KANSAS**

Location: **100' E OF C-SW-11W** API #: 15-171-20548-00-00 Other Services

SEC 12 TWP 18S RGE 32W
PERF

Permanent Datum **GROUND LEVEL** Elevation
Log Measured From **KELLY BUSHING 5** Above GL
Drilling Measured From **KELLY BUSHING**

Elevation
K.B. 297'1"
D.F. N/A
G.L. 2966'

Date of Service **8/15/2016**

Run Number **ONE**

Depth Driller or PBTID **2350'**

Depth Logger **2328'**

Bottom Log Interval **2326'**

Top Log Interval **250'**

Open Hole Size **7.875"**

Type Fluid **WATER**

Fluid Level **290'**

Fluid Density **N/A**

Max. Recorded Temperature **100**

Max. Wellhead Pressure **00 PSI**

Wellhead Connection **N/A**

Estimated Cement Top **GROUND LEVEL**

Unit Number **18**

Wireline Size **5/16**

Location **COLBY**

Recorded By **T. MARTIN**

Witnessed By **TIM JULLIAN**

Size	Wt/Ft	Top	Bottom
Tubing Record			
Surface Casing	8.625"	23#	00'
Production Casing	4.5"	9.5#	00'
Liner Record			

<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and Pioneer Wireline Services, LLC cannot and does not guarantee the accuracy or correctness of any interpretation, and Pioneer Wireline Services, LLC will not be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees.

Comments

N/A DENOTES NOT AVAILABLE OR NON-APPLICABLE.
SCOTT CITY, 6 E,
1 1/2 N, W INTO

THANK YOU FOR USING PIONEER ENERGY SERVICES!

Your Pioneer Energy Services Crew

Tool Data - Services

Serial Number

Engineer: T. MARTIN
Operator:
Operator:
Operator:

Top - Bottom

PPT usec 0	CASEWGHT lb/ft 9.5	MAXAMPL mV 0	MINAMPL mV 1	MINATTN db/ft 0.8	SRFTEMP degF 70	CASETHCK in 0
CASEOD in 4.5	PERFS 0	TDEPTH ft 2328	BOTTEMP degF 100	BOREID in 7.875		

Sensor	Offset (ft)	Schematic	Description	Length (ft)	O.D. (in)	Weight (lb)
			CENT-Probe Probe Centralizer	2.83	2.75	20.00
WVFS8	11.63		RBT-Probe (4.5040904) Probe Radii Bond Tool with Digital Telemetry	8.75	2.75	107.00
WVFS7	11.63					
WVFS6	11.63					
WVFS5	11.63					
WVFS4	11.63					
WVFS3	11.63					
WVFS2	11.63					
WVFS1	11.63					
WVFCAL	11.63					
WVF3FT	11.63					
WVF5FT	10.63					
			CENT-Probe Probe Centralizer	2.83	2.75	20.00
CCL	3.63					

GR	2.30	GR_CCL-Tiger (TigerProbe)	4.54	2.75	50.00
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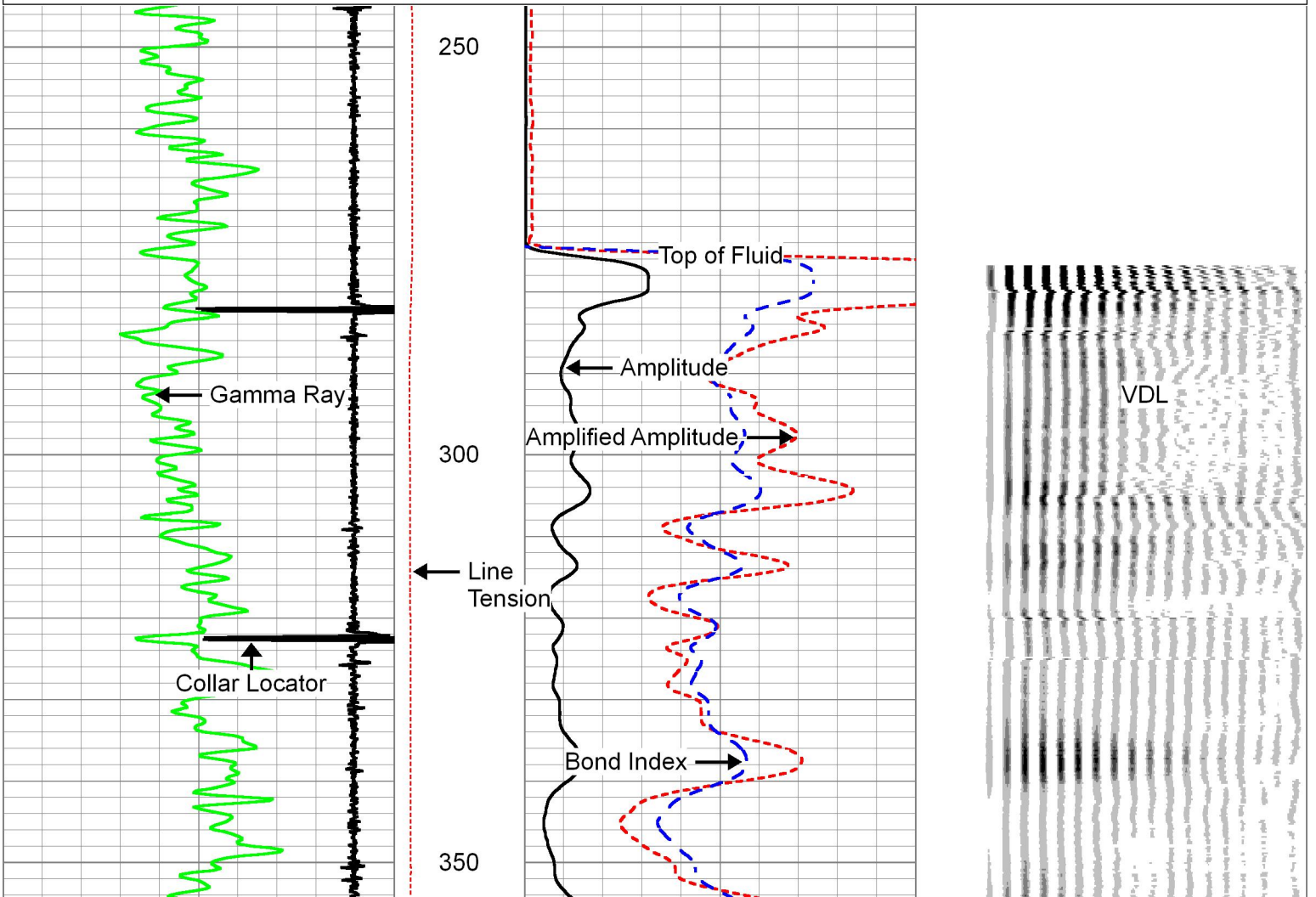
Dataset: showalter#4-12.db: field/well/SCBL/pass3.1
 Total length: 18.96 ft
 Total weight: 197.00 lb
 O.D.: 2.75 in

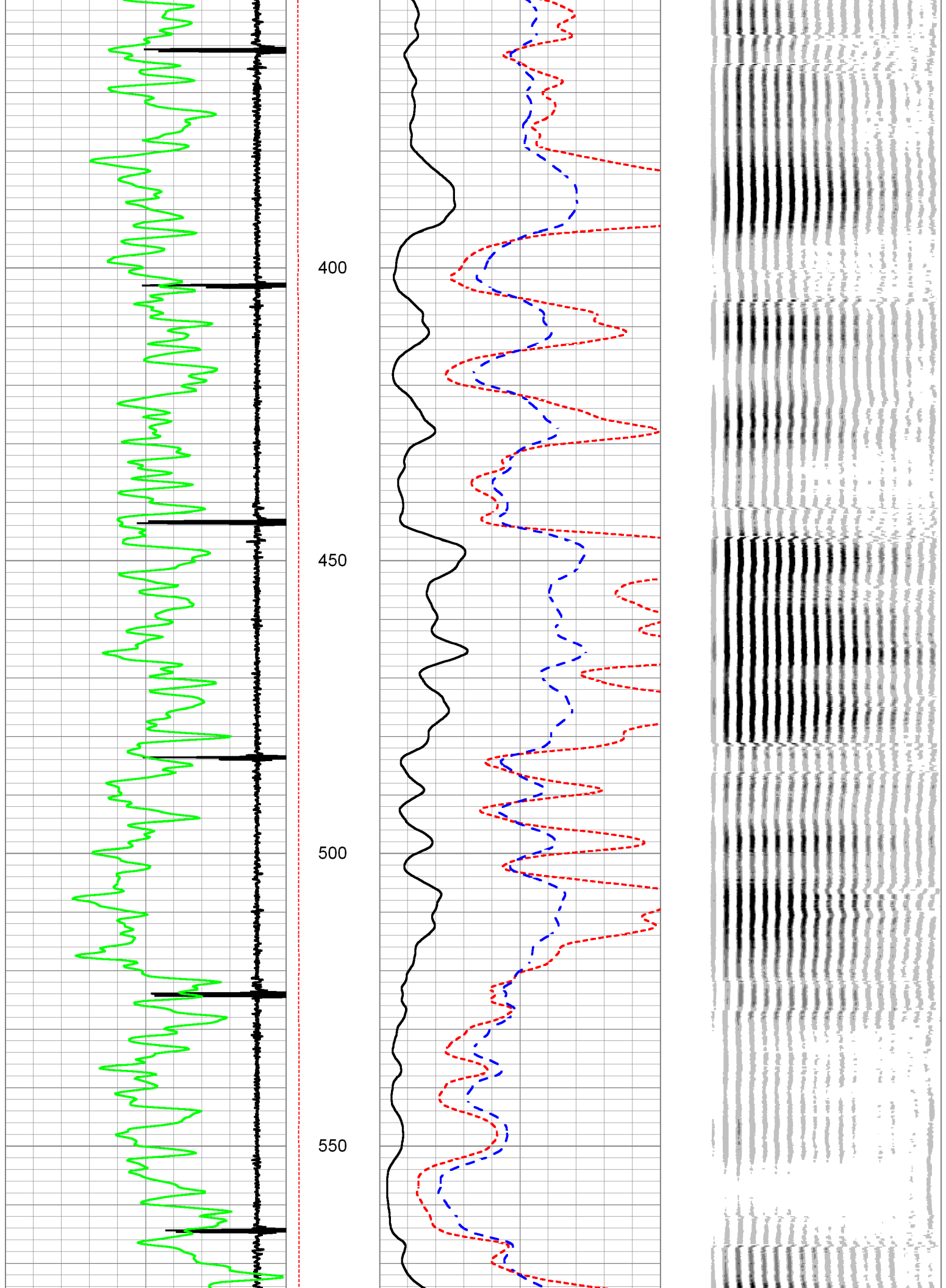


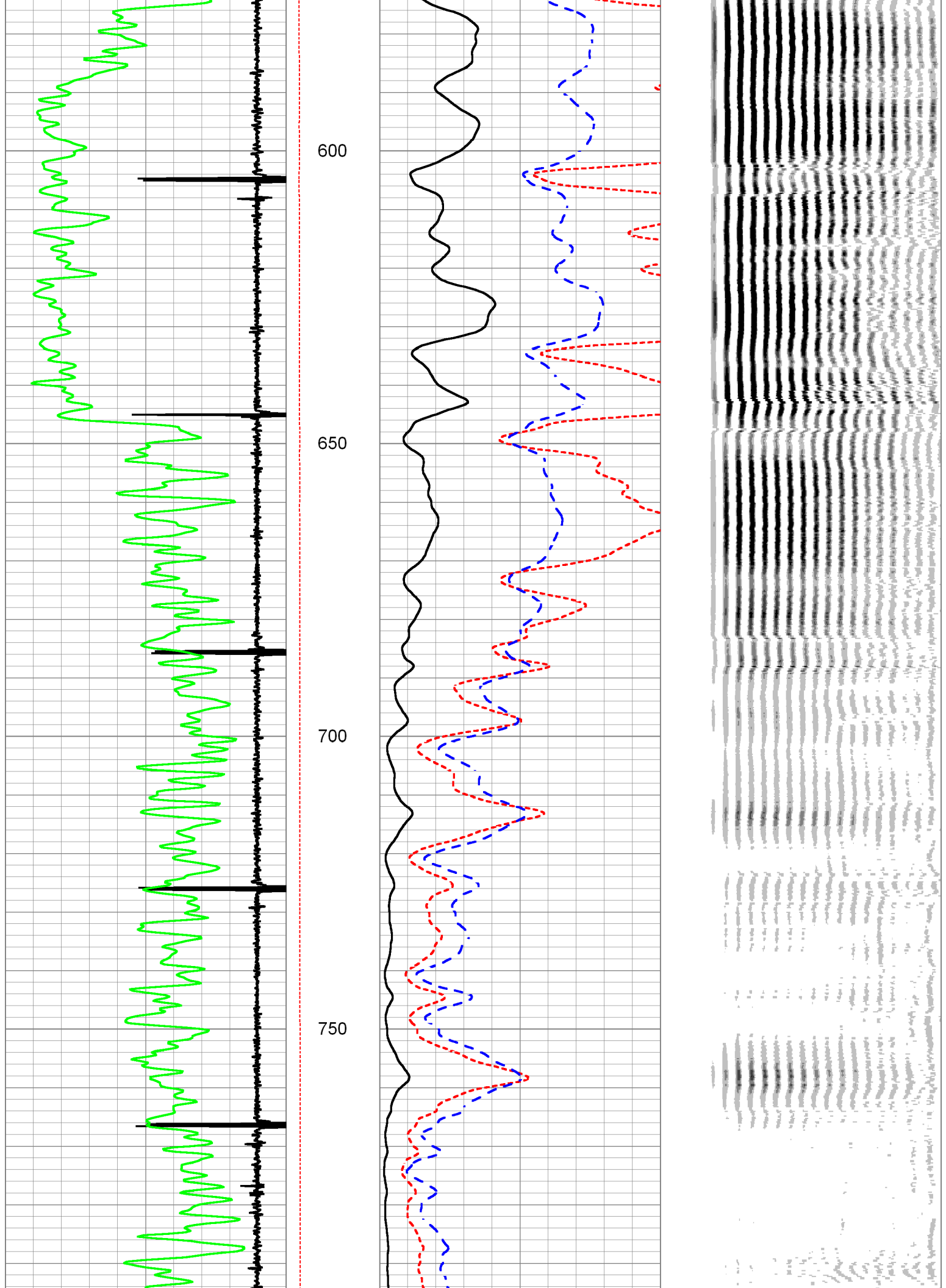
MAIN PASS

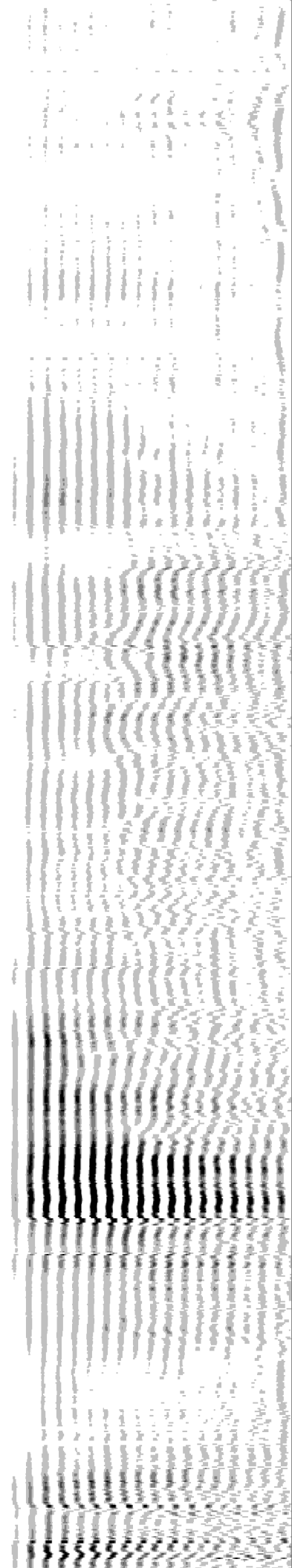
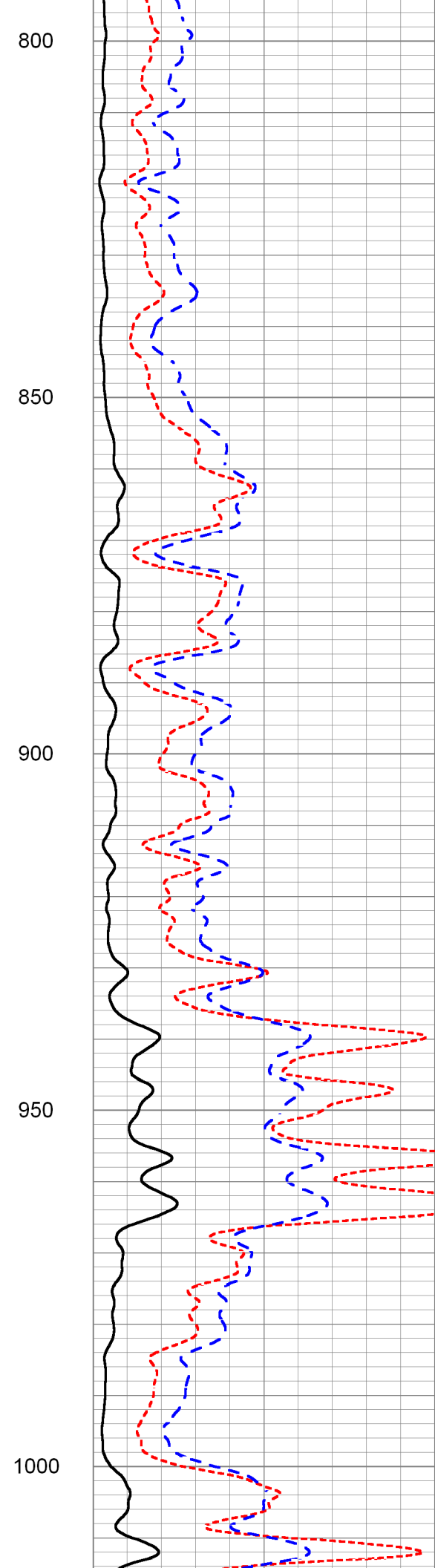
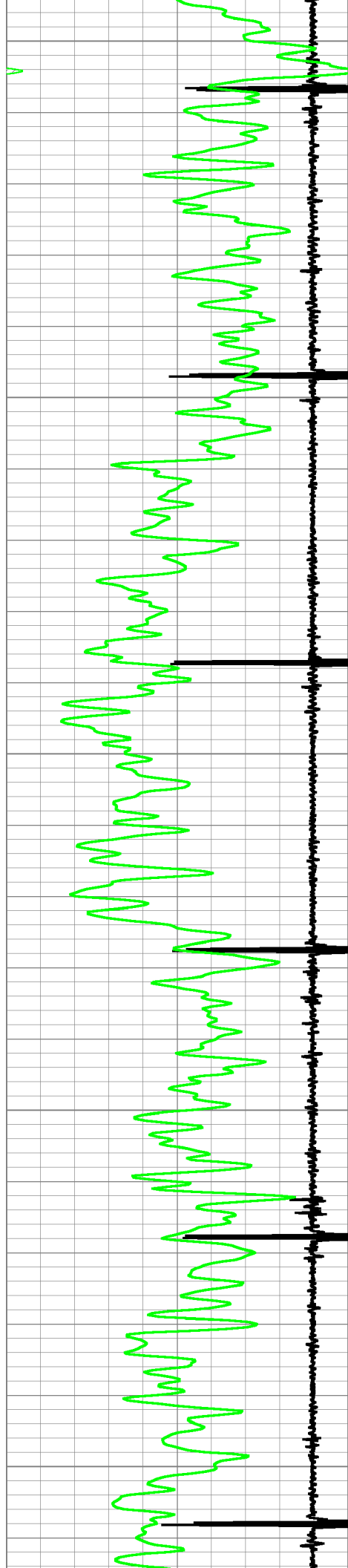
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 Presentation Format: PINR_C~1
 Dataset Creation: Mon Aug 15 09:03:17 2016
 Charted by: Depth in Feet scaled 1:240

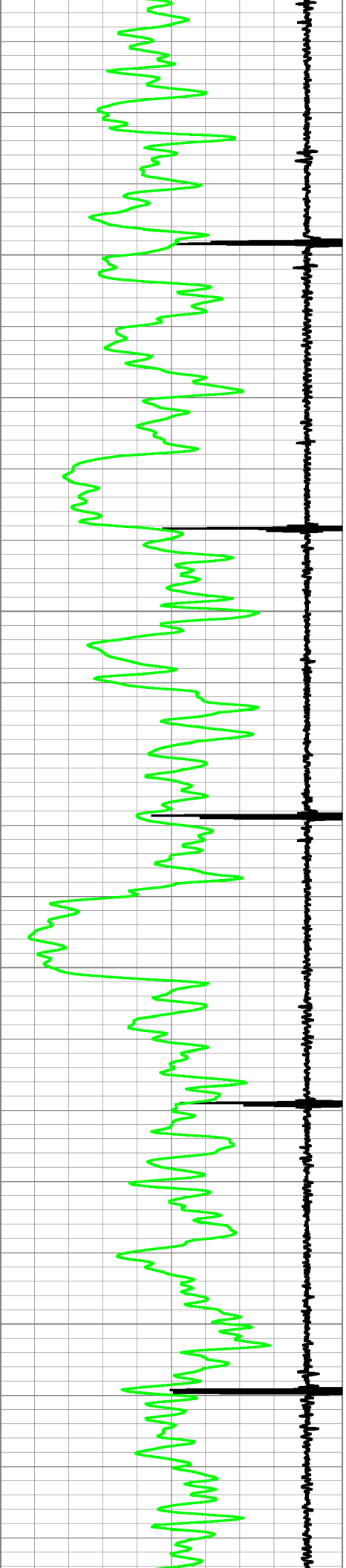
-9	Collar Locator	1	Line Tension	0	Amplified Amplitude (mV)	20	200	VDL	1200
0	Gamma Ray	150	0 (lb2000)	0	Amplitude (mV)	100			
				1	Bond Index	0			









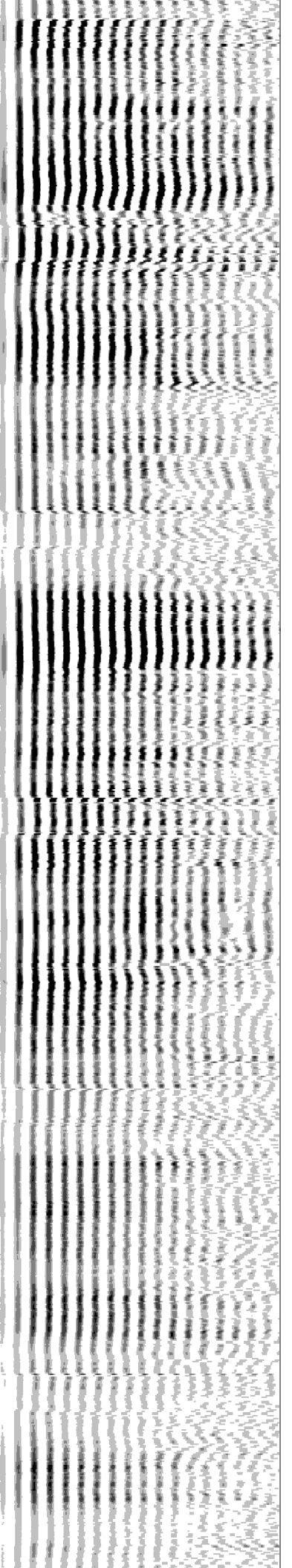
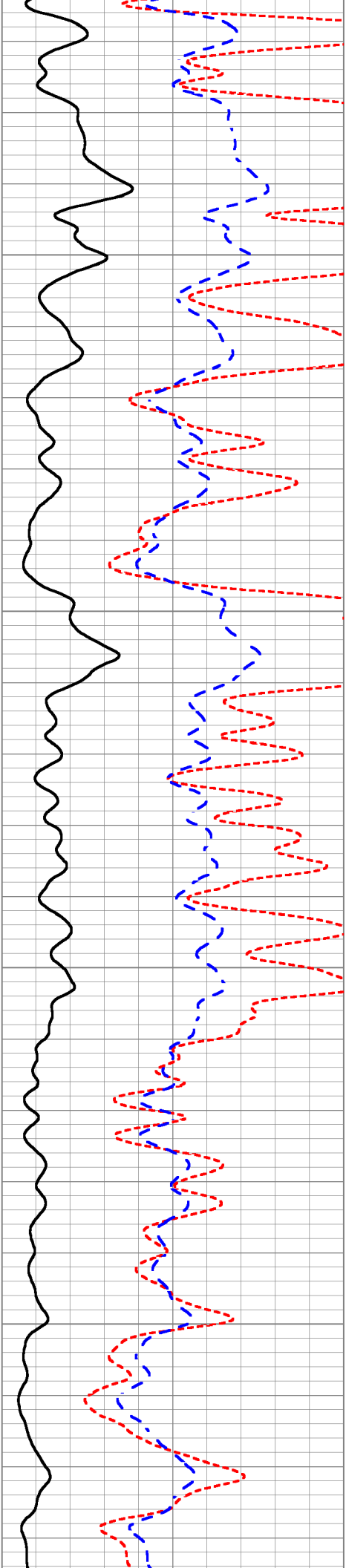


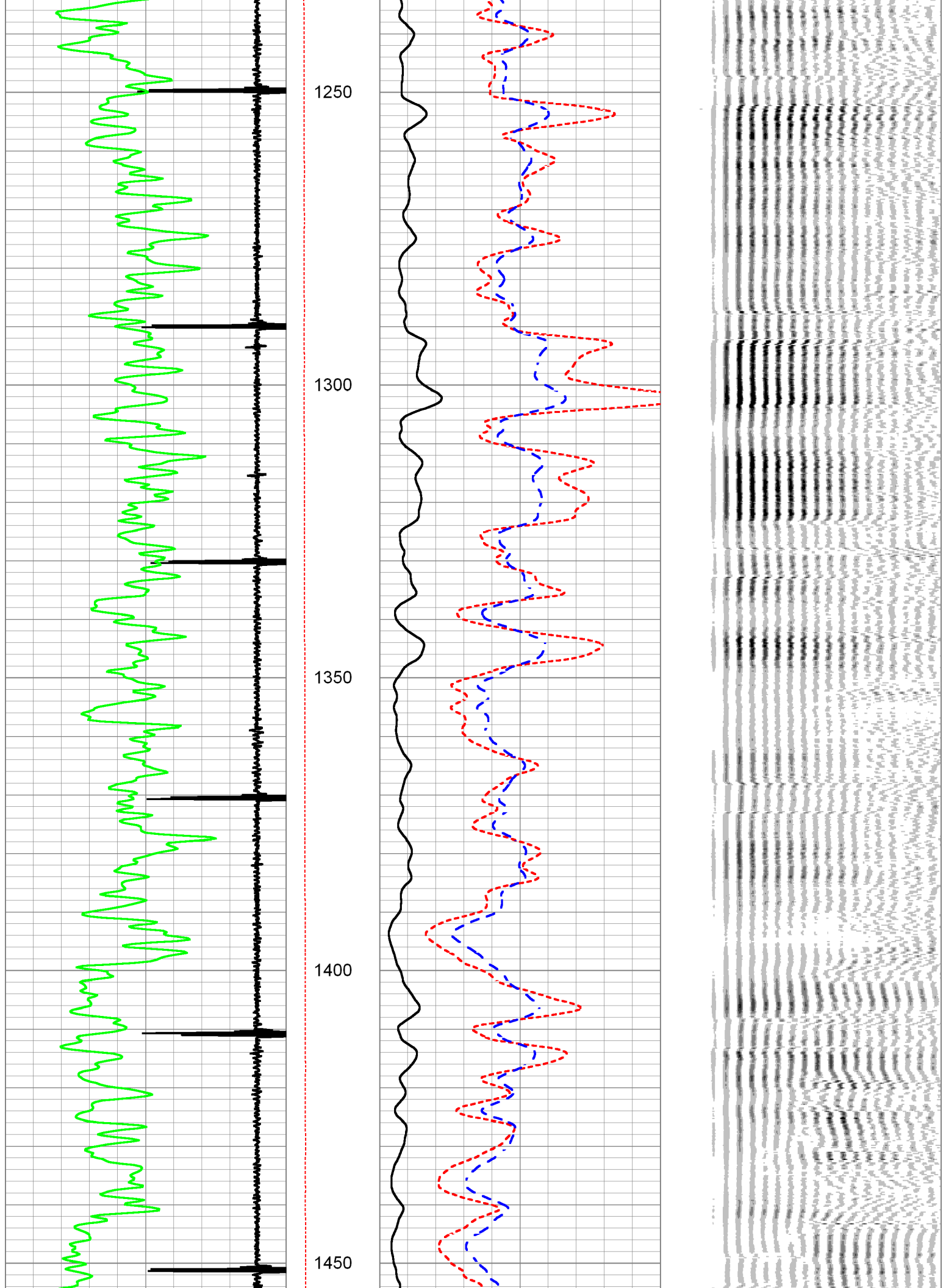
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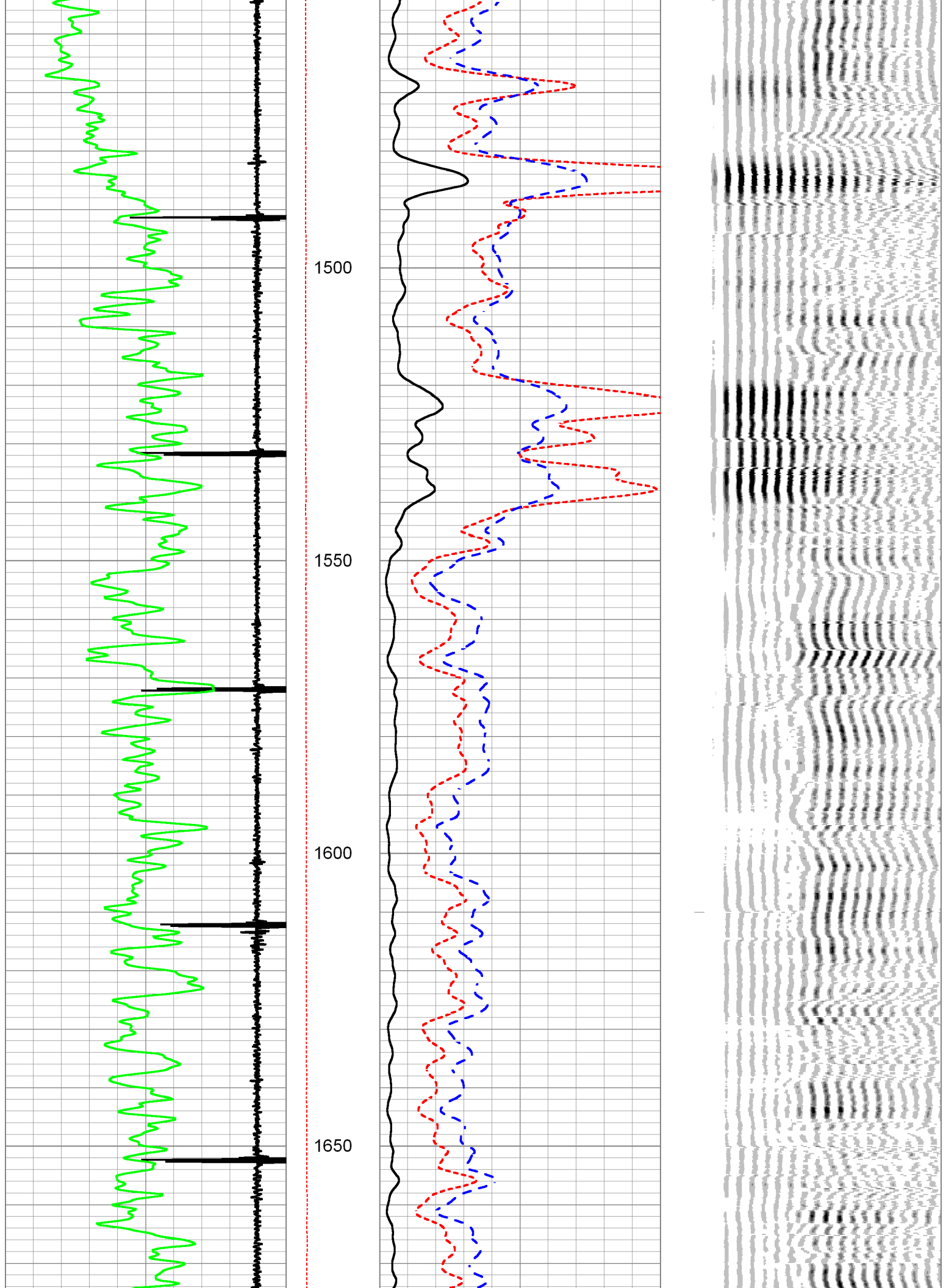
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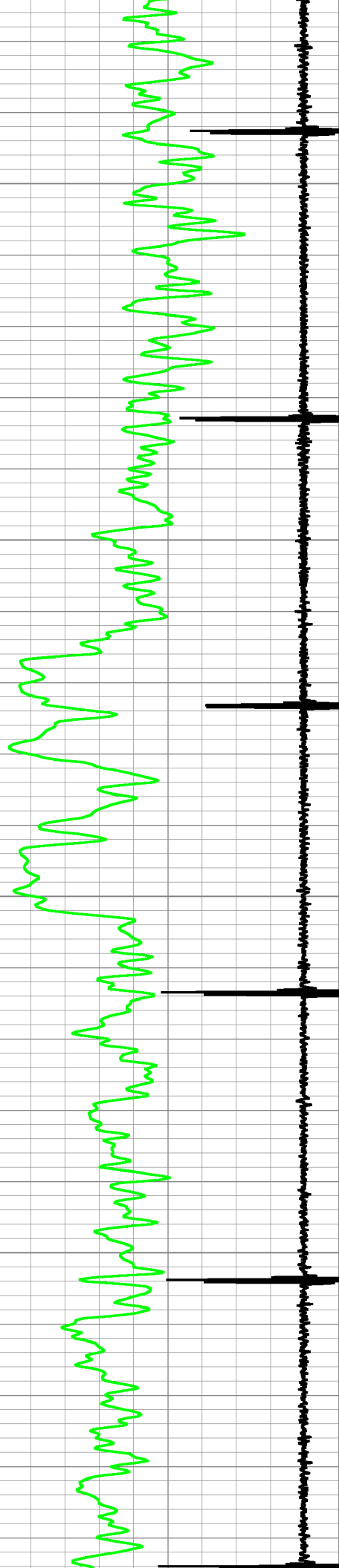
1150

1200







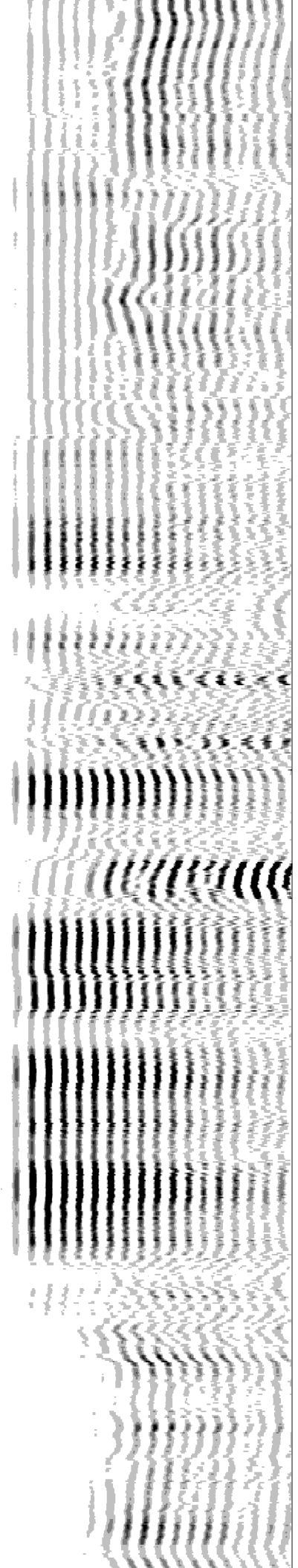
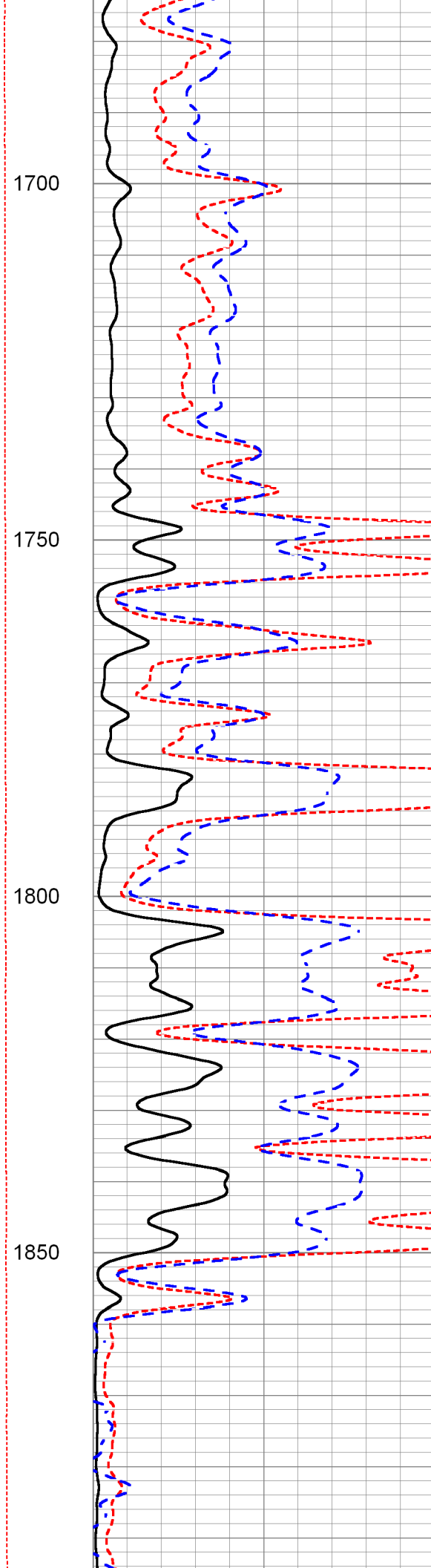


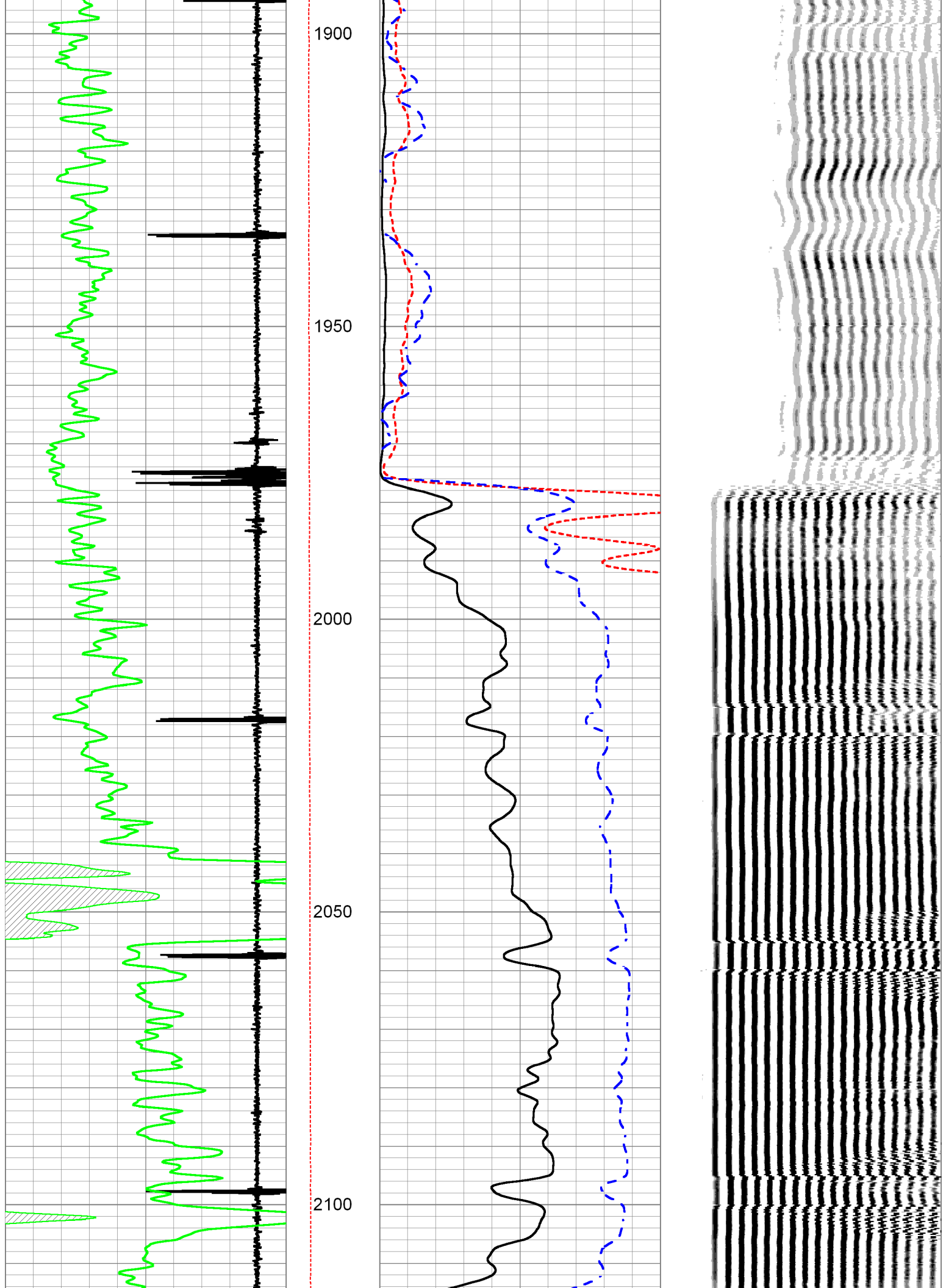
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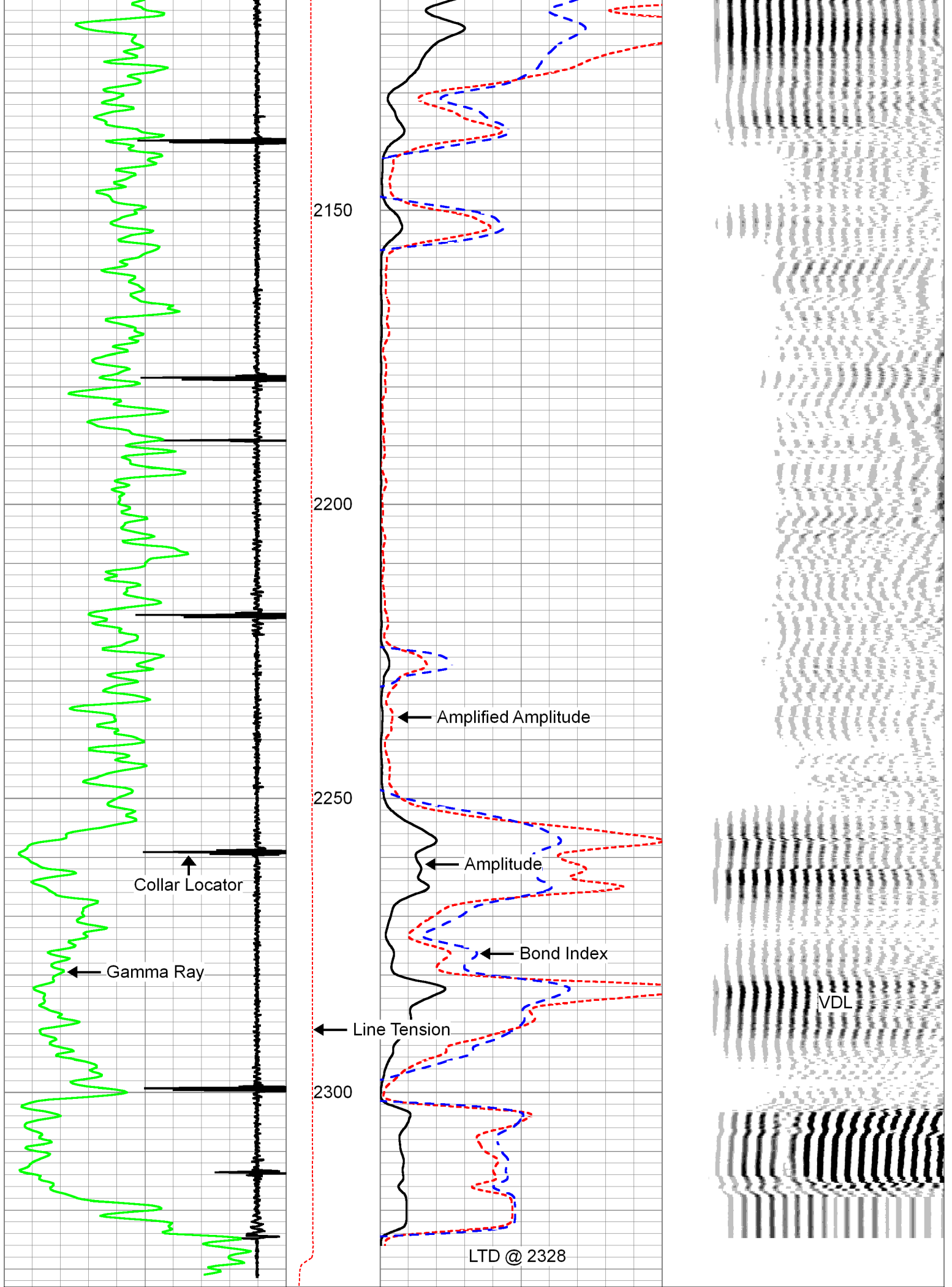
1750

1800


1850







-9	Collar Locator	1	Line	0	Amplified Amplitude (mV)	20	200	VDL	1200
0	Gamma Ray	150	Tension	0	Amplitude (mV)	100			
			0 (lt2000)	1	Bond Index	0			

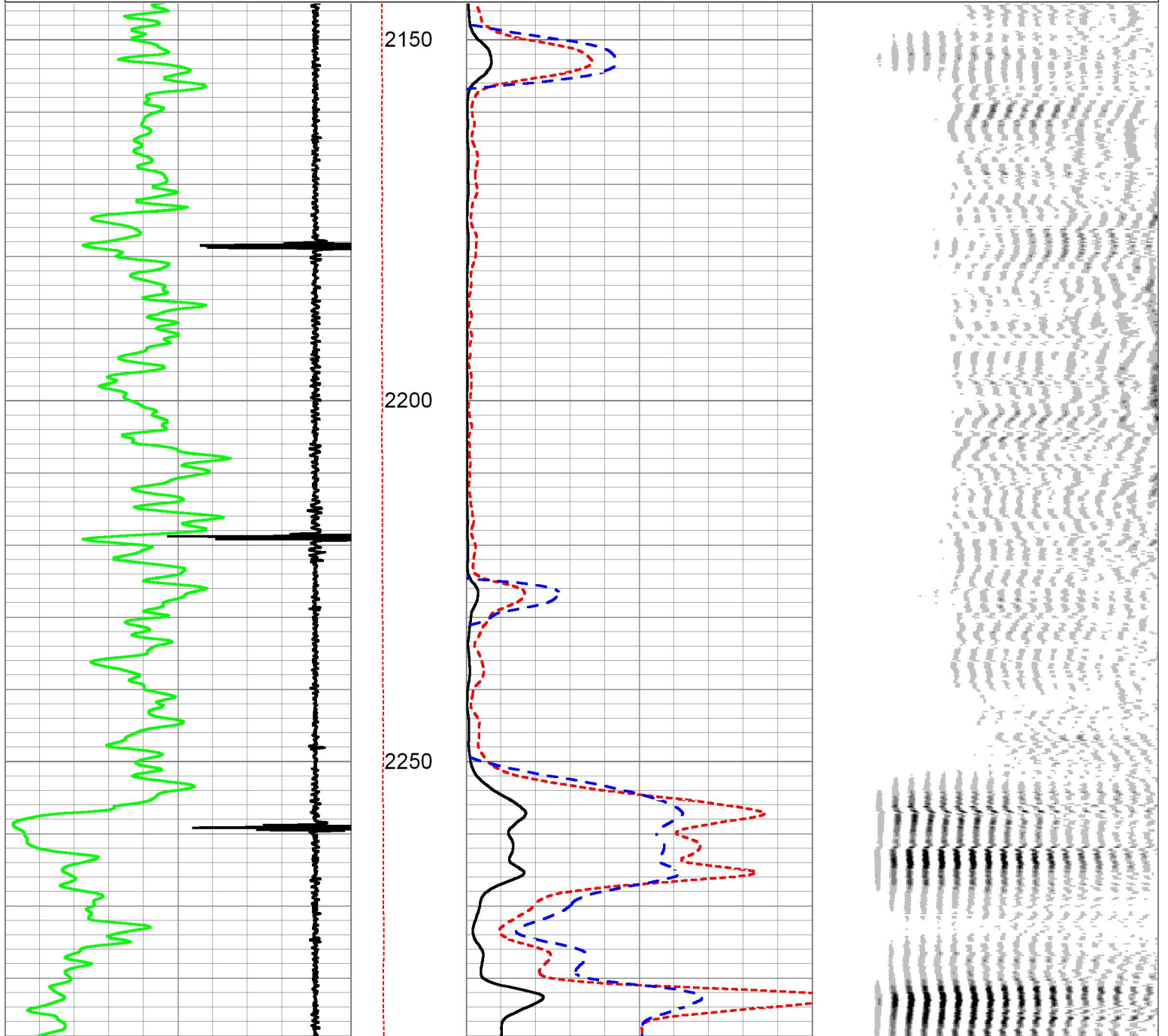


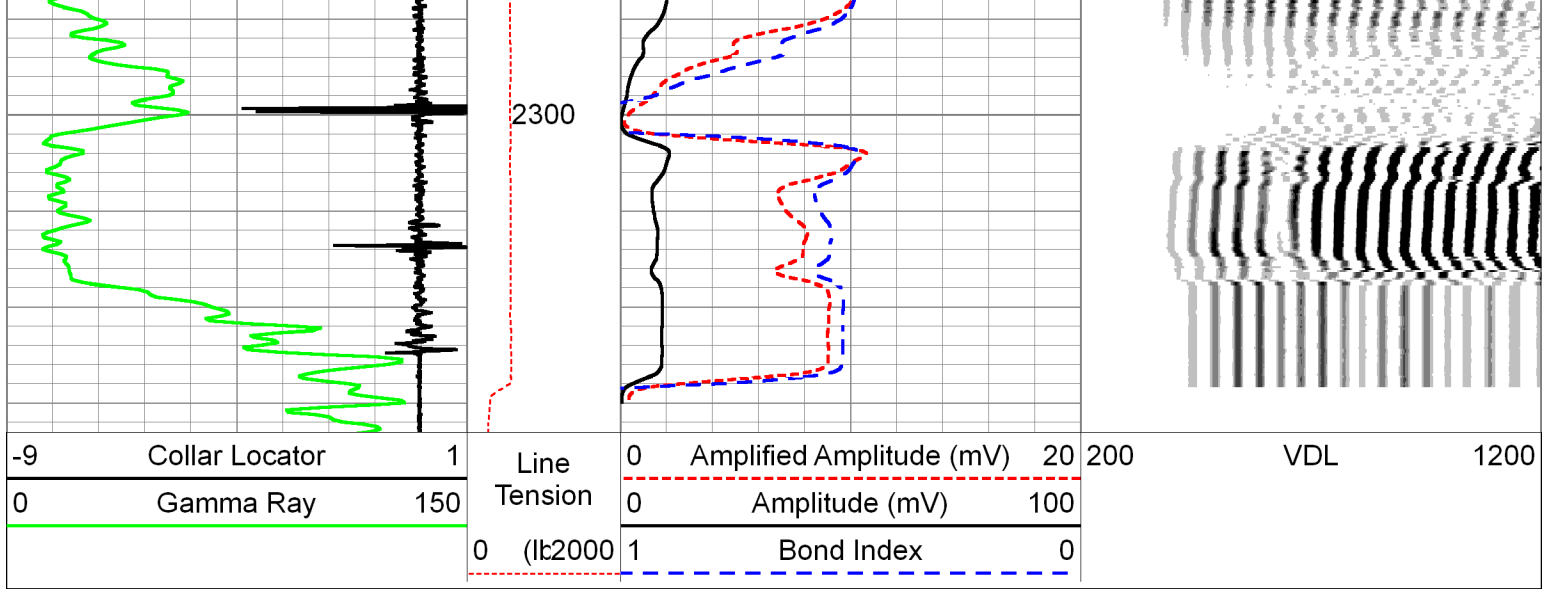
PIONEER
Pioneer Energy Services

REPEAT SECTION

Database File	showalter#4-12.db
Dataset Pathname	SCBL/pass2
Presentation Format	PINR_C~1
Dataset Creation	Mon Aug 15 08:16:47 2016
Charted by	Depth in Feet scaled 1:240

-9	Collar Locator	1	Line	0	Amplified Amplitude (mV)	20	200	VDL	1200
0	Gamma Ray	150	Tension	0	Amplitude (mV)	100			
			0 (lt2000)	1	Bond Index	0			





Calibration Report

Database File showalter#4-12.db
 Dataset Pathname SCBL/pass3.1
 Dataset Creation Mon Aug 15 09:03:17 2016

Gamma Ray Calibration Report

Serial Number: TigerProbe
 Tool Model: Tiger
 Performed: Thu Sep 17 10:13:13 2015

Calibrator Value: 1.0

Background Reading: 0.0 cps
 Calibrator Reading: 1.0 cps

Sensitivity: 0.9200 /cps

Segmented Cement Bond Log Calibration Report

Serial Number: 4.5040904
 Tool Model: Probe

Calibration Casing Diameter: 5.500 in
 Calibration Depth: 2878.383 ft

Master Calibration, performed Tue Jul 19 11:10:38 2016:

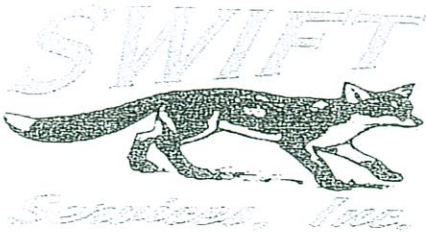
	Raw (v)		Calibrated (mv)		Results	
	Zero	Cal	Zero	Cal	Gain	Offset
3'	-0.006	1.431	0.000	80.000	55.647	0.359
CAL	-0.005	2.076				
5'	-0.006	1.704	0.000	80.000	46.783	0.290
SUM						
S1	-0.006	1.614	0.000	105.000	64.822	0.358
S2	-0.006	1.482	0.000	105.000	70.531	0.443
S3	-0.006	1.274	0.000	105.000	82.024	0.493
S4	-0.007	1.121	0.000	105.000	93.061	0.636
S5	-0.006	1.148	0.000	105.000	90.972	0.586
S6	-0.006	1.345	0.000	105.000	77.722	0.472
S7	-0.006	1.583	0.000	105.000	66.067	0.420
S8	-0.006	1.658	0.000	105.000	63.121	0.358

Air Zero Calibration, performed Tue Aug 25 11:34:16 2015:

	Raw (v)	Calibrated (v)	Results
	Zero	Zero	Offset
3'	0.000	0.000	0.000
5'	0.000	0.000	0.000
SUM			
S1	0.000	0.000	0.000
S2	0.000	0.000	0.000
S3	0.000	0.000	0.000
S4	0.000	0.000	0.000
S5	0.000	0.000	0.000
S6	0.000	0.000	0.000
S7	0.000	0.000	0.000
S8	0.000	0.000	0.000



Company ABERCROMBIE ENERGY LLC
 Well SHOWALTER #4 SWD
 Field
 County SCOTT
 State KANSAS



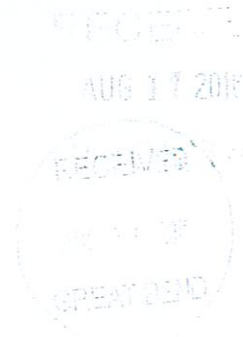
P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
8/11/2016	29590

BILL TO
Abercrombie Energy, LLC 5510 Oil Center Road South Great Bend, KS 67530



- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#4-12	Schowalter	Scott	Wild West	SWD	Development	Squeeze perms/Ca...	Blaine
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				50	Miles	5.00	250.00
577D	Pump Charge - Shallow Squeeze (< 1500 Ft.)				1	Job	800.00	800.00
325	Standard Cement				275	Sacks	12.25	3,368.75T
278	Calcium Chloride				8	Sack(s)	40.00	320.00T
290	D-Air				2	Gallon(s)	42.00	84.00T
275	Cotton Seed Hulls				1	Sack(s)	30.00	30.00T
581D	Service Charge Cement				275	Sacks	1.50	412.50
583D	Drayage				656.25	Ton Miles	0.75	492.19
	Subtotal							5,757.44
	Sales Tax Scott County						8.50%	323.23
<p>1334005 SCHOW CEMENT SQUEEZE - 24 AK APPROVAL T/P</p>								
We Appreciate Your Business!							Total	\$6,080.67

SC7 8-15-16



TICKET 00599

CHARGE TO: Abe-embie
 ADDRESS:
 CITY, STATE, ZIP CODE:

PAGE 1 OF 1

SERVICE LOCATIONS: Ado City Kb WELL/PROJECT NO: Schwabter 412 SWD LEASE: Scott COUNTY/PARISH: Scott City STATE: Ks CITY: Scott City DATE: 11 Aug-16 OWNER:
 TICKET TYPE: SERVICE SALES CONTRACTOR: SWD RIG NAME/NO: location ORDER NO.:
 WELL TYPE: Development WELL CATEGORY: WLD WEST JOB PURPOSE: squeeze plugs/casing leaks DELIVERED TO: location WELL LOCATION: 12-18-32
 INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT							
575		1			50	Mi			5.00	250.00
577		1		MILEAGE	1	sq			800.00	800.00
325		1		Pump Charge	275	sk			12.125	3368.75
278		1		Standard cement	400	lb		sk	40.00	320.00
290		1		calcium chloride	2 gal				42.00	84.00
275		1		D-Air	1	sk			30.00	30.00
281		1		cotton seed balls	275	sk			1.50	412.50
		1		service charge	26250	lb		056.25 TMI	0.75	4981.19
				Drayage						

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

DATE SIGNED: [Signature] TIME SIGNED: 8:50/0

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?
 WE UNDERSTOOD AND MET YOUR NEEDS?
 OUR SERVICE WAS PERFORMED WITHOUT DELAY?
 WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?
 ARE YOU SATISFIED WITH OUR SERVICE?
 YES NO

PAGE TOTAL: 5757.44
 TOTAL: 1608.67

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X [Signature]
 SWIFT OPERATOR

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.
[Signature] APPROVAL
 305 8-15-16

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 11 AUG 16 PAGE NO.

CUSTOMER

A. Perdomo

WELL NO.

LEASE

JOB TYPE

cement perf / casing leak

TICKET NO.

29520

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								275 sk Standard cement w/ 2% CC 2 3/4" perf's 432-86 stickset zone packer set 4490 suspected casing leak approx 3900'
	0830 0845	2	14				200	on loc TRK 114 pump down BS - packer set 14 bbl to flood - inj into leak @ 2000
	0905	2	4				200	pump down tubing inj rate - perf's
	0906	3	15				200	Mix STD cement 26cc w/ 100# balls well on vac - shut in tubing 75% wash out pump & lines
	0920	3	14				500	Displace cement w/ fresh H ₂ O catch pressure
			15				1500	Kickout - falls off
	0940		15				1200	holding 1200psi Release pressure pull 20 joints to 3800' wash barrels { 3.7 bbl cement left in 4 1/2 } 230'
	1015							lost holes - bottom cement holding - casing leak 3859-3891 set packer 3736'
	1050						50	pressure BS to 500psi - shut in wait on water
	1145	2	2 1/2				400	Re-do inj rate 2 bpm @ 400
	1148	2	22				φ	Mix STD cement w/ 100# @ 15.6 bpm on vacuum - wash up & rods
	1202	2 1/2	5				400	Displace cement w/ fresh H ₂ O catch pressure Kickout @ 14 bbl - not on vacuum
		1	15 1/2				500	Kickout - packer clear

continued:

CUSTOMER Arcocon Oil WELL NO. 4-12 SWD LEASE Schwabert JOB TYPE squirt pumps/casing leak TICKET NO. 29590

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
1225	1225						500	holding 500 psi
1230	1230		20					Release pressure to truck - chisel up open packer bypass - Reverse hole clean - no cement plugs -
	1240							pull tubing from hole set CIBP
	1455							perforate anhydrite layer - 2317-2319' Run in tubing to 2204'
	1536	2	2			450	500	pressure 55 to 500 psi - shut in inj rates in puffs
	1545	2	22			900		Mix SiD cement (20% ^{ck} 100 @ 1576 pps) falls to \emptyset - shut in wash out pump & line
	1601	2 1/2				600		Displace w/ fresh H ₂ O catch pressure
	1607	1 1/2	9			1000		- Displace cement to packer - falls to 700
			9 1/2			700		- pump 1/2 bbl - total 9 1/2 shut in tubing
	1612							Wash truck
	1621					400		open tubing 400 psi
						900		Pump up to 900 psi - holding
	1630		25					open by PAFS Reverse hole clean - no cement plugs -
	1640							pull tool Back up
	1700							Job complete
								Thur 11/10 Blinn Flat & ISAAC

275 gal
total
500 gal



Invoice

Page: 1

Pioneer Wireline Services, LLC
P.O. Box 202567
Dallas, TX 75320-2567
(785) 443-3205

RECEIVED
AUG 17 2016
INVOICE NUMBER: 1-50662
INVOICE DATE: 8/11/2016
CLIENT: ABERCR

Sold To

ABERCROMBIE ENERGY LLC
Attention: Accounts Payable
5510 Oil Center Road South
Great Bend, KS 67530 USA



LEASE	
WELL#	Schowalter # 4 - 12
COUNTY	Scott
CLIENT PO	
DUE DATE	9/10/2016
ENGINEER	Walker, David L

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENSION
1.000	Rig-up on Rig or Crane	521.62	521.62
1.000	Setting Service Depth	222.88	222.88
1.000	Operation Charge for 4.75-5.61" CIBP	957.89	957.89
1.000	Dump Bailer Depth	569.05	569.05
1.000	Dump Bailer Operation	163.96	163.96
1.000	Perforate Slick Low Press Depth	237.10	237.10
1.000	Perforate Slick Low Press 0-6000	27.50	27.50
	LAST ITEM		
	1354.005		
	SCHOW		
	PERFORATE - 24		
	APPROVAL TJ		
	VERIFIED ACCURACY		

THANK YOU FOR YOUR BUSINESS

TERMS: If Company has an approved open account with Pioneer, invoices are payable NET 30 days from date of invoice. If Company does not have an approved open account with Pioneer, all sums are payable prior to performance of services or delivery of equipment, products, or materials. Company agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Pioneer employs an attorney for collection of any account, Company agrees to pay reasonable attorney fees plus all collection and court costs.

Subtotal	2,700.00
Freight	0.00
Sales Tax	229.50
Payment/Credit Amount	0.00
Balance:	2,929.50

501 8-15-16

