

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1325838
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: _____

1325838



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)

McGOWN

DRILLING, INC.

Wildcat Exploration, LLC
Mound City, KS

Don Breuel #O13

Linn County, KS
 10-22S-23E
 API: 107-25178

Spud Date:	12/13/2016	Surface Bit:	11.0"
Surface Casing:	8.625"	Drill Bit:	6.75"
Surface Length:	22.8'	Longstring:	500.05'
Surface Cement:	6 sx	Longstring Date:	12/20/2016
Longstring:	4.5" 10.5# RII Used		

Driller's Log

Top	Bottom	Formation	Comments
0	2	Soil	
2	12	Clay	
12	14	Gravel	
14	20	Shale	
20	30	Lime	
30	85	Shale	
85	87	Coal	
87	89	Shale	
89	108	Lime	
108	118	Shale	
118	121	Lime	
121	125	Shale	
125	133	Sandy Shale	
133	160	Shale	
160	178	Lime	
178	188	Shale	
188	190	Lime	
190	233	Shale	
233	239	Sand	Light bleed, good odor
239	294	Shale	
294	296	Coal	
296	305	Sandy Shale	
305	355	Shale	

Don Breuel #O13

Linn Co., KS

355	357	Lime	
357	358	Coal	
358	400	Shale	
400	402	Coal	
402	415	Shale	
415	430	Sandy Shale	
430	443	Shale	
443	454	Shale	Muddy
454	473	Sand	See below
473	474	Coal	
474	522	Shale	
522		TD	

Coring

Run	Footage	Rec.
1	455-475	20'
2		

Bartlesville Sand Detail

455-457	Sand, gas, no oil
457-468	Sand, brown, good porosity, good show of heavy oil
468-470	Sand, weaker oil show
470-473	Sand, poor oil show, wet
473-474	Coal



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 50361
LOCATION Ottawa KS
FOREMAN Fred Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-22-16	9999	Don Brown # 0-13	NE 10	22	23	LN
CUSTOMER <u>W. Idcat Exploration</u>			TRUCK #			
MAILING ADDRESS <u>Tax Specialist Box 206 Main St.</u>			DRIVER			
CITY <u>Mound City</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66052</u>			TRUCK #			
			DRIVER			

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 522 CASING SIZE & WEIGHT 4 1/2
CASING DEPTH 500 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 4 1/2" Plug
DISPLACEMENT 400L DISPLACEMENT PSI _____ MIX PSI _____ RATE 40 RPM

REMARKS: Hold safety meeting. Establish circulation. Mix + Pump 100# Gel Flush. Pump 4 BBL Teletale dye. Mix + Pump 74 SKS Por Blend IA Cement 270 gal 4" Cello Flake/sk. Flush pump + line clean Displace 4 1/2" Rubber plug to casing TD. Pressure to 500# PSI. Release pressure to set float valve. Shut in casing.

McGowan Drilling. Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0002	—	MILEAGE	N/C	
CE0711	2/3 Minimum	Ton Miles Delivery	440.00	
W52402	1/2 hrs	Transport	60.00	
		Sub Total	2000.00	
		Less 55%		900.00
CC5840	69 SKS	Por Blend IA Cement	931.50	
CC5965	216#	Bauxite Gel	648.00	
CC6075	17#	Cello Flake	342.00	
CP 8178	1	4 1/2" Rubber Plug	75.00	
		Sub Total	1105.20	
		Less 55%		497.36
		6.5%	SALES TAX	32.37
			ESTIMATED TOTAL	1429.73

RAVEN 3737
AUTHORIZATION Guy + Brent TITLE _____ DATE (317) 14

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.