

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. 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	Taos Resources Operating Company LLC
Well Name	WEBBER 34-2
Doc ID	1329756

Tops

Name	Top	Datum
LATAN	1905	-610
STALNAKER	1938	-643
LAYTON	2365	-1070
MARMATON	2748	-1453
CHEROKEE	2865	-1571
MISSISSIPPIAN	3138	1833
KINDERHOOK	3495	-2200
WOODFORD	3536	-2241

Form	ACO1 - Well Completion
Operator	Taos Resources Operating Company LLC
Well Name	WEBBER 34-2
Doc ID	1329756

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
	3390-3410,3370-3378,3334-3354	50000# 40/70 Mesh, 4500 gal 15% HCL, 4914 Slickwater	3310-3430
	3310-3325		
	3260-3273,3240-3250,3210-3230,3180-3200,3140-3160,	50000# 40/70 Mesh 4500 Gal 15% HCL, 5026 Slickwater	3140-3287
	3283-3287		

HYDRAULIC FRACTURING FLUID PRODUCT COMPONENT INFORMATION DISCLOSURE



Last Fracture Date:	1/3/2016
County:	Cowley
API Number (14 Digits):	15-035-24662-00-00
Operator Name:	Taos Resources Operating Co LLC
Well Name and Number:	Webber # 34-2
Latitude:	
Longitude:	
Datum:	
Production Type:	Oil
True Vertical Depth (TVD):	3552
Total Base Fluid Volume (gal)*:	411,025

Hydraulic Fracturing Fluid Composition:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS#)	Maximum Ingredient Concentration in Additive (% by mass)**	Maximum Ingredient Concentration in HF Fluid (% by mass)**	Authorized Representative's Name, Address and Phone Number
Water	Taos Resources	Carrier/Base Fluid	Water	7732-18-5	100%	94.48%	
40/70 Premium Sand	SPS	PROPPING AGENT	CRYSTALLINE SILICA	14808-60-8	100%	2.75%	
15% HCl Acid	SPS	ACID	HYDROCHLORIC ACID	7647-01-0	37%	0.98%	
A-1 Corrosion Inhibitor	Completion Specialties	Corrosion Inhibitor	Ethylene Glycol	107-21-1	20%	0.00054%	
			N,N-Dimethyl Formamide	68-12-2	20.00%	0.00054%	
			2-Butoxyethanol	111-76-2	5.00%	0.01300%	
			Isopropanol	67-63-0	5.00%	0.00013%	
			Water	7732-18-5	50.00%	0.00134%	
HNE-2 Non-Emulsifier	Completion Specialties	Non-Emulsifier	Nonyl Phenol Ethoxylated	127087-87-0	15.00%	0.00037%	
			Isopropanol	67-63-0	30.00%	0.00074%	
			Poly(oxy-1,2-ethanediyl),a-hydro-w-hyd	25322-68-3	2.00%	0.00005%	
			Water	7732-18-5	55.00%	0.00136%	
IS-10	Brainerd	Acidizing	Citric Acid	77-92-9	50.00%	0.00299%	
			Water	7732-18-5	50.00%	0.00299%	
FRA-2 Friction Reducer	Chemplex	Friction Reducer	Petroleum Distillate Hydrotreated Light copolymer of 2-propenamide	064742-47-8	20.00%	0.00906%	
			Ammonium chloride ((NH4)Cl)	79-06-1	30.00%	0.01359%	
			Oleic Acid Diethanolamide	12125-02-9	1.00%	0.00045%	
			Water	93-83-4	1.00%	0.00045%	
			Water	7732-18-5	60.00%	0.02717%	
LBC-1	Completion Specialties	Water Treatment	Corrosion Inhibitor	Proprietary	70.00%	0.01496%	SPS Will Slisco 421 North 20th street Blackwell, OK 74631 (580)401-5454
			Methanol	67-56-1	30.00%	0.00641%	
W-11	EES	NB/ Surfactant	Water	7732-18-5	85.00%	0.01876%	
			Sodium Carbonate	497-19-8	12.00%	0.00265%	
			(R)-p-mentha-1,8-diene	5989-27-5	5.00%	0.00110%	
AR-104 Acid Gel	Completion Specialties	Acid Gel/Retarder	Isopropanol	67-63-0	60.00%	0.00716%	
			Ethoxylated Fatty Amine	Proprietary	30.00%	0.00358%	SPS Will Slisco 421 North 20th street Blackwell, OK 74631 (580)401-5454
			Acetic Acid	64-19-7	9.99%	0.00119%	

*Total Water Volume sources may include fresh water, produced water, and/or recycled water. **Information is based on the maximum potential for concentration and thus the total may be over 100%. Ingredient information for chemicals subject to 29 CFR 1910.1200(l) and Appendix D are obtained from suppliers' Material Safety Data Sheets (MSDS).



REMIT TO
 Consolidated Oil Well Services, LLC
 Dept:970
 P.O.Box 4346
 Houston, TX 77210-4346

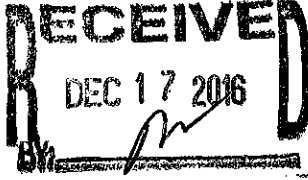
MAIN OFFICE

P.O.Box884
 Chanute,KS 66720
 620/431-9210,1-800/467-8676
 Fax 620/431-0012

Invoice Invoice# 809232

Invoice Date: 12/12/16 Terms: Net 30 Page 1

TAOS RESOURCES OPERATING, LLC
 1455 WEST LOOP SOUTH, ST. 600
 HOUSTON TX 77254
 USA
 7139930774



WEBBER 34-2
 15-035-24662-00-00

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	1,500.0000	48.818	767.74
CE0002	Equipment Mileage Charge - Heavy Equipment	50.000	7.1500	48.818	182.98
CE0710	Cement Delivery Charge	430.000	1.7500	48.818	385.15
CC5800A	Class A Cement - Sack	175.000	20.0000	48.818	1,791.38
CC5325	Calcium Chloride	450.000	1.2500	48.818	287.90
CC5965	*Bentonite*	350.000	0.3000	48.818	53.74
CC6075	Celloflake	100.000	2.0000	48.818	102.36

Subtotal 6,977.50
 Discounted Amount 3,406.28
 SubTotal After Discount 3,571.22

Amount Due 7,272.31 If paid after 01/11/17

Tax: 150.89
 Total: 3,722.14

WELL ID/AFE # 830.130
 CODE 175D724
 (N) OR R
 APPROVAL _____

Received Time Dec. 11, 2016 8:19AM No. 0277
 7214 Field # FCB0C 1114



CONSOLIDATED
 Oilfield Services, LLC

API # 15-035-24662-00-00

TICKET NUMBER 51940
 LOCATION 66 Dorado
 FOREMAN Fuzz4

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

**FIELD TICKET & TREATMENT REPORT
 CEMENT**

Invoice # 809232

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-8-16	2871	Webber 34-2	34	32	5	Cowley
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Tops Operating			603	Taney		
MAILING ADDRESS			667	Jeremy		
1455 Westloop South Ste 600			725	Fuzz4		
CITY	STATE	ZIP CODE				
Houston	TX	77259				

JOB TYPE Surface HOLE SIZE _____ HOLE DEPTH 260' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 259' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.2 SLURRY VOL 42.3 WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
 DISPLACEMENT 15.2 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting on well #8. Pick up and establish circulation Pump 5 BBL water, mix 175 gals Class A 390cc, 290cc 1/2 # poly chloride. Displace 15 BBL and shut in.

Cement did circulate 5# BBL to pit

Thanks Fuzz4 & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
160501	1	PUMP CHARGE	1500.00	1500.00
160007	50	MILEAGE	7.15	357.50
160110	8.2 ton	Ten mileage delivery	125	752.50
005800	175 gals	Class A	20.00	3500.00
005325	450 #	Calcium chloride	1.25	562.50
005985	350 #	Gel	1.30	105.00
006075	100 #	Poly chloride	2.00	200.00
				6,977.50
		Subtotal		7,142.50
		- disc	49%	3,571.25
				3,406.25
		TAX @ 150.89		3,571.25
				AS REP BID
			SALES TAX	305.94
			ESTIMATED TOTAL	3,877.19

SCANNED

AUTHORIZATION [Signature] TITLE _____ DATE 12/11/2016

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



REMIT TO
 Consolidated Oil Well Services, LLC
 Dept:970
 P.O.Box 4346
 Houston, TX 77210-4346

MAIN OFFICE

P.O.Box 884
 Chanute, KS 66720
 620/431-9210, 1-800/467-8676
 Fax 620/431-0012

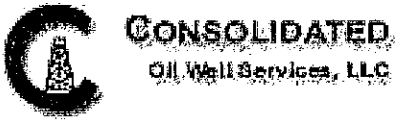
Invoice Invoice# 809258

Invoice Date: 12/15/16 Terms: Net 30 Page 1

TAOS RESOURCES OPERATING, LLC
 1455 WEST LOOP SOUTH, ST. 600
 HOUSTON TX 77254
 USA
 7139930774

WEBBER 34-2
 15-035-24662-00-00

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0452	Cement Pump Charge 3001' - 4000'	1.000	2,300.0000	45.000	1,265.00
CE0002	Equipment Mileage Charge - Heavy Equipment	50.000	7.1500	45.000	196.63
CE0710	Cement Delivery Charge	530.000	1.7500	45.000	510.13
WE0853	80 BBL Vacuum Truck (Cement Services)	9.000	100.0000	45.000	495.00
WC6159	City Water	3,000.000	0.0200	45.000	33.00
CC5800A	Class A Cement - Sack	225.000	20.0000	45.001	2,474.98
CC5325	Calcium Chloride	450.000	1.2500	45.000	309.38
CC5965	*Bentonite*	650.000	0.3000	45.000	107.25
CC6077	Kolseal	1,125.000	0.5000	45.000	309.38
CP8485	5 1/2" Float Shoe, AFU	1.000	585.0000	45.000	321.75
CP8254	5 1/2" Latch Down Plug & Assembly	1.000	400.0000	45.000	220.00
CE1130	Specialized Iron Requirements or Rig Up	1.000	200.0000	100.000	0.00
CP8576	5 1/2" Turbolizer	7.000	110.0000	45.000	423.50
CP8651	5 1/2" Cement Basket Reciprocating	2.000	360.0000	45.000	396.00



REMIT TO
 Consolidated Oil Well Services, LLC
 Dept:970
 P.O.Box 4346
 Houston, TX 77210-4346

MAIN OFFICE

P.O.Box884
 Chanute, KS 66720
 620/431-9210, 1-800/467-8676
 Fax 620/431-0012

Invoice Invoice# 809258

Invoice Date: 12/15/16 Terms: Net 30 Page 2

TAOS RESOURCES OPERATING, LLC
 1455 WEST LOOP SOUTH, ST. 600
 HOUSTON TX 77254
 USA
 7139930774

WEBBER 34-2
 15-035-24662-00-00

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CC6079	PhenoSeal Formica Flakes	200.000	1.3500	45.000	148.50
Subtotal					13,310.00
Discounted Amount					6,099.55
SubTotal After Discount					7,210.45

Amount Due 13,892.19 If paid after 01/14/17

Tax: 320.20
 Total: 7,530.70



CONSOLIDATED
Oil Well Services, LLC

API# 15-035-24662-0000

7239 Field Htr doc
7139

TICKET NUMBER **51943**

LOCATION **GL Donado**

FOREMAN **Fuzzey**

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

FIELD TICKET & TREATMENT REPORT
CEMENT

Invoice #89158

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-12-16	2871	Webber 34-2	34	32	2	Comber
CUSTOMER						
Tosco Opec Resources Inc						
MAILING ADDRESS						
1455 W Loop South Ste 600						
CITY		STATE	ZIP CODE			
Houston		TX	72254			
TRUCK #	DRIVER	TRUCK #	DRIVER			
603	Tracy					
667	Jeremy					
692	Mark					
725	Fuzzey					

JOB TYPE: Production HOLE SIZE: 7 7/8 HOLE DEPTH: 5520' CASING SIZE & WEIGHT: 5 1/2 15.5
 CASING DEPTH: 3543' DRILL PIPE: _____ TUBING: _____ OTHER: _____
 SLURRY WEIGHT: 14.7 SLURRY VOL: 52.7 WATER gal/sk: 6.4 CEMENT LEFT in CASING: 9.6'
 DISPLACEMENT: 84.1 DISPLACEMENT PSI: _____ MIX PSI: _____ RATE: _____

REMARKS: Safety meeting on w-w #8. Flood pump Turbolizers on 3-6-9
 12-16-19-22. Baskets 15-24. Rig up and circulate 20 min M.W.
 255 lbs BBL Pump @ 84L water. screw 20 lbs cement thru mix.
 180 lbs cement @ 14.2". Wash pump lines and displace
 85 BBL. Lift Press 750# hand pump @ 1250#. Flood held
 Had sand returns until 60 BBL out and trickled down to nothing
 mix cement displace approx 3 BBL min

THANKS Fuzzey & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CG0452	1	PUMP CHARGE	2300.00	2300.00
CG0002	30	MILEAGE	7.15	357.50
CG0710	10.6 Ton	Tow mileage Delivery	12.5	927.50
CG0853	9 hrs	80 BBL One Truck	100.00	900.00
CG0669	3000 gal	City water	.02	60.00
CG5800	10889	27 S SPS	20.00	4500.00
CG5375	450#	Calcium Chloride	1.25	562.50
CG5965	650#	Gel	.30	195.00
CG0077	1125#	Red Seal	.50	562.50
CP8485	1	5 1/2 - 400 Clot shoe	585.00	585.00
CP8254	1	5 1/2 - hatchdown plug & Assy	400.00	400.00
CG1130	1	5 1/2 - 8' Landing Jib rental	200.00	W/C
CP8576	7	5 1/2 - Subanal Turbolizers	110.00	770.00
CP8651	2	5 1/2 - Reciprocating Baskets	360.00	720.00
CG6072	200#	Phenoxon 1	1.35	270.00
			Subtotal	1310.00
			discount 45%	589.50
			Subtotal	720.50
			SALES TAX	320.20
			ESTIMATED TOTAL	7530.70

SCANNED

Revin 8787
 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