

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	Suerte Oil & Gas LLC
Well Name	DUNCAN 2
Doc ID	1356000

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
1	678-688	300 Gal. 15% Acid	720
		Fracture, 5000 lbs Sand	
		50 lbs. Rock Salt	



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Suerte Oil & Gas LLC.	Customer Name:		Ticket No.:	100730		
Address:	2140 South US HWY 75	Contractor:		Date:	4/20/2017		
City, State, Zip:	Independence, Ks.	Job type	Cement Longstring	Well Type:	Oil		
Service District:	Hays, Ks	Well Details:	Sec: 5	Twp:	35S	R:	13E
Well name & No.	Duncan #2	Well Location:	Niotaze	County:	Chautaugua	State:	Kansas
Equipment #	Driver	TRUCK CALLED				AM	TIME
231	Tony	ARRIVED AT JOB				PM	8:00
240	Darren	START OPERATION				PM	8:30
28	Jake	FINISH OPERATION				PM	9:45
30	Todd	RELEASED				PM	10:00
MILES FROM STATION TO WELL							305

Treatment Summary

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Net Amount
C001	Heavy Equip. One Way	mi	150.00	\$3.25	\$487.50	\$365.63
C002	Light Equip. One Way	mi	75.00	\$1.50	\$112.50	\$84.38
C003	Ton Mileage - One way	mi	444.00	\$1.30	\$577.20	\$432.90
C019	Cement Pump	ea	1.00	\$950.00	\$950.00	\$712.50
CP006	Regular - Class A Cement	sack	105.00	\$16.25	\$1,706.25	\$1,279.69
CP013	Bentonite Gel	lb	198.00	\$0.30	\$59.40	\$44.55
CP014	Calcium - Chloride	lb	296.00	\$1.00	\$296.00	\$222.00
CP024	Pheno Seal	lb	53.00	\$1.70	\$90.10	\$67.58
CP039	Rubber Plug 4 1/2	ea	1.00	\$48.00	\$48.00	\$36.00
CP013	Bentonite Gel	lb	300.00	\$0.30	\$90.00	\$67.50

TERMS: Cash in advance unless Hurricane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and subject to collection. Prices quoted are estimates only and are good for 30 days from the date of issue. Pricing does not include federal, state, or local taxes, or royalties and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultimately required to perform these services. Discount rate is based on 30 days net payment terms or cash.

DISCLAIMER NOTICE:

This technical data is presented in good faith, but no warranty is given by and H.S.I. assumes no liability for advice or recommendations made concerning results to be obtained from the use of any product or service. The information presented is HSI best estimate of the actual results that may be achieved and should be used for comparison purposes and make no guarantee of future production performance. Customer warrants that well and all associated equipment in acceptable condition to receive services by H.S.I. Likewise, the customer will guarantee proper operational care of all customer owned production and associated equipment, while H.S.I. is on location performing services which could adversely affect the performance of such services. Authorization below acknowledges receipt and acceptance of all terms and conditions stated above.

Gross: \$ 4,416.95		Net: \$	3,312.71
Total Taxable	\$1,717.31	Tax Rate: 8.500%	
Frac and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.		Sale Tax: \$	145.97
		Total: \$	3,458.68

Date of Service: **Apr-17**
 HSI Representative: **Todd Seba**

Customer Comments:
pdck# 1357
4/20/17

X _____
 CUSTOMER AUTHORIZED AGENT

TREATMENT REPORT



HURRICANE SERVICES INC

Customer: Suerte Oil & Gas LLC	Date: 4/20/2017	Ticket No.: 100730
Field Rep: David Bird		
Address:		
City, State:		
County, Zip:		

Field Order No.: 100730	Open Hole:	Perf Depths (ft)	Perfs
Well Name: Duncan #2	Casing Depth: 725'		
Location: Niotaze Ks.	Casing Size: 4.5 11.6 #		
Formation:	Tubing Depth:		
Type of Service: Cement L.S.	Tubing Size:		
Well Type: Oil	Liner Depth:		
Age of Well: New	Liner Size:		
Packer Type:	Liner Top:		
Packer Depth:	Liner Bottom:		
Treatment Via: 4.5 Csg	Total Depth: 730'		
		Total Perfs	0

TIME	INJECTION RATE		PRESSURE		REMARKS	PROP (lbs)	HCL (gls)	FLUID (bbis)
	FLUID	N2/CO2	STP	ANNULUS				
6:30 AM					Called out			
8:00 AM					On Location With Trucks Hold Safety Meeting			
8:15 AM					Spot & Set Up Trucks			
8:30 AM					Drop Ball Hook Up To Casing			
8:47 AM	3.3		80.0		Start Pumping H2O			
	3.3		300.0		4 Out Ball Went Thru			
					6 Out Hole Circulating			
					15 Out			15.00
	3.3		100.0		Start Pumping 300 lb Gel H2O			12.00
	3.3		100.0		Start Pumping H2O Circulate Gel Around			22.00
	3.3		100.0		Start Pumping Dyed H2O			6.00
	3.3		100.0		Start Mix & Pump 105 Sk Common 2% Gel 3%CC1/2Lb/sk			
					pheno-seal @ 15Lb/gal			25.00
9:33 AM					Shut Down Wash Up Truck Release 4.5 Top Rubber Plug			
	3.3		200.0		Start Displacement			
9:45 AM	2.5		1,000.0		Plug Down			11.20
					Release Psi & Float Held			
					Thank You Please Call Again Todd Jake Tony Darren			
TOTAL:								91.20

SUMMARY

Max FI. Rate	Avg FI. Rate	Max PSI	Avg PSI
3.3	3.2	1,000.0	247.5

PRODUCTS USED

300 Lb's Gel 105 sk Common 2%Gel 3%CC 1/2 Lb/sk Pheno-seal

Treater: Todd Seba

Customer: David Bird

Elite Cementing & Acidizing of KS, LLC

810 E 7th, PO Box 92
Eureka, KS 67045



Date	Invoice #
4/17/2017	3233

Bill To	
Suerte Oil & Gas LLC 2140 S. US Hwy 75 Independence, KS 67301	
Customer ID#	1240

Job Date	4/13/2017
Lease Information	
Duncan #2	
County	Chautauqua
Foreman	RL

Item	Description	Qty	Terms	Net 15
			Rate	Amount
C101	Cement Pump-Surface	1	840.00	840.00
C107	Pump Truck Mileage (one way)	40	3.95	158.00
C200	Class A Cement-94# sack	25	15.00	375.00T
C205	Calcium Chloride	70	0.60	42.00T
C206	Gel Bentonite	45	0.20	9.00T
C108A	Ton Mileage (min. charge)	1	345.00	345.00

We appreciate your business!

Phone #	Fax #	E-mail
620-583-5561	620-583-5524	rene@elitecementing.com

Send payment to:
Elite Cementing & Acidizing of KS, LLC
PO Box 92
Eureka, KS 67045

Subtotal	\$1,769.00
Sales Tax (8.5%)	\$36.21
Total	\$1,805.21
Payments/Credits	\$0.00
Balance Due	\$1,805.21

pd 4-13-17
cc # 1354

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **3233**
 Foreman Rick Leabird
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
4-13-17	12410	Duncan # 2	5	35	13E	CG	KS
Customer: <u>Suerte Oil & GAS LLC</u>			Unit #	Driver	Unit #	Driver	
Mailing Address: <u>2140 S. US Hwy 75</u>			105	<u>Dave C.</u>			
City: <u>Independence</u> State: <u>Ks</u> Zip Code: <u>67301</u>			112	<u>Zevi A.</u>			

Job Type s/p Hole Depth 41' Slurry Vol. 6 SK Tubing _____
 Casing Depth 41' Hole Size 11" Slurry Wt. 15" Drill Pipe _____
 Casing Size & Wt. 8 5/8" Cement Left in Casing 5' Water Gal/SK 6.5 Other _____
 Displacement 2 1/2 Bbl Displacement PSI 100 Bump Plug to _____ BPM _____

Remarks: Safety meeting - Rig up to 8 5/8" casing. Break circulation w/ fresh water. Washdown 5' to TD. Mixed 25 SKS class A cement w/ 3% cacl2 & 2% gel @ 15#/gal. Displace w/ 2 1/2 Bbl fresh water. Shut casing in @ 100 PSI. Job complete. Rig down.

"Thank You"

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	840.00	840.00
C107	40	Mileage	3.95	158.00
C200	25 SKS	class A cement	15.00	375.00
C205	70"	3% cacl2	.60	42.00
C206	45"	2% gel	.20	9.00
C108A	1.18	tax mileage bill trk	m/c	345.00
			<u>8.5%</u>	
			Subtotal	1769.00
			Sales Tax	36.21
			Total	1805.21

pd 4-13-17
 CX # 1354

Authorization Dave Bud Title _____

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.



Green Country Wireline

**GAMMA RAY
CEMENT BOND LOG
CCL/VDL**

Company SUERTE OIL & GAS, LLC. Well DUNCAN # 2 Field DUNCAN LEASE County CHAUTAUQUA State KANSAS	Country	USA	Company	SUERTE OIL & GAS, LLC.				
			Well	DUNCAN # 2				
			Field	DUNCAN LEASE				
			County	CHAUTAUQUA				
		State	State	KANSAS		Country	USA	
			Location:	API #: 15-019-27572-00				Other Services
				SEC 5 TWP 35S RGE 13E				Elevation
			Permanent Datum					K.B.
			Log Measured From					D.F.
			Drilling Measured From					G.L.
Date			5-23-17					
Run Number			1					
Depth Driller			733'					
Depth Logger			721'					
Bottom Logged Interval			720'					
Top Log Interval			SURFACE					
Open Hole Size			---					
Type Fluid			WATER					
Density / Viscosity			---					
Max. Recorded Temp.			---					
Estimated Cement Top			SURFACE					
Time Well Ready			---					
Time Logger on Bottom			---					
Equipment Number			3					
Location			DEWEY					
Recorded By			HERREN					
Witnessed By			MR BIRD					
Borehole Record				Tubing Record				
Run Number	Bit	From	To	Size	Weight	From	To	
Casing Record	Size	Wgt/Ft	Top	Bottom				
Surface String								
Prot. String								
Production String	4.5"		SURFACE	TD				
Liner								

