

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) (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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24 S. Gold Paola, KS 66071

Allen's Holdings & Investments
 Oil & Gas Well Drilling
 Water Wells
 Geo-Loop Installation

Phone: 913-557-9083
 Fax: 913-557-9084

WELL LOG

Tauy Oil, Inc.
 Faulkner #9

API #15-045-22296-00-00
 July 18, 2019-July 19, 2019

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
6	soil & clay	6
21	sandstone	27 light brown, no water
4	shale	31
29	sandstone	60 water at 45', brown sandstone
18	sandstone	78 grey soft course grained sandstone, making water
2	limy sand	80
108	shale	188
6	lime	194
3	shale	197
5	lime	202
2	shale	204
1	lime	205
5	shale	210
18	lime	228
8	shale	236
8	lime	244
4	shale	248
20	lime	268
1	shale	269
11	lime	280
31	shale	311
32	lime	343
49	shale	392
17	lime	409
22	shale	431
5	lime	436
36	shale	472
8	lime	480
4	shale	484
4	lime	488
10	shale	498
23	lime	521
10	shale	531
24	lime	555
6	shale	561
6	lime	567
3	shale	570
2	lime	572 Base of Kansas City



REMIT TO

QES Pressure Pumping 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# 901149

Invoice Date: 07/26/19 Terms: C.O.D. Page 1

TAUY OIL
 P.O. BOX 973
 BALDWIN CITY KS 66006
 USA

FAULKNER #9

Part No	Description	Quantity	Discounted Unit Price	Discounted Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	825.0000	825.00
CE0002	Equipment Mileage Charge - Heavy Equipment	20.000	3.9325	78.65
CE0711	Minimum Cement Delivery Charge	0.500	363.0000	181.50
WE0853	80 BBL Vacuum Truck (Cement Services)	1.000	55.0000	55.00
CC5840	Poz-Blend I A (50:50)	120.000	7.4250	891.00
CC5965	Bentonite	302.000	0.1650	49.83
CC6075	Celloflake	30.000	1.1000	33.00
CP8176	2 7/8" Top Rubber Plug	1.000	24.7500	24.75
SubTotal After Discount				2,138.73

Tax: 77.39
 Total: 2,216.12

Amount Due 4,029.31 If paid after 07/26/19



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 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# 901123

Invoice Date: 07/22/19 Terms: C.O.D. Page 1

TAUY OIL
 P.O. BOX 973
 BALDWIN CITY KS 66006
 USA

FAULKNER #9

Part No	Description	Quantity	Discounted Unit Price	Discounted Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	825.0000	825.00
CE0711	Minimum Cement Delivery Charge	0.500	363.0000	181.50
WE0853	80 BBL Vacuum Truck (Cement Services)	1.500	55.0000	82.50
CC5840	Poz-Blend I A (50:50)	40.000	7.4250	297.00
CC5965	Bentonite	67.000	0.1650	11.06
CC6075	Celloflake	10.000	1.1000	11.00
			SubTotal After Discount	1,408.06

Tax: 24.73
 Total: 1,432.79

Amount Due 2,605.06 If paid after 07/22/19

3	shale	575
1	lime	576
2	shale	578
3	sand	581 green sand, wet, some gas
3	silty shale	584
37	shale	621
10	sand	631 course sand, grey in color very thin coal laminations, wet making gas
4	silty shale	635
107	shale	742
8	lime	750
5	shale	755
5	lime	760
9	shale	769
6	lime	775
13	shale	788
2	lime	790 brown lime, oil odor
8	shale	798
3	lime	801
3	shale	804
4	lime	808
14	shale	822
1	lime	823
4	shale	827
2	lime	829
5	silty shale	834 CP
1	oil sand	835 light brown, vertical fracture, light bleed
6	oil sand	841 brown sand, gassy, good bleed, few thin shale seems
11.5	oil sand	852.5 brown sand, good saturation, good bleed
1.5	sand	854 grey no show
4	broken sand	858 black sand & shale, minimal show
2	silty shale	860
30	shale	890 TD

Drilled a 9 7/8" hole to 84.6'

Drilled a 5 5/8" hole to 890'

Set 84.6' of new 7" casing threaded and coupled. Cemented by QSI.

Set 874' of new 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp.

Cored 834'-853'