



KANSAS CORPORATION COMMISSION 1066355
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30717
Name: Downing-Nelson Oil Co Inc
Address 1: PO BOX 1019
Address 2: _____
City: HAYS State: KS Zip: 67601 + _____
Contact Person: Ron Nelson
Phone: (785) 621-2610
CONTRACTOR: License # 31548
Name: Discovery Drilling
Wellsite Geologist: None
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
☐ Conv. to GSW

- ☐ Plug Back: _____ Plug Back Total Depth
☐ Commingled Permit #: _____
☐ Dual Completion Permit #: _____
☐ SWD Permit #: _____
☐ ENHR Permit #: _____
☐ GSW Permit #: _____

09/27/2011 09/27/2011 09/27/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-165-21935-00-00

Spot Description: _____
NE SE NE SW Sec. 1 Twp. 18 S. R. 18 ☐ East ☒ West
1900 Feet from ☐ North / ☒ South Line of Section
2500 Feet from ☐ East / ☒ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☒ SW

County: Rush

Lease Name: Hertel-Thielenhaus Unit Well #: 1-1

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 2041 Kelly Bushing: 2049

Total Depth: 15 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 0 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: 0 ppm Fluid volume: 80 bbls

Dewatering method used: Evaporated

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

☐ Letter of Confidentiality Received

Date: _____

☐ Confidential Release Date: _____

☐ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☒ I ☐ II ☐ III Approved by: Deanna Garrison Date: 11/02/2011



1066355

Operator Name: Downing-Nelson Oil Co Inc Lease Name: Hertel-Thielenhaus Unit Well #: 1-1
 Sec. 1 Twp. 18 S. R. 18 ☐ East ☒ West County: Rush

INSTRUCTIONS: Show important tops and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

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

Electric Log Submitted Electronically ☐ Yes ☐ No
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum
 0 0 0

CASING RECORD ☒ New ☐ 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
0	0	0	0	0	0	0	0

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
— Perforate				
— Protect Casing	-			
— Plug Back TD				
— Plug Off Zone	-			

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) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	_____ _____

ALLIED CEMENTING CO., LLC. 038298

ATTN: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

Russell KS

DATE <u>9-22-2011</u>	SEC. <u>1</u>	TWP. <u>18 S</u>	RANGE <u>18 W</u>	CALLED OUT	ON LOCATION	JOB START <u>4:30 AM</u>	JOB FINISH <u>5:00 PM</u>
LEASE <u>Therrell</u>	WELL # <u>1-1</u>	LOCATION <u>across KS 15 2 1/2 E</u>	COUNTY <u>RUSH</u>	STATE <u>KANSAS</u>			
OLD OR NEW (Circle one) <u>NEW</u>			VAN INFO <u></u>				

CONTRACTOR Discovery Data Right-4
 TYPE OF JOB Rotary Plug
 HOLE SIZE 12 1/4 ID. 15'
 CASING SIZE Rot Hole DEPTH 40'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

EQUIPMENT

PUMP TRUCK CEMENTER Calvin
 # 417 HELPER Woody
 BULK TRUCK
 # 410 DRIVER Ron
 BULK TRUCK
 # DRIVER

REMARKS:

20 SX @ Rot Hole
10 SX @ Surface 15' hole cut

CHARGE TO: Downing & Nelson Oil Co
 STREET
 CITY STATE ZIP

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME
 SIGNATURE [Signature]

OWNER
 CEMENT
 AMOUNT ORDERED 40 SX @ 4 1/2" 4 3/4" 4 1/2" 4 3/4" 4 1/2" 4 3/4"
 COMMON 24 @ 16.25 390.00
 POZMIX 16 @ 8.5 136.00
 GEL 1 @ 21.25 21.25
 CHLORIDE
 ASC
Flt Sc. 1 10 1/2 @ 2.20 22.00
 HANDLING 41 @ 2.25 92.25
 MILEAGE 14.56/mi @ 3.5 51.25
 TOTAL 624.35

SERVICE

DEPTH OF JOB
 PUMP TRUCK CHARGE 1250.00
 EXTRA FOOTAGE @
 MILEAGE 70 @ 7.00 490.00
 MANIFOLD @
60 @ 7.00 420.00
 TOTAL 2020.00

PLUG & FLOAT EQUIPMENT

TOTAL

SALES TAX (If Any)
 TOTAL CHARGES 2844.35
 DISCOUNT 20.9 IF PAID IN 30 DAYS