



KANSAS CORPORATION COMMISSION 1082639
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 # 4485
Name: Verde Oil Company
Address 1: 1020 NE LOOP 410 STE 555
Address 2: _____
City: SAN ANTONIO State: TX Zip: 78209 + 1224
Contact Person: Jeffrey L. Dale
Phone: (210) 828-7852
CONTRACTOR: License # 33900
Name: Leis, Steven A.
Wellsite Geologist: Jeffrey L. Dale
Purchaser: Coffeyville Resources

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 #: _____

<u>10/27/2011</u>	<u>10/27/2011</u>	<u>04/11/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30262-00-00

Spot Description: _____
NW SW NW SE Sec. 29 Twp. 26 S. R. 20 East West
1815 Feet from North / South Line of Section
2475 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Allen

Lease Name: Campbell Well #: 6-7

Field Name: Humboldt-Chanute

Producing Formation: Bartlesville

Elevation: Ground: 1000 Kelly Bushing: 1000

Total Depth: 898 Plug Back Total Depth: 874

Amount of Surface Pipe Set and Cemented at: 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 894

feet depth to: 0 w/ 125 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 500 ppm Fluid volume: 100 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 Gantsoz Date: 05/30/2012



1082639

Operator Name: Verde Oil Company Lease Name: Campbell Well #: 6-7
 Sec. 29 Twp. 26 S. R. 20 East West County: Allen

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron Casing Collar Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Bartlesville Tucker 827' +173'
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CASING RECORD <input checked="" 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
Production	12.25	7.0	17	20	A Neat	6	None
Production	5.875	2.875	6.5	894	60/40 Poz	125	2% gel, 5% salt, 5% KolSea

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
2	827' - 849', 40 shots	250 gallons 15% HCL	827' - 849'
		200# 20/40 sand, 2800# 12/20 sand	
		125 barrels 20# gelled water	827' - 849'

TUBING RECORD:	Size: <u>1.0</u>	Set At: <u>815</u>	Packer At: <u>None</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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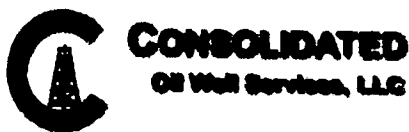
Date of First, Resumed Production, SWD or ENHR. <u>04/13/2012</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____				
Estimated Production Per 24 Hours	Oil Bbbs. <u>2.0</u>	Gas Mcf <u>0</u>	Water Bbbs. <u>52</u>	Gas-Oil Ratio <u>0</u>	Gravity <u>23</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>827' - 849'</u>
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Hodown Drilling

Yates Center, KS

Lease Name: Campbell	Spud Date: 10-27-2011	Surface Pipe Size: 7"	Depth: 20'	T.O.:898
Operator: Verde Oil Co.	Well # 6-7	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_6	soil			
6_59	lime			
59_63	black shale			
63_66	lime			
66_85	shale			
85_104	lime			
104_109	shale			
109_119	lime			
119_126	shale			
126_162	lime			
162_258	shale			
258_261	lime			
261_297	shale			
297_313	lime			
313_315	lime			
315_317	shale			
317_321	lime			
321_324	shale			
324_331	lime			
331_334	shale			
334_336	lime			
336_354	shale			
354_357	lime			
357_421	shale			
421_425	lime			
425_432	shale			
432_438	lime			
438_441	shale			
441_446	lime			
446_485	shale			
485_497	lime			
497_510	shale			
510_514	lime			
514_803	shale			
803_810	brown sand			
810_821	sandy shale			
821_850	oil sand			
850_865	darker oil sand			
865_870	sandy shale			
870_898	shale			
	898 TD			



ENTERED

TICKET NUMBER 33409

LOCATION Gureka

FOREMAN Steve Reed

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
11-17-11	8520	Cambell # 6-7	29	26S	20E	Allen
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						
Savannah			445 Dave			
KS			515 Colin			
66722			452/767 Jim			

JOB TYPE Long string HOLE SIZE 5 1/4 HOLE DEPTH 898' CASING SIZE & WEIGHT _____
 CASING DEPTH 894' DRILL PIPE _____ TUBING 2 3/8 OTHER _____
 SLURRY WEIGHT 125# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING _____
 DISPLACEMENT 5.1 bbls DISPLACEMENT PSI 500# ~~Rate~~ Bump plug 1000# RATE _____

REMARKS: Safety meeting: Rig up to 2 3/8 tubing with wash head. Break circulation with fresh water. Wash down 1 joint tubing. - Mix 300# Gel flush. Circulate Gel all way around tubing. Mix 125 sks 60/40 po2 mix Cement w/ 5# Kal Seal, 5% salt & 2% Gel AT 13.5#/gal. Shut down. Wash out pump & lines. Put in latch down plug. Displace 5.1 bbls fresh water. Final pumping pressure 500# Bump plug 1000#. Wait 2 min release pressure. Plug held. Good cement return to surface.
Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	70	MILEAGE	4.00	280.00
1131	125 sks	60/40 po2 mix Cement	11.95	1493.75
1107	625 #	Kal-Seal 5# per /sk	.44	275.00
1118B	215 #	Gel 2%	.20	43.00
1111	300 #	Salt 5%	.35	105.00
5407A	5.38 Tons	Ton mileage Bulk Truck	1.26	474.52
5501C	6 hrs	Water Transport	112.00	672.00
1183	3000 gallon	CITY WATER	15.62/casn	46.80
87118B	300 #	Gel flush	.20	60.00
			Sub Total	4,425.07
			7.55%	SALES TAX 152.78
			ESTIMATED TOTAL	4577.85

Rev'n 3737
 AUTHORIZATION By Jeff Dale

246031

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.