



KANSAS CORPORATION COMMISSION 1082636  
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>11/10/2011</u>	<u>11/10/2011</u>	<u>4/11/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30272-00-00

Spot Description:  
SE NW SE Sec. 29 Twp. 26 S. R. 20  East  West  
1650 Feet from  North /  South Line of Section  
1650 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW

County: Allen  
Lease Name: Campbell Well #: I-65-95

Field Name: Humboldt-Chanute

Producing Formation: Bartlesville

Elevation: Ground: 1006 Kelly Bushing: 1006

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: 895

feet depth to: 0 w/ 140 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 Garriso Date: 05/30/2012



1082636

Operator Name: Verde Oil Company Lease Name: Campbell Well #: I-65-95  
 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 808' +198'
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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
Surface	12.25	7.0	17.0	20	A Neat	6	None
Production	5.875	2.875	6.5	895	60/40 Poz	140	2% gel, 5% salt, 5% KolSea

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	-			
	-			

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	808' - 846', 76 shots	250 gallons 15% HCl	808' - 846'
		200# 20/40 sand, 1000# 12/20 sand	
		85 barrels 20# gelled water	808' - 846'

TUBING RECORD: <u>NA</u>	Size: <u> </u> Set At: <u> </u> Packer At: <u> </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> </u>	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>EOR well</u>
Estimated Production Per 24 Hours	Oil Bbls. <u> </u> Gas Mcf <u> </u> Water Bbls. <u> </u> Gas-Oil Ratio <u> </u> Gravity <u> </u>

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) <u> </u>	PRODUCTION INTERVAL: <u>808' - 846'</u>
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Hodown Drilling

Yates Center, KS

Lease Name: Campbell	Spud Date: 11-10-2011	Surface Pipe Size: 7"	Depth: 20'	T.D.:898
Operator: Verde Oil Co.	Well # I-65-95	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_4	soil			
4_56	lime			
56_65	black shale			
65_68	lime			
68_83	shale			
83_97	lime			
97_106	shale			
106_112	lime			
112_117	shale			
117_160	lime			
160_255	shale			
255_259	lime			
259_294	shale			
294_297	lime			
297_313	shale			
313_329	lime			
329_331	shale			
331_334	lime			
334_413	shale			
413_416	lime			
416_425	shale			
425_436	lime			
436_439	shale			
439_444	lime			
444_485	shale			
485_498	lime			
498_509	shale			
509_513	lime			
513_666	shale			
666_668	1st cap			
668_710	shale			
710_712	lime			
712_720	shale			
720_732	sand			
732_802	shale			
802_816	light colored sand/ no oil			
816_843	oil sand			
843_853	black oil sand			
853_863	sandy shale			
863_898	shale			
898	TD			



**CONSOLIDATED**  
Oil Well Services, LLC

**ENTERED**

TICKET NUMBER 33461

LOCATION EUREKA

FOREMAN Kevin McCoy

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

**FIELD TICKET & TREATMENT REPORT**

**CEMENT API #15-001-30272**

**Ks**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
12-9-11	8520	Cambell I-65-95	29	26s	20E	Allen																
CUSTOMER Verde Oil Company			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>445</td> <td>Dave G.</td> <td></td> <td></td> </tr> <tr> <td>479</td> <td>Merk R.</td> <td></td> <td></td> </tr> <tr> <td>452 T63</td> <td>John G.</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	445	Dave G.			479	Merk R.			452 T63	John G.		
TRUCK #	DRIVER	TRUCK #					DRIVER															
445	Dave G.																					
479	Merk R.																					
452 T63	John G.																					
MAILING ADDRESS 3345 ARIZONA Rd																						
CITY SAVANBURG																						
STATE KS																						
ZIP CODE 66722																						

JOB TYPE Longstain HOLE SIZE 5 7/8 HOLE DEPTH 899 CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE \_\_\_\_\_ TUBING 2 7/8" Set @ 895' OTHER PBTD 879'  
 SLURRY WEIGHT 14.2 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 16'  
 DISPLACEMENT 5' 86L DISPLACEMENT PSI 600 MIN PSI 1100 Bump Plug RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 2 7/8 Tbg. wash down 90' to TD of 895'. Pump 300' Gel - Flush. use Pit water to bring Gel to surface. Mixed 140 sks 60/40 Pozmix Cement w/ 5" Kol-Seal/sk 2% Gel, 5% SALT @ 14.2 gal. Shut down, wash out Pump & Lines. Stuff 2 Plugs. Displace Plugs to Seat w/ 5' 86L water. FINAL Pumping Pressure 600 PSI. Bump Plug to 1100 PSI. Shut tubing in. Good Cement Returns to Surface = 5 86L Slurry to Pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Last well of Group @ Old Price</u>	975.00	975.00
5406	70	MILEAGE <u>Ref.</u>	4.00	280.00
1131	140 sks	60/40 Pozmix Cement	11.95	1673.00
1110 A	700 *	Kol-Seal 5"/sk	.44 *	308.00
1118 B	240 *	Gel 2%	.20 *	48.00
1111	335 *	SALT 5%	.35 *	117.25
1118 B	300 *	Gel Flush	.20 *	60.00
5407 A	6.02	70 miles Bulk Delv.	1.26	530.96
5501 C	4 Hrs	Water Transport	112.00	448.00
1123	4300 gals	City water	15.60/1000	65.52
4402	2	2 7/8 Top Rubber Plugs	28.00	56.00
			Sub total	4561.73
			SALES TAX <u>2.6%</u>	115.14
			ESTIMATED TOTAL	4731.41

Rev'n 9737

THANK YOU  
# 046531 2.6%  
1.50%

AUTHORIZATION Jeff Dak TITLE Co-owner 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.