

KANSAS CORPORATION COMMISSION 1082619
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

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 #: _____

11/15/2011 11/15/2011 04/11/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-001-30271-00-00

Spot Description: _____
____ SW NW SE Sec. 29 Twp. 26 S. R. 20 ☒ East ☐ West
1650 Feet from ☐ North / ☒ South Line of Section
2310 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-65-75

Field Name: Humboldt-Chanute

Producing Formation: Bartlesville

Elevation: Ground: 998 Kelly Bushing: 998

Total Depth: 898 Plug Back Total Depth: 870

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: 893
feet depth to: 0 w/ 130 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 Gertsch Date: 05/29/2012



1082619

Operator Name: Verde Oil Company Lease Name: Campbell Well #: I-65-75
 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 <table style="width: 100%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Bartlesville Tucker</td> <td>821'</td> <td>+177'</td> </tr> </table>	Name	Top	Datum	Bartlesville Tucker	821'	+177'
Name	Top	Datum					
Bartlesville Tucker	821'	+177'					

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	20	A Neat	6	None
Production	5.875	2.875	6.5	893	60/40 Poz	130	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	821' - 851', 60 shots	250 gallons 15% HCl	821' - 851'
		100# 20/40 sand, 1000# 12/20 sand	
		85 bbl 20# gelled water	821' - 851'

TUBING RECORD: Size: <u>NA</u> Set At: <u> </u> Packer At: <u> </u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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.	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 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>821' - 851'</u>
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Hodown Drilling

Yates Center, KS

Lease Name: Campbell	Spud Date: 11/15/11	Surface Pipe Size: 7"	Depth: 20'	T.D.:898
Operator: Verde Oil Co.	Well # 1-65-75	Bit Diameter: 5 7/8"		
Footage taken	Sample type			
0_3	soil			
3_58	lime			
58_62	black shale			
62_65	lime			
65_84	shale			
84_103	lime			
103_108	shale			
108_118	lime			
118_124	shale			
124_160	lime			
160_256	shale			
256_259	lime			
259_293	shale			
293_296	lime			
296_314	shale			
314_317	lime			
317_325	shale			
325_329	lime			
329_402	shale			
402_406	lime			
406_448	shale			
448_453	lime			
453_483	shale			
483_488	lime			
488_516	shale			
516_520	lime			
520_534	shale			
534_543	lime			
543_584	shale			
584_599	lime			
599_608	shale			
608_614	lime			
614_671	shale			
671_673	lime			
673_820	shale			
820_850	good oil sand			
850_870	darker oil sand			
870_898	shale			
898	TD			

CONSOLIDATED
Oil Well Services, LLC

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

FIELD TICKET & TREATMENT REPORT

TICKET NUMBER 33414
LOCATION Eureka
FOREMAN Steve Moad



ENTERED

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-23-11	8530	Cambell # T65-75				Allen
CUSTOMER						
Verde Oil						
MAILING ADDRESS						
3345 Arizona Rd						
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
Savannah	GA	31612	485	Alann		
			611	Chris B		
			Doc York	McCoy		

JOB TYPE <u>Long String O</u>	HOLE SIZE _____	HOLE DEPTH <u>898'</u>	CASING SIZE & WEIGHT _____
CASING DEPTH <u>893'</u>	DRILL PIPE _____	TUBING <u>2 3/4</u>	OTHER _____
SLURRY WEIGHT <u>13.5 *</u>	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT <u>5.10 bbls</u>	DISPLACEMENT PSI <u>500*</u>	<u>Pump</u> Ramp Plug <u>1200*</u>	RATE _____
REMARKS: <u>Safety Meeting: Rig up to 2 3/4 Tubing with Wash head. Wash down</u> <u>4 Joints Tubing. Pump 300* Gel/Flush. Bring Gel all way Round. MIX</u> <u>130 sks Lw/40 Poz mix w/ 5" Gel Seal, 5% Salt & 2% Gel AT 13.5/gal. Shut</u> <u>down washout pump & lines. Put in Latchdown plug. Displace with 5.10</u> <u>bbls Freshwater. Final pumping Pressure 500* Ramp Plug 1200* wait 2 min.</u> <u>Release pressure Plug held. Good Cement Returns to Surface. 5 bbl slurry to</u> <u>R.P. Job complete Rig down</u>			

Thank you

[illegible]

Revin 3737

AUTHORIZATION

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.