



KANSAS CORPORATION COMMISSION 1090762
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 # 33905
Name: Royal Drilling Inc
Address 1: Reagan Sand
Address 2: 3172
City: -1499 State: KS Zip: 67665 +
Contact Person: John Driscoll
Phone: (785) 483-9580
CONTRACTOR: License # 33905
Name: Royal Drilling Inc
Wellsite Geologist: Jim Musgrove
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 #: _____

<u>7/26/2012</u>	<u>8/3/2012</u>	<u>08/29/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-167-23814-00-00

Spot Description: _____
SE SW NW NE Sec. 31 Twp. 14 S. R. 12 East West
1130 Feet from North / South Line of Section
2130 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Russell
Lease Name: Smoky Hill Unit Well #: 38
Field Name: _____

Producing Formation: Gorham Sand
Elevation: Ground: 1666 Kelly Bushing: 1673
Total Depth: 3305 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 623 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: 51000 ppm Fluid volume: 700 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 Gattisor Date: 10/16/2012



1090762

Operator Name: Royal Drilling Inc Lease Name: Smoky Hill Unit Well #: 38
 Sec. 31 Twp. 14 S. R. 12 East West County: Russell

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 checked="" type="checkbox"/> Yes <input 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: RAG w/DIL, CDL/CNL & MEL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
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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	8.625	23	623	Common	350	3% CC, 2% Gel.
Production	7.875	5.5	17	3225	60/40 Poz.	300	2% Gel, 10% Salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" 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 <i>(Amount and Kind of Material Used)</i>	Depth
4	3106-10		

TUBING RECORD: Size: <u>2.5</u> Set At: <u>3120</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>9/04/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>10</u>	Gas Mcf 	Water Bbls. <u>500</u> 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Royal Drilling Inc
Well Name	Smoky Hill Unit 38
Doc ID	1090762

Tops

Name	Top	Datum
Anhydrite	617	+1056
Base Anhydrite	647	+1026
Heebner	2727	-1054
Toronto	2755	-1082
Douglas	2770	-1097
Lansing	2817	-1144
Base Kansas City	3087	-1414
Gorham Sand	3106	-1433
Reworked Arbuckle	3117	-1444
Solid Arbuckle	3131	-1458
Reagan Sand	3172	-1499
Granite Wood	3267	-1594
Granite	3302	-1629

ALLIED OIL & GAS SERVICES, LLC 056183

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>8-3-12</u>	SEC <u>31</u>	TWP <u>14</u>	RANGE <u>12</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30</u>	JOB FINISH <u>1:30</u>
LEASE <u>Smoky Hill</u>	WELL # <u>38</u>	LOCATION <u>Bunker Hill south of road end</u>			COUNTY <u>Russell</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>1E 1N 1W single</u>			

CONTRACTOR Royal Drilling #2

TYPE OF JOB log string

HOLE SIZE 7 7/8 T.D. 3365

CASING SIZE 3 1/2 17# DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 15.65

CEMENT LEFT IN CSG. 1545

PERFS.

DISPLACEMENT 7 1/2

OWNER

CEMENT

AMOUNT ORDERED 150 1/2 x 60/40

	<u>150 1/2 x 107.5ft</u>	<u>27.60</u>	
COMMON	<u>240</u>	@ <u>16.25</u>	<u>3900.00</u>
POZMIX	<u>60</u>	@ <u>8.90</u>	<u>534.00</u>
GEL	<u>3</u>	@ <u>21.25</u>	<u>63.75</u>
CHLORIDE		@	
ASC		@	
<u>gent</u>	<u>16</u>	@ <u>23.95</u>	<u>383.20</u>
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>319</u>	@ <u>2.25</u>	<u>717.75</u>
MILEAGE	<u>4705</u>	<u>11.40/mile</u>	<u>53633.80</u>
TOTAL			<u>61112.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER tony

419 HELPER tony

BULK TRUCK DRIVER keven

414

BULK TRUCK DRIVER tony

461

REMARKS:

log 14 x 5 1/2 17# PA 200 x 5 1/2 13
back 2, 22, 30, standard circulation
mix 30 x 15 1/2 15 1/2
105 x 10 1/2 15 1/2 15 1/2 15 1/2
105 x 10 1/2 15 1/2 15 1/2 15 1/2
105 x 10 1/2 15 1/2 15 1/2 15 1/2
105 x 10 1/2 15 1/2 15 1/2 15 1/2
105 x 10 1/2 15 1/2 15 1/2 15 1/2

Thanks!

CHARGE TO: Royal Drilling

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>2325.00</u>
EXTRA FOOTAGE	@		
MILEAGE <u>MLHV 15</u>	@ <u>7.00</u>		<u>105.00</u>
MANIFOLD	@		
<u>MLHV 15</u>	@ <u>4.00</u>		<u>60.00</u>
<u>EMHO</u>	@ <u>240.00</u>		<u>3600.00</u>
TOTAL			<u>2390.00</u>

PLUG & FLOAT EQUIPMENT

<u>5/8 Guide shoe</u>	@		<u>16.00</u>
<u>AEU insert</u>	@		<u>200.00</u>
<u>3 cementizers</u>	@ <u>34</u>		<u>102.00</u>
<u>2 2.1.1.22</u>	@ <u>27</u>		<u>54.00</u>