



KANSAS CORPORATION COMMISSION 1104242  
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: Jeff Dale  
Phone: ( 210 ) 828-7852  
CONTRACTOR: License # 5675  
Name: McPherson, Ron dba McPherson Drilling  
Wellsite Geologist: Jeff Dale  
Purchaser: Coffeyville Resources

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW
- 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>06/29/2012</u>	<u>07/5/2012</u>	<u>10/25/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-001-30476-00-00

Spot Description: \_\_\_\_\_  
W2\_E2\_W2\_SE Sec. 29 Twp. 26 S. R. 20  East  West

1320 Feet from  North /  South Line of Section

1815 Feet from  East /  West Line of Section

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

County: Allen

Lease Name: Campbell Well #: 1-7-9

Field Name: Humboldt-Chanute

Producing Formation: Bartlesville

Elevation: Ground: 1007 Kelly Bushing: 1007

Total Depth: 910 Plug Back Total Depth: 886

Amount of Surface Pipe Set and Cemented at: 22 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 906  
feet depth to: 0 w/ 130 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 100 ppm Fluid volume: 50 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: 12/13/2012



1104242

Operator Name: Verde Oil Company Lease Name: Campbell Well #: I-7-9  
 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	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Bartlesville</td> <td>808'</td> <td>+199'</td> </tr> </table>	Name	Top	Datum	Bartlesville	808'	+199'
Name	Top	Datum					
Bartlesville	808'	+199'					

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	9.875	7.0	23.0	22	A Neat	4	None
Production	5.75	2.875	6.5	906	60/40 Poz	130	5#/sx Kol-Seal, 5% salt, 2% ge

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	808' - 863', 80 shots	250 gallons 15% HCl, 200# 16/30	808' - 863'
		sand, 1000# 12/20 sand, 88 bbl	
		20# gelled water	

TUBING RECORD: Size: <u>NA</u> Set At: <u>NA</u> Packer At: <u>NA</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>10/25/2012</u>	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>ENHR</u>	
Estimated Production Per 24 Hours	Oil Bbls. <u>0</u> Gas Mcf <u>0</u> Water Bbls. <u>0</u> Gas-Oil Ratio <u>0</u> Gravity <u>0</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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>808' - 863'</u>
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**CONSOLIDATED**  
Oil Well Services, LLC

ENTERED

TICKET NUMBER 34878 ✓  
LOCATION Eureka  
FOREMAN Steve Neal

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
7-6-12	8520	Campbell J #7-9	29	26s	20E	Allen
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
CITY			DRIVER			

JOB TYPE Longstring 0 HOLE SIZE 5 3/4 HOLE DEPTH 910' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 907 DRILL PIPE \_\_\_\_\_ TUBING 2 3/8 OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 5 3/4 DISPLACEMENT PSI 500\* Bump plug 1200\* RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 2 3/8 tubing. Break circulation with 15 bbls Fresh Water. Pump 300\* Gel Flush, 15 bbls Water Spacer. Mix 170 sks 60/40 Poz mix Cement w/ 5" Kal Seal, 5% Salt & 2% Gel at 12.5% gal. Wash out pumps & lines. Put in latch down plug. Displace with 5.4 bbls Fresh water. Final pumping Pressure 500\* Bump Plug 1200\*. Release Pressure. Plug held. Good Cement Return to surface 5 bbl slurry to PT. Job complete Rig down

*Thank you*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	70	MILEAGE	4.00	280.00
1131	170 sks	60/40 Poz mix Cement	12.55	1631.50
1110A	250*	Kal Seal 5" per/sk	.46	115.00
1118B	225*	Gel 2%	.21	47.25
1111	310*	Salt 5%	.37	114.70
1118B	300*	Gel Flush	.21	63.00
5407A	5.59	Tan Mileage Bulk Truck	1.34	524.34
5502C	3 hrs	80 bbl Vacuum Truck	90.00	270.00
1123	3050 gallons	CITY WATER	16.59/1000	49.50
			Sub Total	4125.29
			SALES TAX	152.09
			ESTIMATED TOTAL	4277.38

Revin 3737

251082

AUTHORIZATION [Signature] 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.