



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1095027

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 # 34697
Name: Wilson County Holdings LLC
Address 1: 111 CONGRESS AVE, STE 400
Address 2: _____
City: AUSTIN State: TX Zip: 78701 + _____
Contact Person: Don Missey
Phone: (303) 884-3203
CONTRACTOR: License # 34710
Name: Major Drilling Environmental, LLC
Wellsite Geologist: Larry Nicholson
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.): Stratigraphic Coring

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 #: _____

04/09/2012 05/07/2012 05/08/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-205-28008-00-00
Spot Description: Pierpoint East NESWSWSW
NE SW SW Sec. 1 Twp. 28 S. R. 14 ☒ East ☐ West
990 Feet from ☐ North / ☒ South Line of Section
990 Feet from ☐ East / ☒ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☒ SW
County: Wilson
Lease Name: Pierpoint Farms Lease Well #: 41
Field Name: Fredonia
Producing Formation: Bartlesville
Elevation: Ground: 880 Kelly Bushing: 881
Total Depth: 1200 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 40 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: 0 ppm Fluid volume: 40 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: 01/14/2013

1095027

Operator Name: Wilson County Holdings LLC Lease Name: Pierpoint Farms Lease Well #: 41
 Sec. 1 Twp. 28 S. R. 14 ☒ East ☐ West County: Wilson

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Name Attached Top Attached Datum Attached </div>
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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
casing	8	6	12	40	Type II	20	0

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

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.			Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		
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 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 (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Wilson County Holdings LLC
Well Name	Pierpoint Farms Lease 41
Doc ID	1095027

Tops

Sand	260	
Coal	267	
KC Limestone	334	
Sand dull	448	
Lenapah Lime	600	
Altamont Lime	636	
Weiser Sand	652	
Shale Sand 50%	660	
Pawnee Lime	749	
Peru Sand	798	
Oswego Lime	807	
Summit Gas Bubbles	824	
Mulkey Coal	840	
Bevier Coal	898	
Verdigris Lime	912	
Crowberg	920	
Fleming Coal	960	
Mineral 0	981	
Sandy Shale	1030	
Bartlesville Sand	1055	
Sandy Shale	1060	
Mississippi	1153	
TD	1162	



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

December 04, 2012

WILSON COUNTY HOLDINGS LLC
111 CONGRESS AVE. STE 400
AUSTIN, TX 78701

FINAL NOTICE OF VIOLATION

RE: API Well No. 15-205-28008-00-00
PIERPOINT FARMS LEASE 41
NESWSW, 1-28S-14E
WILSON County, Kansas

Dear Operator:

Technical review of the above referenced well shows that the well information is incomplete. The following documentation has not been received, and a first letter notice was sent to you on September 27, 2012. To date, we have not received the following information:

- | | |
|--|---|
| <input checked="" type="checkbox"/> All drilling and completion information. No ACO-1 has been received as of this date. | <input type="checkbox"/> ID and Completion date (Month, Day, Year) |
| <input type="checkbox"/> Must be notarized and signed. | <input type="checkbox"/> Must have Footages from nearest outside corner of section. |
| <input type="checkbox"/> Must have the ORIGINAL HARD COPY of ACO-1. | <input type="checkbox"/> Side two on back of ACO-1 must be filled out. |
| <input type="checkbox"/> We do not accept fax copies. | <input type="checkbox"/> Must have final copies of DST's/Charts. |
| <input type="checkbox"/> Must be put on new form and typed. | <input type="checkbox"/> All original complete open and cased hole wireline logs run. |
| <input type="checkbox"/> API # or date when original well was first drilled. | <input type="checkbox"/> A copy of geological reports compiled by wellsite geologist. |
| <input type="checkbox"/> Contractor License # | <input type="checkbox"/> A copy of all cement job logs showing type, amounts and additives used to cement casing strings, squeeze and/or to plug and abandon. (Note: Cement tickets must be from company providing the cement, not necessarily the contractor.) |
| <input type="checkbox"/> Designate type of Well Completion. | <input type="checkbox"/> Any commingling information: File on the ACO-4 form. |
| <input type="checkbox"/> If Workover/Re-entry, need old well information, including original completion date. | <input type="checkbox"/> Anything HIGHLIGHTED on ACO-1. |
| <input type="checkbox"/> Spud date. (Month, Day, Year) | |
| <input type="checkbox"/> Other: | |

This requested information must be submitted for processing as stated under K.A.R. 82-3-107(d), and K.A.R. 82-3-130 of the General Rules and Regulations for the State of Kansas. Failure to submit the requested information by December 18, 2012, shall be punishable by a \$500.00 per well administrative penalty. PLEASE RETURN THIS FORM AND ANY ENCLOSURES WITH YOUR REPLY.

Please contact me at (316) 337-6200 if you have any questions.

Sincerely,

Deanna Garrison

DEANNA GARRISON
Production Department

P 14/15



CONSOLIDATED
On Vail Services, LLC

ENTERED

TICKET NUMBER 34630

LOCATION Eureka

FOREMAN Steve Marshall

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-457-8676

FIELD TICKET & TREATMENT REPORT

CEMENT APT 15-705-28008

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-10-78	89816	Pinepoint Farms Lease #41	6	28S	14E	Wilson
CUSTOMER						
Wilson County Holding LLC						
MAILING ADDRESS						
111 Campbell Ave Ste 400						
CITY	STATE	ZIP CODE	TRUCK #	DRIVER	TRUCK #	DRIVER
Austin	TX	78701	485	Blum		
			479	Mark		

JOB TYPE <u>PSA</u>	HOLE SIZE _____	HOLE DEPTH _____	CASING SIZE & WEIGHT _____
CASING DEPTH _____	DRILL PIPE _____	TUBING <u>1" 1900'</u>	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Safety meeting. Rig up to 1" tubing. Break circulation with Fresh water.
Mix 105 sacks 60/40 port mix cement w/ 4% GEL. 1200' to surface.
Pull out 1" tubing. Tap well off.
Job complete. Rig down.

Note Pulled out 1' of 1" tubing Top well off & when all tubing was out Top off well

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5403A	1	PUMP CHARGE	695	695.00
5406	M/L	MILEAGE 2 nd well	-	-
1131	105 SKS	6 1/4" Port mix Cement	12.53	1317.75
1118/3	360	6 1/4" 4%	.21	75.60
5402		Ton mileage Bulk Trucks	m/L	350.00
		2497.25	6.3%	
			Sub Total	2472.35
			SALES TAX	87.78
			ESTIMATED TOTAL	2560.13

Austin P. T. T. Inc. Lin D. - L.

Bayo 3737

AUTHORIZATION

TIT/ E

DAT

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.