



KANSAS CORPORATION COMMISSION 1109661
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 # 34458
Name: Long and Ware Oil, a General Partnership
Address 1: PO BOX 554
Address 2: _____
City: WYNONA State: OK Zip: 74084 + _____
Contact Person: John Long
Phone: (918) 698-8080
CONTRACTOR: License # 34458
Name: Long and Ware Oil, a General Partnership
Wellsite Geologist: Chris Henderson
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 #: _____
6/20/2012 6/21/2012 6/22/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-019-27176-00-00
Spot Description: _____
NW SW SW SE Sec. 18 Twp. 34 S. R. 12 East West
500 Feet from North / South Line of Section
2360 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Chautauqua
Lease Name: Von Merveldt Well #: 6
Field Name: _____
Producing Formation: Weiser
Elevation: Ground: 840 Kelly Bushing: 0
Total Depth: 1053 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: 160 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Chris Henderson
Lease Name: Rising L License #: 34576
Quarter SW Sec. 8 Twp. 34 S. R. 13 East West
County: Chautauqua Permit #: unknown

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 Gamson Date: 01/24/2013



1109661

Operator Name: Long and Ware Oil, a General Partnership Lease Name: Von Merveldt Well #: 6
 Sec. 18 Twp. 34 S. R. 12 East West County: Chautauqua

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: Attached	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum n/a
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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	28	40	Portland	10	
Production	6.75	4.5	9.5	1043	Portland	110	

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	3 1/8" Slick Tag Gun		

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	Long and Ware Oil, a General Partnership
Well Name	Von Merveldt 6
Doc ID	1109661

All Electric Logs Run


Gamma Ray
Radial Bond
Casing Collar
Variable Density Log

6/22/2012

#250757



2550000219

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Long and Ware/Arbuckle enr.	State/County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	longstring	Section		Excess (%)	30
Customer/Acct #	4814	TWP		Density	13.7
Well No	VonMervaldt #6	RGE		Water Required	
Mailing Address		Formation		Yield	1.75
City & State		Hole Size	6 3/4	Slurry Weight	
Zip Code		Hole Depth		Slurry Volume	
Contact		Casing Size	4 1/2 INCH	Displacement	16
Email		Casing Depth	1043	Displacement PSI	
Cell		Drill Pipe		MIX PSI	
Dispatch Location	BARTLESVILLE	Tubing		Rate	
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	40	PER MILE	\$4.00	\$ 160.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0		0		\$0.00	\$
0		0		\$0.00	\$
0		0		\$0.00	\$
0		0		\$0.00	\$
0		0		\$0.00	\$
5402	FOOTAGE		PER-FOOT	0.22	\$
EQUIPMENT TOTAL					\$ 1,640.00
Cement, Chemicals and Water					
1126A	THICK NET CEMENT (6LB DWC 4% GEL 7% CAL. CHLORIDE)	110	0	\$19.20	\$ 2,112.00
1107A	PHENOSEAL	40	0	\$1.20	\$ 51.60
1110A	KOL SEAL (50# 616)	550	0	\$0.46	\$ 253.00
1118B	PREMIUM GEL/CANTONITE (50#)	200	0	\$0.21	\$ 42.00
1123	CITY WATER (PER 1000 GAL.)	5	0	\$16.60	\$ 82.50
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
CHEMICAL TOTAL					\$ 2,541.10
Water Transport					
5401C	WATER TRANSPORT (CEMENT)	3	TER TRANSPORT (CEME	\$112.00	\$ 336.00
0		0	0	\$0.00	\$
0		0	0	\$0.00	\$
TRANSPORT TOTAL					\$ 336.00
Cement Floating Equipment (TAXABLE)					
0	Cement Basket		0	\$0.00	\$
0	Centralizer		0	\$0.00	\$
0			0	\$0.00	\$
0	Float Shoe		0	\$0.00	\$
0	Float Collars		0	\$0.00	\$
0	Guide Shoes		0	\$0.00	\$
0	Baffle and Flapper Plates		0	\$0.00	\$
0	Packer Shoes		0	\$0.00	\$
0	DV Tools		0	\$0.00	\$
0	Ball Valves, Swedges, Clamps, Misc.		0	\$0.00	\$
0			0	\$0.00	\$
0			0	\$0.00	\$
4404	Plugs and Ball Seaters		0	\$0.00	\$
	4 1/2 RUBBER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0	Downhole Tools		0	\$0.00	\$
CEMENT FLOATING EQUIPMENT TOTAL					\$ 45.00
TRUCKS:				SUB TOTAL	\$ 4,462.10
DRIVER NAME				0.30% SALES TAX	\$ 13.39
492 Jake				TOTAL	\$ 4,675.49
518 James G				10% (-DISCOUNT)	\$ 467.67
number of				DISCOUNTED TOTAL	\$ 4,207.82

AUTHORIZATION DATE

TITLE FOREMAN

I ACKNOWLEDGE THAT THE PAYMENT TERMS, CONDITIONS SPECIFICALLY AGREED TO IN WRITING ON THE FRONT OF THE FORM OR IN MY CUSTOMER'S ACCOUNT RECORDS, AT OUR OFFICE.