



KANSAS CORPORATION COMMISSION 1110017  
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 # 34576  
Name: Henderson, Chris  
Address 1: PO BOX 1477  
Address 2: \_\_\_\_\_  
City: PAWHUSKA State: OK Zip: 74056 + \_\_\_\_\_  
Contact Person: Chris Henderson  
Phone: ( 918 ) 287-2300  
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       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 #: \_\_\_\_\_  
1/14/2012      1/15/2012      1/16/2012  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date           Recompletion Date

API No. 15 - 15-019-27133-00-00  
Spot Description: \_\_\_\_\_  
SW NE NE NE Sec. 18 Twp. 34 S. R. 13  East  West  
4920 Feet from  North /  South Line of Section  
495 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE       NW       SE       SW  
County: Chautauqua  
Lease Name: Rising L Well #: 14  
Field Name: \_\_\_\_\_  
Producing Formation: Redd Sand  
Elevation: Ground: 755 Kelly Bushing: 0  
Total Depth: 937 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 45 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 45  
feet depth to: 0 w/ 50 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 120 bbls  
Dewatering method used: Hauled to Disposal  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Chris Henderson  
Lease Name: Thome License #: 34576  
Quarter NE Sec. 18 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 Gantson Date: 01/28/2013



1110017

Operator Name: Henderson, Chris Lease Name: Rising L Well #: 14  
 Sec. 18 Twp. 34 S. R. 13  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:  Gamma Ray, Neutron, Bond Log	<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	8.75	7	16	45	Portland	50	
Production	6.25	2.875	6	711	Portland	100	

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	2" DML RTG Gun		616-630

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 Bbfs.	Gas Mcf	Water Bbfs. 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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**CONSOLIDATED**  
Oil Well Services, L.L.C.

#2117189

TICKET NUMBER 32366

LOCATION Boothsville, OK

FOREMAN Kirk Sanders

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
1-16-13	3498	Rising 1 # 14	18	34	13	CGO
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address <u>Chris Henderson</u>			398	John D.		
CITY			538	Byron J.		
STATE			546 780	Dusty F.		
ZIP CODE						

JOB TYPE L5 HOLE SIZE 6 1/4 HOLE DEPTH 937' CASING SIZE & WEIGHT 2 7/8  
 CASING DEPTH 711.45 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.8 SLURRY VOL 1.75 WATER gal/ok \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 4.1 DISPLACEMENT PSI 300 MIX PSI 200 RATE 4bpm

REMARKS: Can get 100% to set circ, ran 100% of thick set cement. Ejected pump & lines, dropped plug & disp. to set. Shut in & started up.

Plug held  
circ cement to set

*[Handwritten signature]*  
JCS

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		10.50 <sup>00</sup>
5406	40	MILEAGE		11.00 <sup>00</sup>
5407	1	Ball Job		7.50 <sup>00</sup>
5402	711'	Footage		1.36 <sup>42</sup>
5501C	2.5 hrs	Transport		2.80 <sup>00</sup>
1126A	100% <sup>00</sup>	Thick Set Cement	#	1,920 <sup>00</sup>
1107A	40 <sup>00</sup>	Phone Seal	#	51.00
1108A	500 <sup>00</sup>	Kel Seal	#	230.00
1118B	150 <sup>00</sup>	Premium Gel	#	31.50
1123	2940 gal	City Water	#	48.51
4402	1	2 1/2 Rubber Plug	#	28.00
<u>10% Disc Price \$40.79<sup>75</sup></u>				
				8.3% <sup>00</sup>
				SALES TAX ESTIMATED TOTAL
				191.71
				4,477.72

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



**CONSOLIDATED**  
Oil Well Services, L.L.C.

#277111

TICKET NUMBER 35660  
LOCATION Boothville  
FOREMAN Jason Bell

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
1-14-12	3493	Russing L #14	18	B4	13	CO
CUSTOMER Chris Henderson			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			492	John		
CITY			551	Jason W		
STATE			Normaly TP			
ZIP CODE						

JOB TYPE Surf HOLE SIZE 8 3/4 HOLE DEPTH \_\_\_\_\_ CASING SIZE & WEIGHT 7  
 CASING DEPTH 0.75 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.5 SLURRY VOL \_\_\_\_\_ WATER gal/wk \_\_\_\_\_ CEMENT LEFT IN CASING \_\_\_\_\_  
 DISPLACEMENT 1.2 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Tried to wash pipe with water. Ran 350 gal surf established circulation on 50 lbs Class A 370 cement cement. Displaced 1.2 bbls Riga valve wouldnt close stuck pipe on bottom told me to unhook.

-Cement circulated to surface-

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		825.00
54020	33	MILEAGE		132.00
54021	1	bullet truck		350.00
54022	45	passage		9.90
55016	3 hrs	transpnt		3360.00
11045	50 sacks	Class A		742.50
11074	40 ft	Pheno		51.00
1107	150 ft	Gel		111.00
1118b	150 ft	Gel		25.20
1123	2520 gal	City Water		41.58
10% discount if paid in 30 days = 272.06				
<b>2439.74</b>				
			9.3%	SALES TAX
				ESTIMATED
				TOTAL

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.