3/27/14

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
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 # 34574

Name: Shell Gulf of Mexico Inc. (CONDUCTOR ONLY)

Address 1: 150 N DAIRY ASHFORD (77079)

Address 2: PO BOX 576 (77001-0576)

City: HOUSTON   State: TX   Zip: 77001 + 0576

Contact Person: DAMONICA PIERSON

Phone: (832) 337-2172

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: CONDUCTOR ONLY

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: CONDUCTOR ONLY

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 #: _____

3/9/2012   3/9/2012
Spud Date or   Date Reached TD   Completion Date or
Recompletion Date   Recompletion Date

API No. 15 - 15-007-23783-00-00

Spot Description: _____

E2 SE SE W2 Sec. 18 Twp. 35 S. R. 10 [ ] East [✓] West

330 Feet from [ ] North / [✓] South Line of Section

2,799 Feet from [ ] East / [✓] West Line of Section

Footages Calculated from Nearest Outside Section Corner:

[ ] NE   [ ] NW   [ ] SE   [ ] SW

County: BARBER

Lease Name: WATKINS & FARNEY 3510   Well #: 18-1

Field Name: WILDCAT

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: CONDUCTOR ONLY

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? [ ] Yes [ ] No

If yes, show depth set: CONDUCTOR ONLY _____ 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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: CONDUCTOR ONLY

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter ___ Sec. ___ Twp. ___ S. R. ___ [ ] East [ ] West

Permit #: _____

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MAR 27 2014

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APR 02 2012

KCC WICHITA

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Richard W Lewis

Title: Team Lead   Date: 3-28-2012

KCC Office Use ONLY

[✓] Letter of Confidentiality Received
   Date: 3-27-13 to 3-27-14
[ ] Confidential Release Date: _____
[ ] Wireline Log Received
[ ] Geologist Report Received
[✓] UIC Distribution
ALT [✓] I [ ] II [ ] III Approved by: W Date: 4-3-12

Operator Name: __Shell Gulf of Mexico Inc. (CONDUCTOR ONLY)__ Lease Name: __WATKINS & FARNEY 3510__ Well #: __18-1__

Sec. __18__ Twp. __35__ S. R. __10__ ☐ East ☑ West   County: __BARBER__

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No		☐ Log Formation (Top), Depth and Datum ☐ Sample
(Attach Additional Sheets)		
Samples Sent to Geological Survey ☐ Yes ☐ No		Name Top Datum
Cores Taken ☐ Yes ☐ No		CONDUCTOR ONLY
Electric Log Run ☐ Yes ☐ No		
Electric Log Submitted Electronically ☐ Yes ☐ No		
(If no, Submit Copy)		

List All E. Logs Run:

CONDUCTOR ONLY

CASING RECORD ☐ New ☐ 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
CONDUCTOR	26"	18"	47.44	62'	Type 1/2 Portland Cement	8	15% FLY ASH

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing		CONDUCTOR ONLY		
___ 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
	CONDUCTOR ONLY		
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	MAR 27 2014		**APR 02 2012**
	KCC		**KCC WICHITA**

TUBING RECORD: Size: Set At: Packer At: Liner Run: ☐ Yes ☐ No

Date of First, Resumed Production, SWD or ENHR.	Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
☐ Vented ☐ Sold ☐ Used on Lease *(If vented, Submit ACO-18.)*	☐ Open Hole ☐ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)* ☐ Other *(Specify)* _____	

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202