

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1106250
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1106250

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input 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

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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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

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: <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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Bach, Jason dba Bach Oil Production
Well Name	Henrietta 1
Doc ID	1106250

Tops

Name	Top	Datum
Stone Corral	1863	+421
Base Stone Corral	1885	+399
Topeka	3231	-947
Heebner	3441	-1157
Toronto	3471	-1187
LKC	3489	-1205
Muncie	3596	-1312
Stark	3659	-1375
BKC	3699	-1415

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

BACH OIL PRODUCTION

WELL: HENRIETTA #1

**LOC.: 508' FSL & 1311' FEL
SEC. 9-2-19W
PHILLIPS COUNTY, KANSAS
API: 15-147-20700-00-00**

**DRILLING CONTR.: MURFIN RIG #16
SPUD: 11-27-12 COMP: 12-1-12
MUD UP: 2850' TYPE MUD: CHEM.
DRILL TIME: 3050 to' RTD
RTD: 3720' LTD: 3718'
SAMPLES SAVED: 3100'-RTD
GEOLOGIST: ROBERT J. PETERSEN**

ELEVATION

KB: 2284
GL: 2279
LOG MEASURED
FROM: KB

SURFACE CASING

20# 8 5/8"
Casing set @ 248'
w/200 SX

PRODUCTION CASING

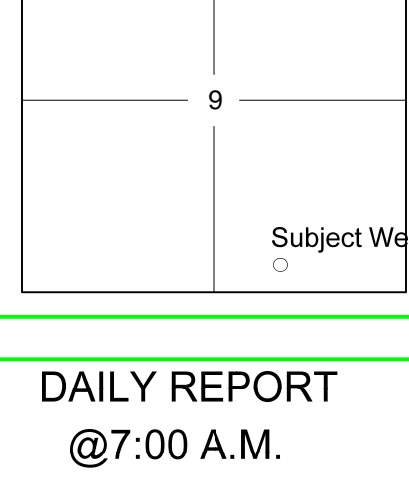
D & A

WELL LOG SURVEYS

RAG

ELECTRIC LOG TOPS

FORMATION	DEPTH	DATUM	POSITION
SC	1863	+421	+17
BSC	1885	+399	-2
TOPEKA	3231	-947	-9
HEEBNER	3441	-1157	-7
TORONTO	3471	-1187	-7
LKC	3489	-1205	-7
Muncie	3596	-1312	-6
Stark	3659	-1375	-6
BKC	3699	-1415	-7



REFERENCE WELL:

Bach
Tien #1
530' FSL & 330' FWL
15-2-19W

REMARKS AND RECOMMENDATIONS

Due to the low structural position and poor zone development this test was plugged and abandoned by the operator.

Respectfully submitted,

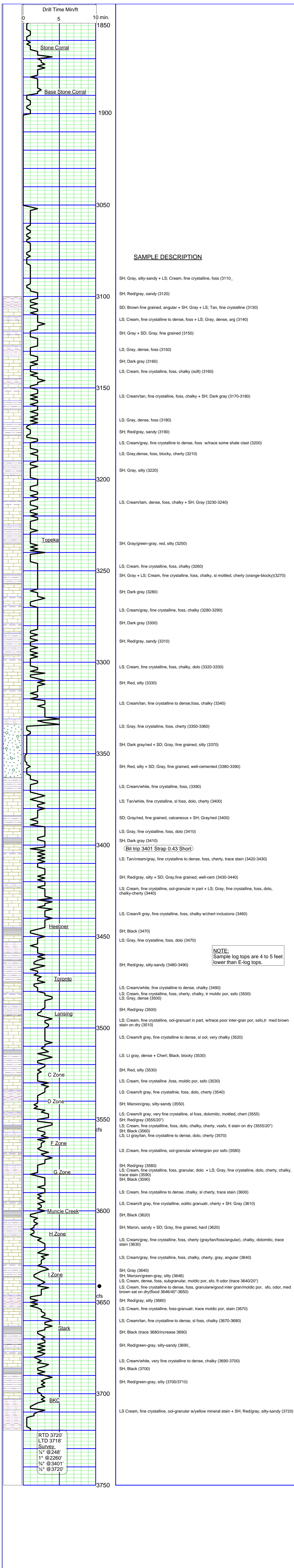
Robert J. Petersen

Robert J. Petersen

DAILY REPORT

@7:00 A.M.

11-27-12 MIRU/SPUD
11-28-12 248'
11-29-12 2215'
(rig down for repair 5 hours)
11-30-12 3040'
12-01-12 3595'



RTD 3720'
LTD 3718'
Survey
1/4" @ 248'
1" @ 2260'
3/4" @ 3401'
1/2" @ 3720'

NOTE:
Sample log tops are 4 to 5 feet lower than E-log tops.



INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 133778
Invoice Date: Nov 27, 2012
Page: 1

Voice: (817) 546-7282
Fax: (817) 246-3361



Bill To:
Bach Oil Production R. R. #1 Box 28 Phillipsburg, KS 67661

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Bach	Henrietta #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Russell	Nov 27, 2012	12/27/12

Quantity	Item	Description	Unit Price	Amount
210.00	MAT	Class A Common	17.90	3,759.00
7.00	MAT	Chloride	64.00	448.00
219.93	SER	Cubic Feet	2.48	545.42
801.85	SER	Ton Mileage	2.60	2,084.81
1.00	SER	Surface	1,512.25	1,512.25
79.00	SER	Pump Truck Mileage	7.70	608.30
79.00	SER	Light Vehicle Mileage	4.40	347.60
1.00	CEMENTER	Tony Pfannenstiel		
1.00	CEMENTER	Bobby Smith		
1.00	OPER ASSIST	Kevin Rupp		
1.00	OPER ASSIST	Walter Keith		
1.00	OPER ASSIST	Nathan Donner		

Subtotal	9,305.38
Sales Tax	286.08
Total Invoice Amount	9,591.46
Payment/Credit Applied	
TOTAL	9,591.46

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 2447.32

ONLY IF PAID ON OR BEFORE
Dec 22, 2012

ALLIED OIL & GAS SERVICES, LLC 056070

Federal Tax I.D.# 20-5975804

REMIT TO: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell, Ks

DATE 11-27-12 SEC 9 TWP 2 RANGE 19 CALLED OUT _____ ON LOCATION _____
 LEASE Harrietta WELL # 1 LOCATION Speed, Ks COUNTY Phillips STATE KS
 OLD OR NEW (Circle one) N to Hwy 36 N to Harker rd. West to 700 rd 1/2 south into

CONTRACTOR Murphy's #8 OWNER J.O.I
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. _____
 CASING SIZE 8 3/8 DEPTH 248'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

EQUIPMENT

PUMP TRUCK CEMENTER Bob S. 1
 # 409 HELPER Kevin R. 3
 BULK TRUCK DRIVER Walter K. 3
 BULK TRUCK DRIVER Nathan D. 3
 # _____ DRIVER _____

REMARKS:
 * Cemented mud to surface
 * Pump cement @ 50, 1100' with 32 gal water.
 * Displace cement @ 14.82 gal
 * Shut cement in @ 250 gal

CHARGE TO: Back Oil Productions
 STREET _____
 CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Robby Fair
 SIGNATURE Robby Fair

JOB START 1000pm JOB FINISH 1030pm
 CEMENT AMOUNT ORDERED 210 SKT CLASS A
5% CC
 COMMON 210 SKT @ 17.90 \$ 3,759.00
 POZMIX @ _____
 GEL @ _____
 CHLORIDE 7 SKT @ 64.00 \$ 448.00
 ASC @ _____
 HANDLING 219.93 @ 2.98 \$ 545.42
 MILEAGE 801.85 @ 2.60 \$ 2084.81
 TOTAL \$ 6837.23

SERVICE

DEPTH OF JOB 248'
 PUMP TRUCK CHARGE \$ 1512.25
 EXTRA FOOTAGE @ _____
 MILEAGE Heavy 79 miles @ 7.70 \$ 608.30
 MANIFOLD Light 79 miles @ 4.40 \$ 347.60
 TOTAL \$ 2468.15

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL \$ _____

SALES TAX (If Any) 286.07
 TOTAL CHARGES \$ 9305.38
 DISCOUNT \$ 2447.32 - IF PAID IN 30 DAYS
 Net 6858.06 BS 11-28
before tax



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 133872
Invoice Date: Dec 2, 2012
Page: 1



Bill To:
Bach Oil Production R. R. #1 Box 28 Phillipsburg, KS 67661

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Bach	Henrietta #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-03	Russell	Dec 2, 2012	1/1/13

Quantity	Item	Description	Unit Price	Amount
132.00	MAT	Class A Common	17.90	2,362.80
88.00	MAT	Pozmix	9.35	822.80
8.00	MAT	Gel	23.40	187.20
50.00	MAT	Flo Seal	2.97	148.50
236.67	SER	Cubic Feet	2.48	586.93
780.92	SER	Ton Mileage	2.60	2,030.38
1.00	SER	Plug to Abandon	2,249.84	2,249.84
79.00	SER	Pump Truck Mileage	7.70	608.30
79.00	SER	Light Vehicle Mileage	4.40	347.60
1.00	EQP	8.5/8 Wooden Plug	107.64	107.64
1.00	CEMENTER	Robert Yakubovich		
1.00	EQUIP OPER	Woody O'Neil		
1.00	OPER ASSIST	Walter Keith		

7100³⁴-

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$2994.39

ONLY IF PAID ON OR BEFORE
Dec 27, 2012

Subtotal	9,451.99
Sales Tax	642.74
Total Invoice Amount	10,094.73
Payment/Credit Applied	
TOTAL	10,094.73

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



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

March 18, 2013

Jason Bach
Bach, Jason dba Bach Oil Production
PO BOX 723
ALMA, NE 68920-0723

Re: ACO1
API 15-147-20700-00-00
Henrietta 1
SE/4 Sec.09-02S-19W
Phillips County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Jason Bach