

Kansas Corporation Commission Oil & Gas Conservation Division

1054336

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	County:
Name:	Lease Name: Well #:
Wellsite Geologist:	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
☐ New Well ☐ Re-Entry ☐ Workover	Total Depth: Plug Back Total Depth:
☐ Oil ☐ WSW ☐ SIOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW ☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coal Bed Methane) ☐ Cathodic ☐ Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	·
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Conv. to ENHR	Chloride content: ppm Fluid volume: bbls Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	Quarter Sec TwpS. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date Recompletion Date	

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: Date:										

Side Two



Operator Name: _ Lease Name: _ _ Well #: _ County: _ 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) Name Top Datum Samples Sent to Geological Survey ☐ Yes □ No Cores Taken Yes No Electric Log Run Electric Log Submitted Electronically Yes No (If no, Submit Copy) List All E. Logs Run: CASING RECORD Used New Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight # Sacks Type and Percent Type of Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Additives Depth Cement Used ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth TUBING RECORD: Size: Set At: Packer At: Liner Run: No Yes Producing Method: Date of First, Resumed Production, SWD or ENHR. Pumping Gas Lift Other (Explain) Flowing **Estimated Production** Bbls. Water Bbls. Gas-Oil Ratio Oil Gas Mcf Gravity Per 24 Hours **DISPOSITION OF GAS:** METHOD OF COMPLETION: PRODUCTION INTERVAL: Open Hole Dually Comp. Perf. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)



DATE

ERVICE TICKET 03459 A

TICKET NO._____

36.8	BASIC	10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124		FIELD SE 1718
_	ENERGY SERVICES	Phone 620-672-1201		
Marine Carl	PRESSURÉ PUMPING & WIRELINE		DATE	TIO://E

DATE OF \	// [DISTRICT PICT	NEW WELL	NEW WELL PROD INJ WDW CUSTOMER ORDER NO.:										
CUSTOMER (ر ب حر ^د :	1/5+	i EXPlorat	,,0,	LEAS	LEASE Grange WELL NO. 7-19								
ADDRESS					cour	COUNTY Comanche STATE 125								
CITY			STATE			SERVICE CREW Oflando, Vealch, M. Michiel								
AUTHORIZED B			JOB 1	JOB TYPE: (NW-131/8 Conductor										
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REPRESENTATIVE

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: (JAMES OF AGENT)



TREATMENT REPORT

Customer	N N Ch	(1)	Lease No.				Date						
Lease (1	Well # _	7-1-5			1) -) 😤	- 1				
Field Order #	Station	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Casing	Depth	347	County State						
Type Job	1-1-1-	134 1	J. 3.		Formation		Legal Description						
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Max Press	Max Press	From	То	Frac	;	Avg			15 Min.				
Well Connection	Annulus Vol.	From	То			HHP Use	d		Annulus Pressure				
Plug Depth	Packer Depth		То	Flush		Gas Volu	me	Total Load					
Customer Repr	esentative /	. v	Station	Manager	, , , , , , , , , , , , , , , , , , ,	-	Treater	31-00	Ο.	2.0			
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10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

FIELD SERVICE TICKET 1718 **03176** A

	PRESSUR	E PUMPII	NG & WIRELINE					DATE	TICKET NO					
DATE OF JOB / - J	3-11	DI	STRICT KANSA	1 S		NEW WELL PROD ☐ INJ ☐ WDW ☐ CUSTOMER ORDER NO.:								
CUSTOMER (Aste	11/	Exploration	N, IN	٧.	LEASE Gregg WELL NO.7-19								
ADDRESS						COUNTYCOMANCHE 19-33-BITATE KANSAS								
CITY			STATE			SERVICE CREWA. Werth, C. Vench, L. Wiser								
AUTHORIZED B						JOB TYPE:_S		4.5.			· · · · · · · · · · · · · · · · · · ·			
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THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:

all I werd FIELD SERVICE ORDER NO.

REPRESENTATIVE

SERVICE



10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201

FIELD SERVICE TICKET 1718 **03177** A

PRESSURE PUMPING & WIRELINE

TICKET NO D3176A

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

									DATE	HUKET NO	J 1		1			
DATE OF JOB	13 -	// [DISTRICT K	1 ~5,	45		WEYL 🔀 🖔	VELL F	ROD INJ	☐ WDW	□ Cl	USTOME RDER NO	:R O.:			
CUSTOMER C	zs t	elli				NC.	LEASE Gregg WELL NO.7-1									
ADDRESS			,				COUNTY COMANCHE 19-335TATE KANSAS									
CITY			STATE				SERVICE CREW A. Werth, C. Veach, L. Wiser									
AUTHORIZED B	 BY						JOB TYPE:		•							
EQUIPMENT	Γ#	HRS	EQUIPME	NT#	HRS	EQ	DISPMENT# HPS TRUCK CALLED DATE AM TH									
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FIELD SERVICE ORDER NO.



TREATMENT REPORT

Customer AS 1	tell. 1	Ex	0101	IN	c L	ease No						Date						
Lease _	ess	-			V	ven n - / G							1-23-11					
Field Order #		1						Casing	2	Depth	0/	Count	y MA	nch	e		State	
Type Job	"L,S,						<i>C</i> ,	υW	For	mation D 5	J00 1			Legal	Descr	iption 	16	
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Plug Depth	Packer De	epth	From		То		Flusi	P 2	yo K	۲۷	Gas Volu	me			To	otal Load		
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O2-15-11 Great Plains Fluid Svc set & filled w/ city water 15 – 500 bbl frac tanks, then had tanks heated. SICP – 579#. RU Basic Energy Svc frac equipment, frac well as follows: Stage #1; 56,000 gal pad, 1578# @ 80 bpm. Stage #2; 16,000 gal w/ .1# of 30/70 sand, 1608# @ 80 bpm. Stage #3; 16,000 gal w/ .2# of 30/70 sand, 1562# @ 80 bpm. Stage #4; 16,000 gal w/ .3# of 30/70 sand, 1526# @ 81 bpm. Stage #5; 24,000 gal w/ .4# of 30/70 sand, 1444# @ 81 bpm. Stage #6; 24,000 gal w/ .5# of 30/70 sand, 1400# @ 80 bpm. Stage #7; 24,000 gal w/ .6# of 30/70 sand, 1345# @ 81 bpm. Stage #8; 24,000 gal w/ .7# of 30/70 sand, 1310# @ 81 bpm. Stage #9; 24,000 gal w/ .8# of 30/70 sand, 1276# @ 80 bpm. Stage #10; 21,000 gal w/ .9# of 30/70 sand, 1257# @ 80 bpm. Stage #11; 18,000 gal w/ 1# of 16/30 sand, 1155# @ 79 bpm. Stage #12; 4,000 gal w/ 1.5# of 16/30 resin sand, 1121# @ 80 bpm. Stage #13; 3,000 gal w/ 2# of 16/30 resin sand, 1181# @ 79 bpm. Stage #14; 6,636 gal flush, 1213# @ 79 bpm. ISIP – 373#, 5 min – vac. Total load – 6749 bbl. RDMO Basic Energy Svc. SDFN