

Kansas Corporation Commission Oil & Gas Conservation Division

1065575

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 🗌 East 🗌 West	
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 ☐ SHOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW ☐ OG ☐ GSW ☐ Temp. Abd. ☐ CM (Coal Bed Methane) ☐ CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?	
Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:	
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ sx cmt.	
Operator:		
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)	
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 #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: License #: Quarter Sec Twp S. R	
Spud Date or Date Reached TD Completion Date or 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 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)

S & K Oil Production, Inc. Blue Mound, Kansas 1-193-756-2622

Lease Page Operator & K Oil Production PI # 15-0 Contractor S & K Oil Production Started 9-2-11 Completed Total Depth 1421 Well # 5 Hole Size 55/8	011- 23836-00-0
Total Depth (142) Started Tracing Completed	9.5-11
Total Depth 1+2: Well # 5 Hole Size 55/8 Surface Pipe 21' 6 1/4 Dept of Seat Nipple None Rag Packer At None Lenght And Size of Casing 137 218 Sacks of Cement 85 Legal Description Ne Nw SE SE/4 Sec. 18 TWP 25 Pages 225	
Dent of Seat Nipple Alexander Surface Bit - X 1/8 Sacks of Gement	55
Longht And Sign of Onin 120	
Local Description No May See Still Casting - 17 Sacks of Cement 85	7
Legal Description NENWSE SE14 Sec 18 TWP 25 Range 22 County	sourbon
Think David M	
1 7 9 11	mation
1 O O	
3 366 (0/1)	
I DINGE LIMIT	Streak
00 1013 Shale	
to low shale some	d
10 6 10 Jana Dru Joh	ne Shale Some
2 50 Shale 6 676 Sand Shale	Strong Odod
34 84 lime w/ Shale Streak 2 678 Oil Sand Some	Shale Good Bleed
20 104 Shale 4 682 Milsand/ittles	Shale Heavy Bleed
d 106 lime 4 1.86 0:18 and Some	Shale Fair Bleed
2 108 Black Shale 2 688 Milson Little	Shale Good Bleed
a5: 133 Shale 2 690 Band Shale	Poor Bleed
a 135 lime 4 694 Sand Shale	
109 244 Shale Willime Streak 2 696 Dry Sand Shale	Good Odor
6 250 lime 6 702 Band Shale	Good Odor
21 271 Shale & lime 4 706 Band Shale 1	
5 216 Red Bed 2 708 Sandy Shate	
12 288 Shale Limey 2 710 Oil Sand Fa	in Bleed
17 305 Sand Dry 8 718 Sand Shale	
	Sand little Show
6 341 Shale 22 742 Sandy Shale	Mila cime Grow
19 360 line 742 ID	
19 379 Dark Shale s	
1 380 lime	
20 400 Dark Shale	
5 405 Light Shale	
24 429 Lime	
5 434 Black Shale	
2 441 (ight Shale. 4 445 Shale & Sand Odor	
4 445 Shale & Sand Odor 5 450 Oil Sand Good Bleed	
1 451 Dry Sand	
36 487 Sand & Shale	
22 509 Shale	
11 São Dark Shale.	