



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1066355

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 # \_\_\_\_\_

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
- ☐ Conv. to GSW
- ☐ Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- ☐ Commingled      Permit #: \_\_\_\_\_
- ☐ Dual Completion      Permit #: \_\_\_\_\_
- ☐ SWD      Permit #: \_\_\_\_\_
- ☐ ENHR      Permit #: \_\_\_\_\_
- ☐ GSW      Permit #: \_\_\_\_\_

Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date           Recompletion Date

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

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total 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**

- ☐ Letter of Confidentiality Received
- Date: \_\_\_\_\_
- ☐ Confidential Release Date: \_\_\_\_\_
- ☐ Wireline Log Received
- ☐ Geologist Report Received
- ☐ UIC Distribution
- ALT ☐ I ☐ II ☐ III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



1066355

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West 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 Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>  Cores Taken <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> Electric Log Run <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> Electric Log Submitted Electronically <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <i>(If no, Submit Copy)</i>  List All E. Logs Run: _____	<div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Log</span> <span>Formation (Top), Depth and Datum</span> <span><input type="checkbox"/> Sample</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>Name</span> <span>Top</span> <span>Datum</span> </div>
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CASING RECORD <span style="float: right;"><input type="checkbox"/> New <input type="checkbox"/> Used</span> 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
____ 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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run: <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
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 <i>(Explain)</i> _____		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <i>(Submit ACO-5)</i> <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# ALLIED CEMENTING CO., LLC. 038298

Federal Tax I.D.# 20-5975804

ATTN TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT

Russell KS

DATE <u>9-22-2011</u>	SEC. <u>1</u>	TWP. <u>18.5</u>	RANGE <u>18W</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30 AM</u>	JOB FINISH <u>5:00 PM</u>
HERTEL <u>Thienhaus UNIT</u>				LOCATION <u>backcross KS 1S 2 1/2 E</u>		COUNTY <u>RUSH</u>	STATE <u>KANSAS</u>
LEASE <u>Thienhaus UNIT</u>				WELL # <u>1-1</u>			
OLD OR NEW (Circle one) <u>NEW</u>				VAN INTO			

CONTRACTOR Discovery Drilling Right # 4  
TYPE OF JOB Rotary Plug  
HOLE SIZE 12 1/4 I.D. 15'  
CASING SIZE Rot Hole DEPTH 40'  
TUBING SIZE DEPTH  
DRILL PIPE DEPTH  
TOOL DEPTH  
PRES. MAX MINIMUM  
MEAS. LINE SHOE JOINT  
CEMENT LEFT IN CSG.  
PERFS.  
DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 40 SX 40 4% SOL  
1/4" FD - Seal - RR SK

COMMON	<u>24</u>	@	<u>16.25</u>	<u>390.00</u>
POZMIX	<u>16</u>	@	<u>8.50</u>	<u>136.00</u>
GEL	<u>1</u>	@	<u>21.25</u>	<u>21.25</u>
CHLORIDE		@		
ASC		@		

## EQUIPMENT

PUMP TRUCK CEMENTER Glenn  
# 417 HELPER Woody  
BULK TRUCK  
# 410 DRIVER Ron  
BULK TRUCK  
# DRIVER

<u>Flt Seal 10R</u>	@	<u>2.70</u>	<u>270.00</u>
	@		
	@		
	@		
	@		
	@		
HANDLING	<u>41</u>	@	<u>2.25</u>
MILEAGE	<u>11/56/mi</u>	<u>35</u>	<u>157.50</u>

## REMARKS:

TOTAL 824.35

20 SX @ Rat Hole  
10 SX @ Surface 15' hole cut

## SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1250.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>70</u>	@	<u>7.00</u>
MANIFOLD	@		
	@		
<u>LUL</u>	<u>70</u>	@	<u>9.00</u>

TOTAL 2070.00

CHARGE TO: Downing & Nelson Oil Co  
STREET  
CITY STATE ZIP

## PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		

TOTAL

To Allied Cementing Co., 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.

SALES TAX (If Any)

TOTAL CHARGES 2894.35

PRINTED NAME

DISCOUNT 20% IF PAID IN 30 DAYS

SIGNATURE [Signature]

# ALLIED CEMENTING CO., LLC. 038298

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HERTEL <u>1000</u> UNIT						COUNTY <u>RUSH</u>	STATE <u>KANSAS</u>
LEASE <u>Thielen</u> WELL# <u>1-1</u>				LOCATION <u>backcross 1/2 1/2 E</u>			
OLD OR NEW (Circle one) <u>NEW</u>				VAN INTO			

CONTRACTOR Discovery Drilling Right # 4

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HOLE SIZE 12 1/4 ID. 15'

CASING SIZE 10 1/2 DEPTH 40'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 40 SX 40 4% GAL  
1/4" Fd - Seal - RR SK

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BULK TRUCK

# 410 DRIVER Ron

BULK TRUCK

# DRIVER

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	@		
	@		
	@		
	@		
	@		
HANDLING	<u>41</u>	@	<u>2.25</u>
MILEAGE	<u>14/56/mi</u>	<u>35</u>	<u>157.50</u>

## REMARKS:

TOTAL \$224.35

## SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1250.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>70</u>	@	<u>7.00</u>
MANIFOLD	@		
	@		
	@		
	@		
	@		

TOTAL 2070.00

CHARGE TO: Downing & Nelson Oil Co

STREET

CITY STATE ZIP

## PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL

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SALES TAX (If Any)

TOTAL CHARGES 2844.35

DISCOUNT 20% IF PAID IN 30 DAYS

PRINTED NAME

SIGNATURE [Signature]