

Kansas Corporation Commission Oil & Gas Conservation Division

1067053

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:	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 SWD 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?
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	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 Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
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 III Approved by: Date:					

Side Two



Operator Name:			Lease Name	e:			_ Well #:	
Sec Twp	S. R	East West	County:					
time tool open and clos	sed, flowing and shut s if gas to surface tes	I base of formations per in pressures, whether set, along with final chart well site report.	shut-in pressure	reached s	static level,	hydrostatic press	sures, bottom h	ole temperature, fl
Orill Stem Tests Taken (Attach Additional S		Yes No		Log	Formatio	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolo		☐ Yes ☐ No	N	lame			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)	I Electronically	Yes No Yes No Yes No						
List All E. Logs Run:			RECORD [Used			
	Size Hole	Report all strings set- Size Casing	-conductor, surface Weight		ate, producti Setting	on, etc. Type of	# Sacks	Type and Percen
Purpose of String	Drilled	Set (In O.D.)	Lbs. / Ft.		Depth	Cement	Used	Additives
		ADDITIONA	L OFMENTING (00115575	DECORD			
		ADDITIONA	L CEMENTING / :	SQUEEZE	RECORD			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	d		Type and F	Percent Additives	
Shots Per Foot		ON RECORD - Bridge Plu ootage of Each Interval Pe				cture, Shot, Cement mount and Kind of Ma	•	d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Line	r Run:	Yes No		
Date of First, Resumed I	Production, SWD or ENI	HR. Producing Me	thod:	Gas Li	ift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	В	bls. (Gas-Oil Ratio	Gravity
DISPOSITIO	Used on Lease	Open Hole	METHOD OF COM	MPLETION: ually Comp omit ACO-5)	. Cor	nmingled mit ACO-4)	PRODUCTIO	ON INTERVAL:
(If vented, Sub	mit ACO-18.)	Other (Specify) _						

FOREMAN Fred Made LOCATION Oxdowna 33001 TICKET NUMBER_

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15C	NEI CAR	502	ZIP CODE	STATE	
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15C	NEI CAR	202 204	ZIP CODE	S wolfmed 2	CO331
TRUCK#	PRICAR PARBEC FREMBO DRIVER	TRUCK#	ZIP CODE	STATE	NEING ADDRESS
TRUCK#	PRICAR HARBEC PRIVER DRIVER	TRUCK#	ZIP CODE	Mes lovks	STOMER PSOO
TRUCK#	PRICAR PARBEC FREMBO DRIVER	TRUCK#	9C # 22	mos oves mos oves southous	ANDRESS ANDRESS ANDRESS
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I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's

TITLE

Johnson County, KS Town Oilfield Service, Inc.

(913) 837-8400

(913) 837-8400

Lease Owner: ST Petroleum

METT FOG

Total Depth	Formation	hickness of Strata
91	Soil-Clay	91-0
32	Shale	61
07	əmiJ	S
99	Shale	97
02	əmiJ	t
74	Shale	t
88	эшіЛ	サレ
86	Shale	Ol
201	- Lime	6
113	Shale	9
131	- Lime	81
841	Shale	
071	Lime	22
921	Shale	g
530	Lime	99
261	Shale	21
760	Lime	6
672	Shale	61
585	əmiJ	9
767	Shale	L
567	Lime	L
342	Shale	43
361	əmiJ	61
363	Shale	2
368	əmiJ	g
375	Shale	L
914	Lime	07
lbb	Shale	56
784	Lime	97
069	Shale	103
109	эшіЛ	11
909	Shale	G
219	Fime	l l
829	Shale	6
089	ьшіЛ	7
289	Shale	L
921	əmiJ	71
199	Shale	01
799	əmiJ	l l
149	Shale	6

Johnson County, KS Town Oilfield Service, Inc.
Well: Thomas A-29 (913) 837-8400 Commenced Spudding:
Lease Owner: ST Petroleum

Lime	696
Shale	747
Sand	756
Shale	779
Lime	782
	870
	881
Shale	939-TD
	Shale Sand Shale Lime Shale Shale Shale