

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1074506

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:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	
Phone: ()	
CONTRACTOR: License #	
Name:	Lease Name:Well #:
Wellsite Geologist:	
Purchaser:	
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
Oil WSW SWD SIOW	Amount of Surface Pipe Set and Cemented at: Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No
OG GSW Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	
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:	
Deepening Re-perf. Conv. to ENHR Conv. to SV	/D
Conv. to GSW	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec TwpS. R East West
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 Approved by: Date:						

	Side Two				
Operator Name:	Lease Name:	Well #:			
Sec TwpS. 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 (Attach Additional Sheets)		Yes	No		og Formatio	n (Top), Depth an	d Datum	Sample	
Samples Sent to Geolog		Yes	No	Nam	1e		Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	☐ Yes ☐ Yes ☐ Yes	│ No │ No │ No						
List All E. Logs Run:									
CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc.									
Purpose of String	Size Hole Drilled	Size Ca Set (In	asing	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing Plug Back TD Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated				ļ		ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner R	un:	No	
Date of First, Resumed Production, SWD or ENHR.			۶.	Producing Method:			Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									1	
DISPOSITION OF GAS: METHOD OF COMPLE			TION:		PRODUCTION INTER	RVAL:				
Vented Sold		Jsed on Lease		Open Hole	Perf.	Dually (Submit /		Commingled (Submit ACO-4)		
(If vented, Subi	mit ACC)-18.)		Other (Specify)						

Kepley Well Service, LLC

19245 Ford Road Chanute, KS 66720

10/18/2011

Invoice #

46203

Cement Treatment Report

AX&P, Inc. 20147 200 Road Neodesha, KS 66757 (x) Landed Plug on Bottom at 700 PSI
() Shut in Pressure 700
(x)Good Cement Returns
() Topped off well with ______ sacks
(x) Shut In

TYPE OF TREATMENT: Production Casing HOLE SIZE: 5 518" TOTAL DEPTH: 851

Well Name	Terms	Due Date			
Wolf West	Net 15 days	11/17/2011			
Service of	or Product	Qty	Per Foot I	Pricing/Unit Pricing	Amount
Run and cement 2 7/8" Sales Tax Unit 1 - Wolfe West 7 Wilson County Section: 29 Township: 30 Range: 16	WW#28H	846		3.00 6.30%	2,538.00 0.00
				Total	\$2,538.00
Hooked onto 2 7/8" casing. Established circulation with 5.5 barr METSO. COTTONSEED ahead. blended 91 sacks of straight cer plug, and pumped 5 barrels of water			r, 1 GEL.	Payments/Credits	\$0.00
				Balance Due	\$2,538.00
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