

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1085833

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:	Sec TwpS. R East West
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:	
Wellsite Geologist:	
C C	
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?
☐ OG	bd. If yes, show depth set: Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	feet depth to:w/sx cmt
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	Chloride content: ppm Fluid volume: bbls
	Dewatering method used:
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	
Dual Completion Permit #:	Operator Name:
SWD         Permit #:	License #:
ENHR Permit #:	Quarter Sec Two S R East West
GSW Permit #:	County: Permit #:
Spud Date or Recompletion Date         Date Reached TD         Completion Date or 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	<b>                                    </b>
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 She	eets)	Yes No		-	n (Top), Depth and		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	<pre> Yes No</pre> No Yes No Yes No					
List All E. Logs Run:							
		Report all strings set-	conductor, surface, inte	ermediate, producti	on, etc.		1
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: 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					e			ement Squeeze Record of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner F	Run:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	<b>λ</b> .	Producing M	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF C	BAS:			METHOD	OF COMPLE	TION:		PRODUCTION IN	TERVAL:
Vented Solo		Jsed on Lease		Open Hole	Perf.	Dually (Submit )	Comp. AC <i>O-5)</i>	Commingled (Submit ACO-4)		
(If vented, Su	bmit ACC	)-18.)		Other (Specify)						

# 

Oil & Gas Wells

Office Phone: 620-879-2073

PO Box 449 Caney, KS 67333

Date Started	6/4/2012
Date Completed	6/6/2012

Well No.	Operator	Lease	A.P.I #	County	State
A1	Colt Energy	Rolf J & B	15-031-23265-00-00	Coffey	Kansas
		1/4	Sec.	Two	Pao
1/4	1/4	1/4	Sec. 21	Twp.	Rge.

Driller	Type/Well	Cement Used	Casing Used	Depth	Size of Hole
Brantley	Oil	4	20'7" 8 5/8	1363	63/4

## **Formation Record**

				 	The second secon	
0-8	DIRT	917-936	LIME			
8-180	SHALE	936-948	SHALE			
180-216	LIME	948-950	BLACK SHALE			
216-226	SHALE	950-960	LIME			
226-281	LIME	960-992	SHALE			
281-400	SHALE	992-993	LIME			
400-447	LMY SAND	993-996	SHALE			
447-510	SANDY SHALE	996-1000	SAND / DECENT ODOR		· · · · · ·	
510-560	LMY SHALE	996-1016	CORE POINT			
560-562	BLK SHALE / LT ODOR	1000-1085	SHALE			
562-564	SHALE	1085-1086	COAL			
564-576	SANDY LIME	1086-1098	SANDY SHALE			
576-580	LIME	1098-1112	SAND			
580-585	SAND	1112-1127	SHALE			
585-587	BLACK SHALE	1127-1150	SAND			
587-611	LIME	1150-1200	SANDY SHALE	 		
586	GETTING DAMP	1200-1232	SHALE			
611	WENT TO WATER	1232-1240	DARK SANDY SHALE			
611-760	SHALE	1240-1247	RED SANDY SHALE			-
760-776	SANDY SHALE	1247-1257	SHALE			
776-780	BLACK SHALE	1257-1259	COAL			
780-806	LIME	1259-1325	SANDY SHALE			
806-862	SHALE	1325-1330	CHERTY LIME (MISS.)			
862-864	BLACK SHALE	1330-1363	CHERT			
864-879	LIME (PAWNEE)	1363	TD			
879-881	BLACK SHALE					
881-896	LMY SHALE					
887	GAS TEST - NO GAS					
896-906	LIME					
906-917	LMY SHALE					