



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1099800

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
Recompletion Date

Date Reached TD

Completion Date or
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: _____



1099800

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 ☐ Yes ☐ No
 (Attach Additional Sheets)

 Samples Sent to Geological Survey ☐ Yes ☐ No

 Cores Taken ☐ Yes ☐ No

 Electric Log Run ☐ Yes ☐ No

 Electric Log Submitted Electronically ☐ Yes ☐ No
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum
CASING RECORD ☐ New ☐ Used

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Miami County, KS
 Well: Bergman G-1
 Lease Owner: Bergman

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 10/18/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
3	Soil/Clay	3
13	Lime	16
3	Sand	19
52	Shale	71
10	Lime	81
2	Shale	83
2	Sandy Shale	85
10	Sand	95
3	Lime	98
18	Shale	116
4	Lime	120
23	Shale	143
8	Sandy Shale	151
12	Shale	163
11	Lime	174
16	Shale	190
10	Lime	200
2	Shale	202
15	Lime	217
7	Shale	224
3	Lime	227
20	Lime	247
3	Shale	250
1	Slate	251
3	Lime	254
5	Shale	259
5	Lime	264
3	Shale	267
2	Lime	269
3	Shale	272
8	Sand	280
6	Sandy Shale	286
6	Shale	292
4	Sand	296
14	Sandy Shale	310
5	Sand	315
6	Sandy Shale	321
68	Shale	389
6	Sand	395
5	Sandy Shale	400

Miami County, KS
Well: Bergman G-1

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
10/18/2012

[illegible]



FIELD TICKET & TREATMENT REPORT

CEMENT

TICKET NUMBER 35075
LOCATION OTTAWA
FOREMAN ALAN MADER

DATE	CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY
10-22-12	7984	Bergman 1		NW 1	17	24	Mi
CUSTOMER Town Oilfield Service				TRUCK #			
MAILING ADDRESS P.O. Box 339				DRIVER			
CITY Houma		STATE LA	ZIP CODE 70605	TRUCK #			
JOB TYPE long string		HOLE SIZE 6 3/4	HOLE DEPTH 580	DRIVER			
CASING DEPTH 555		DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT		SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
DISPLACEMENT 8.7		DISPLACEMENT PSI 800	MIX PSI 200	RATE 4 bpm			

REMARKS: Established rate. Mixed & pumped 100th gal followed by 3 1/2 bbl dye marker. Mixed & pumped 93 sk 50/50 cement plus 270 gal. Circulated dye. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Circulated 5 bbl cement returns. Set float. Closed valve.

TAS, C had

Alvin Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	1030.00
5406	40	MILEAGE	368	160.00
5402	555	casing footage	368	—
5707	min	ton miles	503	350.00
5502C	2 1/2	80 vac	675	225.00
1124	93	50150 cement		1018.35
1118B	256 #	gel		53.76
4404	1	4 1/2 plug		45.00
			SALES TAX	84.25

Ravin 3737

AUTHORIZATION

TITLE

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

253920