# Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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: State: Zip:+	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         ☐ 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?				
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: Conv. to ENHR	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 TwpS. 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				

Operator Name:			Lease	Name:			_Well #:		
Sec Twp	S. R	East West	County	County:					
INSTRUCTIONS: Sho time tool open and clos recovery, and flow rate line Logs surveyed. At	sed, flowing and shut s if gas to surface tes	in pressures, whether, along with final cha	er shut-in pres	sure reache	ed static level,	hydrostatic press	sures, bottom h	ole temperature, flu	
Drill Stem Tests Taken (Attach Additional S	heets)	☐ Yes ☐ No		Log	Formation	n (Top), Depth ar	d Datum	Sample	
Samples Sent to Geolo	ogical Survey	Yes No		Name			Тор	Datum	
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No Yes No							
List All E. Logs Run:									
		CASIN Report all strings s	NG RECORD	New urface, interm	Used ediate, producti	on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Wei	ght	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
	2100				20011	Comen		7.00.0.700	
		ADDITION	IAI CEMENTII	NG / SOUEE	TE DECORD				
Purpose:	Double			ENTING / SQUEEZE RECORD  Sacks Used Type and Percent Additives					
Perforate Protect Casing					21				
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 (Amount and Kind of Material Used)  Depth				
TUBING RECORD:	Size:	Set At:	Packer A	t: L	iner Run:	Yes No			
Date of First, Resumed F	Production, SWD or ENF	HR. Producing N		ng 🗌 Ga	s Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	Bl	ols.	Gas-Oil Ratio	Gravity	
DISPOSITIO	N OF GAS:	OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:							
Vented Sold	Used on Lease	Open Hole	Perf.	Dually Co		nmingled			
(If vented, Subi	mit ACO-18.)	Other (Specify)	)	(Submit ACC	ט-ט) (Subi 	mit ACO-4)			

# **Summary of Changes**

Lease Name and Number: Willie Lake 1-12

API/Permit #: 15-001-30342-00-00

Doc ID: 1101030

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value		
Approved Date	06/20/2012	11/15/2012		
Ground Surface Elevation	1008	1006		
LocationInfoLink  Number of Feet East or	https://solar.kgs.ku.edu/ kcc/detail/locationInform ation.cfm?section=14&t 2810	https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=14&t 2470		
West From Section Line				
Quarter Call 1 - Largest	NW	NE		
Quarter Call 2	NE	NW		
Quarter Call 3	NE	NW		
Quarter Call 4 - Smallest	NE	NW		
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 84921	//kcc/detail/operatorE ditDetail.cfm?docID=11 01030		