

Kansas Corporation Commission Oil & Gas Conservation Division

1106381

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 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 I	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	":					
INSTRUCTIONS: Shitime tool open and clorecovery, and flow rate line Logs surveyed. A	sed, flowing and shues if gas to surface te	t-in pressures st, along with	s, whether so final chart(s	hut-in pres	sure read	ched static level,	hydrostatic press	sures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes	☐ No			og Formatio	n (Top), Depth ar	nd Datum	;	Sample
Samples Sent to Geol	ogical Survey	Yes	No		Nam	е		Тор	[Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy		Yes Yes Yes	No No No							
List All E. Logs Run:										
		Report a		RECORD	Ne	w Used	ion, etc.			
Purpose of String	Size Hole Drilled	Size C Set (In		Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used		and Percent additives
			ADDITIONAL	CEMENTII	NG / SQL	 EEZE RECORD				
Purpose:	Depth	Type of (# Sacks Used Type and Percent Additives					
Perforate Protect Casing	Top Bottom	71		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Plug Back TD Plug Off Zone										
Flug On Zone										
	PERFORATI	ON RECORD	- Bridge Plug	s Set/Type		Acid, Fra	cture, Shot, Cemen	t Saueeze Recor	d	
Shots Per Foot	Specify	Footage of Eac	h Interval Perf	forated			mount and Kind of Ma			Depth
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN	_	roducing Meth	nod:	ıg 🗌	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		ħ.	METHOD OF	COMPLE	TION:		PRODUCTION	ON INTER	VAL:
Vented Sold		Оре	n Hole	Perf.	Dually	Comp. Cor	nmingled			
(If vented, Sub			or (Specify)		(Submit A	ACO-5) (Sub	mit ACO-4)			

THORNTON AIR ROTARY, LLC

Office Phone: 620-879-2073

PO Box 449 Caney, KS 67333

Date Started	10/15/2012
Date Completed	10/17/2012



	Operator	A.P.I #	County	State	
Colt Energy 15-107-24637-00-00 Linn Kansa					
Well No.	Lease	Sec.	Twp.	Rge.	
M1047	Mitchell Family Trust	25	21	21	

Туре	Driller	Cement Used	Casing Used		Depth	Size of Hole
Oil	Brantley Thornton	5	22'3" 85/8	1	861	63/4

Formation Record

f			GANDY GUALE	Т	 	
0-6	MUD	612-632	SANDY SHALE		 	
6-8	SAND	632-647	BLACK SHALE		 	·····
8-22	LIME	647-708	SANDY SHALE			
22-75	LIME	686	GAS TEST - NO GAS			
75-76	COAL	708-754	SAND			
76-85	LIME	754-756	COAL			
85-265	SANDY SHALE	756-765	SANDY SHALE			
265-285	LIME	761	WENT TO WATER			
285-334	SANDY SHALE	765	CORE POINT			
334-335	COAL	765-771	SANDY SHALE			
335-340	SANDY SHALE	771-775	SAND /DECENT SHOW			
340-350	LIME	775-784	SANDY SHALE			
350-352	SANDY SHALE	784-786	COAL			
352-365	LIME	786	G.T15#,1/4"= 39 MCF	F		3
365-400	SHALE	786-791	BLACK SHALE			
400-425	LIME	791-821	CHAT/CHERT (MISS)			
425-427	SANDY SHALE	821-850	LIME			
427-435	BLACK SHALE	851-861	CHAT			
435-441	LIME	861	TD			
441-445	HARD LIME					
445-521	SAND					
521-524	COAL					
524-533	SANDY LIME					
533-534	COAL					
534-546	SHALE					
546-551	LIME					
551-578	SANDY SHALE					
578-580	COAL					
580-610	SANDY SHALE					
610-612	COAL					
010-017	CUAL			L	 	





TICKET NUMBER 35561

LOCATION Eureka

FOREMAN STEUR A Lead

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

620-431-9210	or 800-467-867	6	CEMEN	T 422	75-1	10フーユタ(37
DATE	CUSTOMER#	WELL NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
10/18/12	189%	Mitchell Family T.	rust (82	8) 25	21	SIE	Live
CUSTOMER	Everg	7	# M10-;	TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	ss //	V) TO A	1110-1	485	Alan m.	THOOK #	DRIVER
P.o.B	ox 388			611	Jim		
CITY		STATE ZIP CODE]				
Lola		MS 66749					
JOB TYPE Long	string 0	HOLE SIZE 6 3/4	HOLE DEPTH	861	CASING SIZE & W	EIGHT 4/2	10/23/
CASING DEPTH	850.45	DRILL PIPE	_TUBING			OTHER	
SLURRY WEIGH	т	SLURRY VOL	WATER gal/sl	k	CEMENT LEFT in	CASING	
DISPLACEMENT	13.56625	DISPLACEMENT PSISO	MIX PSIP/4	e Journ	RATE		
REMARKS: 5	afty Meet	ing: Ris up to 4	1/2 Cosing	Break (isculation	w/1522	Fresh
Jojet Fu	mp 300 =1	Gel 1-14sh x 1322	ols Frasi	zwater.	Mix 1205	KŚ CZass	_A
Cement L	1 22 GR	1, 1% Codz , "z"	" Phenos	real Perisia	. Wash a	uT puma	A.
Lines Sl	but down	. Release Plug.	Disple	ece wit	h 13.5 66	25 Frash	water.
Final pur	noing Pro	essure 500+ Bu	mp phy	1500\$	hoit 2	nin Rel	as-e
Pessure 1	Plug held	Good Ceme	no Reti	METO Su	stace 5 to	bls Slarr	2 70
P17.		nplite & Rig d					

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461	1	PUMP CHARGE	1030.00	1030.00
5406	50	MILEAGE	4.00	200.00
11045	1205ks	Class A Cement	14.96	1794.00
1118B	225#	6426	-21	47.25
1/02	115\$	Caclz/%	.74	85.10
1107A	60#	Phonoseal 1/2 # per/s/s	1.29	77.40
1118B	300#	Gel Flush	. 21	63.00
5407A	5.64 Ton	Tonmillage Bulk Truck	1.34	377.88
4464	/	4's Top Rubber Play	45.00	45.00
			Sub Tatal	37/9.63
		6.3%	SALES TAX	/33.05
lavin 3737	R.R. Jaffeet	903134	ESTIMATED TOTAL	3852.68
AUTHORIZTION	LOCK SOMMEN	TITLE	DATE 10/	18/2012

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