



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1109154

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 Date Reached TD Completion Date or
Recompletion Date 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: _____

1109154

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
____ Perforate				
____ Protect Casing				
____ 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 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. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Douglas County, KS

Well: Pearson 33

Lease Owner: R.T Enterprises

Town Oilfield Service, Inc.

(913) 837-8400

Commenced Spudding:

1/8/2013

WELL LOG

15-045-21855-00-00

Thickness of Strata	Formation	Total Depth
0-5	Soil-Clay	5
74	Sand	79
134	Shale	213
5	Lime	218
6	Shale	224
14	Lime	238
7	Shale	245
8	Lime	253
6	Shale	259
17	Shale	276
6	Shale	282
29	Sand	311
19	Lime	330
20	Sand	350
54	Shale	404
22	Lime	426
15	Shale	441
3	Shale	444
6	Lime	450
23	Shale	473
17	Lime	490
6	Shale	496
1	Lime	497
12	Shale	509
24	Lime	533
9	Shale	542
21	Lime	563
4	Shale	567
4	Lime	571
5	Shale	576
5	Lime	581
117	Shale	698
2	Sandy Shale	700
9	Sand	709
10	Sandy Shale	719
36	Shale	755
7	Lime	762
6	Shale	768
2	Lime	770
11	Shale	781

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals $D^2 \times .14 \times h$

D equals diameter in feet.

h equals height in feet.

BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

TO FIGURE PUMP DRIVES

* D - Diameter of Pump Sheave

* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - $RPM \times d$ over $SPM \times R$

d - $SPM \times R \times D$ over RPM

SPM - $RPM \times D$ over $R \times d$

R - $RPM \times D$ over $SPM \times d$

BELT LENGTH - $2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$

* Need these to figure belt length

TO FIGURE AMPS: $\frac{WATTS}{VOLTS} = AMPS$

746 WATTS equal 1 HP

Log Book

Well No. 33

Farm Pearson

KS
(State)

Douglas
(County)

11
(Section)

15
(Township)

20
(Range)

For R.T. Enterprises
(Well Owner)

Town Oilfield Services, Inc.

1207 N. 1st East

Louisburg, KS 66053

913-710-5400

State; Well No.

9 hrs

[illegible]

2" Set _____ 2" Pulled _____

Thickness of Strata	Formation	Total Depth	Remarks
0-5	soil-clay	5	
74	sand	79	
134	shale	213	
5	Lime	218	
6	shale	224	
14	Lime	238	
7	shale - slate	245	
8	Lime	253	
6	shale	259	
17	shale & shells	276	
6	shale & redbed	282	
29	sand & sandy shale	311	No Oil
19	Lime - shells	330	
20	sand & sandy shale	350	no Oil
54	shale	404	
22	Lime	426	
15	shale	441	
3	shale & lime	444	
6	Lime	450	
23	shale	473	
17	Lime	490	
6	shale	496	
1	Lime	497	
12	shale	509	
24	Lime	533	slight show
9	shale	542	
21	Lime	563	

563

Thickness of Strata	Formation	Total Depth	Remarks
4	shale - slate	567	
4	Lime	571	
5	shale	576	
5	Lime	581	Heating
117	shale	698	
2	sandy shale	700	
9	sand	709	no Oil
10	sandy shale	719	
36	shale	755	
7	Lime	762	
6	shale	768	
2	Lime	770	
11	shale	781	
1	Lime	782	
21	shale & lime	803	
3	Lime	806	
18	shale	824	
1	Lime	825	
1	shale	826	
1	Lime	827	
20	shale & redbed	847	
4	shale & lime	851	
4	shale	855	
2	sandy shale	857	
1	sand	858	broken 5% Oil
4	sand & lime	862	no Oil
4	sand	866	broken 50-75% Oil

566

[illegible]



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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 39083

LOCATION Ottawa

FOREMAN Alger Mader

DATE		CUSTOMER #	WELL NAME & NUMBER		SECTION	TOWNSHIP	RANGE	COUNTY	
1-9-13			Pearson		33	SE 11	15	20	JD6
CUSTOMER			MAILING ADDRESS		TRUCK #				
Orenoc					DRIVER				
120 Shoreline Dr					TRUCK #				
CITY			STATE		ZIP CODE		DRIVER		
Louisburg			KS		66053		Meet		
JOB TYPE long string			HOLE SIZE		HOLE DEPTH		CASSING		
3 1/2"			5 5/8"		960		CASSING		

JOB TYPE only strings

CASING DEPTH 931

SLURRY WEIGHT

DISPLACEMENT 5 1/4

HOLE SIZE

DRILL PIPE

SLURRY VOL

DISPLACEMENT PSI 800

HOLE DEPTH

TUBING

WATER gal/sk

MIX PSI 207

CASING SIZE & WEIGHT

OTHER Baffle 901

CEMENT LEFT in CASING ✓

RATE 46 p.m.

REMARKS: Held crew meet. Established rate. Mixed + pumped 100# gel followed by 114 sk 50/50 cement plus 2% gel. Circulated cement. Flushed pump. Ramped plug to baffle. Well held 800 PSI. Set float. Closed valve.

TOS WRS

[illegible]

Ravin 3737

no company ver

AUTHORIZATION V.M. OK

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

255754