



KANSAS CORPORATION COMMISSION 1120150  
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 # \_\_\_\_\_

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: \_\_\_\_\_



1120150

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  
 Flowing    Pumping    Gas Lift    Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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9/29/2012

#253317



339000528

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	ENDEAVOR	State, County	Sumner, Kansas	Cement Type	CLASS A
Job Type	SURF	Section	21	Excess (%)	50
Customer Acct #	2520	TWP	34	Density	15.6
Well No.	STALNAKER 21-1	RGE	2	Water Required	
Mailing Address		Formation		Yield	1.18
City & State		Hole Size	14.750	Slurry Weight	
Zip Code		Hole Depth	262	Slurry Volume	
Contact		Casing Size	12 3/4	Displacement	33
Email		Casing Depth	258	Displacement PSI	400
Cell		Drill Pipe		MIX PSI	400
Dispatch Location	BARTLESVILLE	Tubing	20' left in pipe	Rate	5
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401S	CEMENT PUMP (SURFACE PIPE)	1	2 HRS MAX	\$825.00	\$ 825.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	105	PER MILE	\$4.00	\$ 420.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
5609	MISC PUMP (CEMENT TRUCK)	10	PER HOUR	\$200.00	\$ 2,000.00
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
5402	FOOTAGE	258	PER FOOT	0.22	\$ 56.76
				<b>EQUIPMENT TOTAL</b>	<b>\$ 3,651.76</b>
<b>Cement, Chemicals and Water</b>					
1104S	CLASS 'A' CEMENT (SALES) BLEND(SK)	110.00		\$14.95	\$ 1,644.50
1102	CALCIUM CHLORIDE	300.00		\$0.74	\$ 222.00
1107A	PHENOSEAL	80.00		\$1.29	\$ 103.20
1118B	PREMIUM GEL/BENTONITE (50#)	150.00		\$0.21	\$ 31.50
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
				<b>CHEMICAL TOTAL</b>	<b>\$ 2,001.20</b>
<b>Water Transport</b>					
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
				<b>TRANSPORT TOTAL</b>	<b>\$ -</b>
<b>Cement Floating Equipment (TAXABLE)</b>					
<b>Cement Basket</b>					
0				\$0.00	\$ -
<b>Centralizer</b>					
0				\$0.00	\$ -
0				\$0.00	\$ -
<b>Float Shoe</b>					
0				\$0.00	\$ -
<b>Float Collars</b>					
0				\$0.00	\$ -
<b>Guide Shoes</b>					
0				\$0.00	\$ -
<b>Baffle and Flapper Plates</b>					
0				\$0.00	\$ -
<b>Packer Shoes</b>					
0				\$0.00	\$ -
<b>DV Tools</b>					
0				\$0.00	\$ -
<b>Ball Valves, Swedges, Clamps, Misc.</b>					
0				\$0.00	\$ -
0				\$0.00	\$ -
0				\$0.00	\$ -
<b>Plugs and Ball Sealers</b>					
0				\$0.00	\$ -
<b>Downhole Tools</b>					
0				\$0.00	\$ -

CEMENT FLOATING EQUIPMENT TOTAL	\$	5,852.88
SUB TOTAL	\$	5,852.88
SALES TAX	\$	427.93
TOTAL	\$	6,280.81
(-DISCOUNT)	\$	580.00
<b>DISCOUNTED TOTAL</b>	<b>\$</b>	<b>5,279.14</b>

<b>DRIVER NAME</b>	
674	Donnie
419	JAMES N
551	MATT M

AUTHORIZATION

TITLE   
FOREMAN



# 251838

CEMENT FIELD TICKET AND TREATMENT REPORT



Customer	Endavor	State, County	Sumner, Kansas	Cement Type	CLASS A
Job Type	P & A	Section		Excess (%)	15.6
Customer Acct #	2518	TWP		Density	5.2
Well No.	Stalaker 21-1	RGE		Water Required	1.18
Mailing Address		Formation		Yield	165 sbs
City & State		Tubing	4 1/2" 16.6M XH	Sacks of Cement	35 bbl
Zip Code		Drill Pipe	Surf. 12 3/4"	Displacement	29.3
Contact		Casing Size	9 7/8"	Displacement PSI	
Email		Casing Depth	2,120'	MIX PSI	
Call		Hole Depth		Rate	3
Dispatch Location	BARTLESVILLE	Quantity		Price per Unit	
Code		2 HRS MAX			
5405N	P & A NEW WELLS (2 HOURS MAX)	1			
5609	MSC PUMP (CEMENT TRUCK)	3			
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1			
5406	EQUIPMENT MILEAGE (ONE-WAY)	105			
5402					
5401					
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Time:	Description	Rate (bpm)	Volume (bbl)	Pressure	Notes
6:00 PM	Arrive on location, Rig up, Safety Meeting.				
6:20 PM	1st Plug				
6:20 PM	2,120 ft (82')				
6:20 PM	H2O spacer	3	5	100	
6:21 PM	Cement 35 sks	3	7.5	100	
6:24 PM	Displace	5	29	150	Plug balanced
6:24 PM	325 ft (111')				
6:30 PM	2nd Plug				
6:30 PM	H2O spacer	3	5	50	
9:32 PM	Cement 50 sks	3	10.5	50	
9:36 PM	Displace	2	3		Plug balanced
9:36 PM	60 ft to surf.				
10:00 PM	Cement 45 sks	2	9.5		
10:40 PM	Plug Rat Hole				
10:40 PM	Cement 35 sks	2	7.4		
11:10 PM	Leave location				

More Notes: