

Kansas Corporation Commission Oil & Gas Conservation Division

1125740

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 SWD 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? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWD Conv. to GSW	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 #:	County: Permit #:
GSW Permit #:	. 5
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 I II Approved by: Date:

Side Two

1125740

Operator Name:				_ Lease N	lame:			Well #:		
Sec Twp	S. R	East	West	County:						
INSTRUCTIONS: Sh time tool open and clo recovery, and flow rate line Logs surveyed. A	osed, flowing and shu es if gas to surface te	t-in pressures, st, along with f	whether sh inal chart(s	nut-in press	ure reach	ed static level,	hydrostatic pres	sures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taker (Attach Additional S		Yes	No		Log	y Formation	n (Top), Depth a	nd Datum		Sample
Samples Sent to Geo	logical Survey	Yes	No		Name			Тор	I	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes Yes Yes	☐ No ☐ No ☐ No							
List All E. Logs Run:										
		Report all	CASING I		New	Used mediate, producti	on, etc.			
Purpose of String	Size Hole Drilled	Size Ca Set (In C	sing	Weigi Lbs. /	ht	Setting Depth	Type of Cement	# Sacks Used	, ,,	and Percent dditives
		AI	DDITIONAL	CEMENTIN	G / SQUE	EZE RECORD				
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Co	ement	# Sacks	Used		Type and	Percent Additives		
Shots Per Foot	PERFORATI Specify I	ON RECORD - Footage of Each	Bridge Plugs Interval Perfo	s Set/Type orated			cture, Shot, Cemei mount and Kind of N		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At:		Liner Run:				
Date of First, Resumed	Production, SWD or EN		ducing Meth	od:		as Lift C	Yes No	0		
Estimated Production Per 24 Hours	Oil	Bbls.		Mcf	Water		ols.	Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	IETHOD OF	COMPLET	ION:		PRODUCTIO	ON INTER	VAL:
Vented Sold	Used on Lease	Open	Hole (Specify)	Perf.	Dually ((Submit AC		nmingled mit ACO-4)			



CHARGE TO:	
ADDRESS	
CITY, STATE, ZIP CODE	

<u>C</u>	
m	
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22852 PAGE OF

11 1.9-1	DATE SIGNED	MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS	but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.	the terms and conditions on the reverse side hereof which include,	TEDMS: Customor	583	185			276	1380	1.011		290	82.5	575	PRICE SECON	REFERRAL LOCATION	4.	_ω	2 Mass City Ks.	1.	SERVICE I OCATIONS	Services.
1113	TIME SIGNED	CUSTOMER'S AGENT PRIOF	NENT, RELEASE, INI	he reverse side hereof	horoby acknowledges											\$	SECONDARY REFERENCE/ PART NUMBER	INVOICE INSTRUCTIONS	Su	WEIL TYPE	TICKET TYPE CONT	100		Inc.
	90	210	DEMNITY	f which inc	and agre	h	7			N	N			-	<u> </u>		ACCOUNTING LOC ACCT	NS	0	11	CONTRACTOR	0		
T.M.	D AM		, and	stude,	pec to												NTING CT DF		0	WELL CATEGORY	0	5	LEASE	
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103-130-2300	7000		SWIFT SERVICES, INC.	REMIT PAYMENT TO:		0	rviceCharge				1000	13600			or air		DESCRIPTION		Liner	JOB PURPOSE	RIG NAME/NO.	7.070	COUNTY/PARISH	
00	ARE YOU SATI	WE OPERATED AND PERFORM CALCULATION: SATISFACTORI	WE UNDERSTOOD A MET YOUR NEEDS? OUR SERVICE WAS PERFORMED WITHO	OUR EQUIPMENT PERFO WITHOUT BREAKDOWN?	SI																SHIPPED	1	STATE	
CUSTOMER DID NOT WISH TO RESPOND	SFIED WITH OUR SERVICE YES	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?	WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS PERFORMED WITHOUT DELAY?	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	SURVEY AGI	459 711	200 sks			211	700 7/2	1 19		2 84	101	50 %	QTY. UM			WELL PERMIT NO.	DELIVERED TO		CITY	
TO RESPOND	ON D				AGREE DECIDED			_			× 1:	- 2			1821		QTY.			1				
					AGREE												MNU			WELL LOCATION	ORDER NO.	S	DATE	
	TOTAL	XAT		PAGE TOTAL		100	700			2	Jost so		N	27 000	120050	0/	UNIT			CATION	NO.	27/2	OWNER	_
				600 1 00	000	47400	0000 co			100 00	3300 00	200		2000	150000	30000	AMOUNT					2000	FR	

SWIFT OPERATOR

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket

Thank You!

APPROVAL

Aily + Day ad F. A. H.	10,212	Propagation (
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tig of to-mas 2 54 50 2 2113							
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1 1/1 901 = 2 10/ 10						SABO	
DESCRIPTION OF OPERATION AND MATERIALS	CASING: (PSI)	PRESSURE	PUMPS T	(BBL) (GAL)	HAR (M98)	ЗМІТ	TAAH ON
A JOBITPE A LINA TICKET NO. 2852	-17	N P Y S	0	WELL NO. 5 W	16-	147 1s.	TOMER
JOB TYPE TICKET NO.		35731	Contract of the last of the la				