



KANSAS CORPORATION COMMISSION 1148988  
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: \_\_\_\_\_



1148988

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
---	---

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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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
-----------------------------------	-----------	---------	-------------	---------------	---------

<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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
--	---	---



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 39086  
LOCATION Oftawa KS  
FOREMAN Fred Maden

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/27/21	1174	Cox #30	Nw 21	20	22	LN
CUSTOMER A-B Oil			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 300 SE 21 <sup>st</sup> ST			506	Fred Mad	Safety	MH
CITY STATE ZIP CODE Topeka KS 66607			495	Harper	HB	J
			369	Der Mas	DM	
			558	Bre Man	BM	

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 600' CASING SIZE & WEIGHT 2 7/8" EWT  
 CASING DEPTH 580' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT 3.373 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5BPM

REMARKS: Establish pump rate. Mix + Pump 100# Gel Flush. Mix + Pump 98 sks 50/50 for Mix Cement 2 7/8" Gel. Cement to surface. Flush pump & lines clean. Displace 2 1/2" rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set float valve. Shut in casing.

JTC Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030 <sup>00</sup>
5406	—	MILEAGE		N/C
5402	580'	Casing Footage		N/C
5407	1/2 minimum	Ton Miles		175 <sup>00</sup>
5502C	2 hrs	80 BBL Vac Truck		180 <sup>00</sup>
1124	98 sks	50/50 for Mix Cement		1073 <sup>10</sup>
1118B	265 <sup>##</sup>	Premium Gel		5565
4402	1	2 1/2" Rubber Plug		28 <sup>00</sup>
			63%	SALES TAX 72 <sup>88</sup>
				ESTIMATED TOTAL 2614 <sup>63</sup>

Ravin 3737

AUTHORIZATION

*[Signature]*

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

255626

# DRILL LOG

Operator License# API 15-107-24663-00-00

Operator Lease Name Cox

Address Well # 30

Contractor JTC Oil, Inc. Spud Date 12/14/12 Cement  
 12/27/12

Contractor License 32834 Location \_\_\_\_\_  
 of \_\_\_\_\_

T.D. 600 T.D. of Pipe 580 \_\_\_\_\_ feet from \_\_\_\_\_

Surf. Pipe Size 7" Depth 22' \_\_\_\_\_ feet from \_\_\_\_\_

Kind of Well \_\_\_\_\_ prod. \_\_\_\_\_ County Linn

Thickness	Strata	From	To	Thickness			
Strata	From	To					
<u>2</u>	<u>soil</u>	<u>0</u>	<u>2</u>	<u>9</u>	<u>lime</u>	<u>286</u>	<u>295</u>
<u>5</u>	<u>clay</u>	<u>2</u>	<u>7</u>	<u>8</u>	<u>shale</u>	<u>295</u>	<u>303</u>
<u>15</u>	<u>shale</u>	<u>7</u>	<u>22</u>	<u>12</u>	<u>lime</u>	<u>303</u>	<u>315</u>
<u>9</u>	<u>lime</u>	<u>22</u>	<u>31</u>	<u>49</u>	<u>shale</u>	<u>315</u>	<u>364</u>
<u>10</u>	<u>shale</u>	<u>31</u>	<u>41</u>	<u>7</u>	<u>coal</u>	<u>364</u>	<u>371</u>
<u>32</u>	<u>lime</u>	<u>41</u>	<u>73</u>	<u>12</u>	<u>lime</u>	<u>371</u>	<u>383</u>
<u>8</u>	<u>black shale</u>	<u>73</u>	<u>81</u>	<u>12</u>	<u>shale</u>	<u>383</u>	<u>395</u>
<u>24</u>	<u>lime</u>	<u>81</u>	<u>105</u>	<u>4</u>	<u>lime</u>	<u>395</u>	<u>399</u>
<u>4</u>	<u>coal</u>	<u>105</u>	<u>109</u>	<u>29</u>	<u>black shale</u>	<u>399</u>	<u>428</u>

<b>12</b>	<b>lime</b>	<b>109</b>	<b>212</b>	<b>13</b>	<b>lime</b>	<b>428</b>	<b>441</b>
<b>165</b>	<b>shale</b>	<b>121</b>	<b>286</b>	<b>11</b>	<b>shale</b>	<b>441</b>	<b>452</b>
				<b>8</b>	<b>lime</b>	<b>452</b>	<b>460</b>
				<b>6</b>	<b>coal</b>	<b>460</b>	<b>466</b>
				<b>4</b>	<b>shale</b>	<b>466</b>	<b>470</b>
				<b>5</b>	<b>lime</b>	<b>470</b>	<b>475</b>
				<b>3</b>	<b>shale</b>	<b>475</b>	<b>478</b>
				<b>1</b>	<b>lime</b>	<b>478</b>	<b>479</b>
				<b>5</b>	<b>coal</b>	<b>479</b>	<b>484</b>
				<b>32</b>	<b>shale</b>	<b>484</b>	<b>516</b>
				<b>2</b>	<b>oil sand</b>	<b>516</b>	<b>518</b>
	<b>Ok good</b>			<b>4</b>	<b>oil sand</b>	<b>518</b>	<b>522</b>
	<b>Ok good</b>			<b>5</b>	<b>oil sand</b>	<b>522</b>	<b>527</b>
	<b>Ok good</b>			<b>3</b>	<b>oil sand</b>	<b>527</b>	<b>530</b>
	<b>Ok good</b>			<b>3</b>	<b>oil sand</b>	<b>530</b>	<b>533</b>
	<b>Ok</b>			<b>3</b>	<b>oil sand</b>	<b>533</b>	<b>536</b>
				<b>2</b>	<b>sand</b>	<b>536</b>	<b>538</b>
				<b>1</b>	<b>lime</b>	<b>538</b>	<b>539</b>
				<b>2</b>	<b>sand</b>	<b>539</b>	<b>541</b>
				<b>26</b>	<b>shale</b>	<b>541</b>	<b>567</b>
				<b>2</b>	<b>lime</b>	<b>567</b>	<b>569</b>
				<b>1</b>	<b>shale</b>	<b>569</b>	<b>570</b>
				<b>4</b>	<b>coal</b>	<b>570</b>	<b>574</b>

-

-

-

-

-

-

-

-

-

-