



KANSAS CORPORATION COMMISSION 1152514  
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: \_\_\_\_\_



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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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Intrepid Resources LLC
Well Name	Pierce IR 24-2
Doc ID	1152514

Tops

Name	Top	Datum
shale	445	480
coal/shale	439	445
sandy shale	429	439
shale good oil show	420	429
sand oil odor	413	420
coal	408	413
lime	390	408
shale	365	390
lime	352	365
shale	347	352
lime	338	347
shale	321	338
lime	321	295





**PAKS DRILLING**  
**3720 W. Main St.**  
**Independence, KS 67301**  
**(620) 577-4196**

cement surface casing Job Ticket

Date: 06/15/2013

Well Name/Location: PIERCE IR 24-2

Customer Order #:00422

Labor - Description		Hrs./Qty	Rate	Amount	Description of Work
Drilling foreman:	JASON S.				SET SURFACE CASING ran cement for surface casing used 11 sacks 50/50 portland mix
drilling foreman:		3.5hrs			
Drill Hand	DARYL				
Drill hand:	JOSEPH				
Hand:	LEVI				
Per Diem:	none				
Safety Bonus:	none				
Other Charges - Description		Hrs./Qty	Rate	Amount	
Equipment Usage Chrg		2.75			
Equipment Usage Chrg					
Water Delivery		2			
Crew Truck		2			
Trucking Charge		3.25			
				Total Amount Due	960

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	PAKS ENERGY	State, County	Montgomery, Kansas	Cement Type	CLASS A
Job Type	LS	Section	3	Excess (%)	100%
Customer Acct #		TWP	31	Density	13.8
Well No.	1R 24-2	RGE	16	Water Required	8.5
Mailing Address		Formation		Yield	1.77
City & State		Tubing		Sacks of Cement	75
Zip Code		Drill Pipe		Slurry Volume	24
Contact		Casing Size	4.5 10.5#	Displacement	7.4
Email		Hole Size	6.75	Displacement PSI	450
Cell		Casing Depth	464	MIX PSI	200
Dispatch Location	BARTLESVILLE	Hole Depth	480	Rate	4.5

Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,085.00	\$ 1,085.00
5402	FOOTAGE	464	PER FOOT	\$0.23	\$ 106.72
5406	EQUIPMENT MILEAGE (ONE-WAY)	55	PER MILE	\$4.20	\$ 231.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$368.00	\$ 368.00
5621	4 1/2 INCH PLUG CONTAINER	1	PER UNIT	\$215.00	\$ 215.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>EQUIPMENT TOTAL</b>					<b>\$ 2,005.72</b>

Cement, Chemicals and Water		Quantity	Unit	Price per Unit	
1126A	THICK SET CEMENT (8LB OWC 4% GEL 2% CAL. CHLORIDE)	75	0	\$20.16	\$ 1,512.00
1118B	PREMIUM GEL/BENTONITE (50#)	300	0	\$0.22	\$ 66.00
1107A	PHENOSEAL	100	0	\$1.35	\$ 135.00
1110A	KOL SEAL (50 # SK)	400	0	\$0.46	\$ 184.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
1123	CITY WATER (PER 1000 GAL)	4200	Per 1000 Gal	\$17.30	\$ 72.66
<b>Chemical Total</b>					<b>\$ 1,969.66</b>

Cement Water Transports		Quantity	Unit	Price per Unit	
5501C	WATER TRANSPORT (CEMENT)	4	WATER TRANSPORT (CEMENT)	\$120.00	\$ 480.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>Transports Total</b>					<b>\$ 480.00</b>

Cement Floating Equipment (TAXABLE)		Quantity	Unit	Price per Unit	
<b>Cement Basket</b>					
0	Centralizer		0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>Float Shoe</b>					
0			0	\$0.00	\$ -
<b>Float Collars</b>					
0			0	\$0.00	\$ -
<b>Guide Shoes</b>					
0			0	\$0.00	\$ -
<b>Baffle and Flapper Plates</b>					
0			0	\$0.00	\$ -
<b>Packer Shoes</b>					
0			0	\$0.00	\$ -
<b>DV Tools</b>					
0			0	\$0.00	\$ -
<b>Ball Valves, Swedges, Clamps, Misc.</b>					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>Plugs and Ball Sealers</b>					
4404	4 1/2" RUBBER PLUG	1	PER UNIT	\$47.25	\$ 47.25
0			0	\$0.00	\$ -
<b>CEMENT FLOATING EQUIPMENT TOTAL</b>					<b>\$ 47.25</b>

DRIVER NAME		Quantity	Unit	Price per Unit	
674	DONNIE		0	\$0.00	\$ -
700 T133	CASEY M		6.30%		\$ 4,502.83
551	MATT M				\$ 4,629.70
TP	NUNNLEY		10%	(-DISCOUNT)	\$ 450.28
<b>DISCOUNTED TOTAL</b>					<b>\$ 4,179.43</b>

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE \_\_\_\_\_  
FOREMAN 

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,