

Kansas Corporation Commission Oil & Gas Conservation Division

1155011

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:	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?
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 Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #:	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 Bast West
ENHR	County: Permit #:
Spud Date or Date Reached TD Completion Date or	
Recompletion Date Date Reached 1D Completion Date of 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



Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
time tool open and cle recovery, and flow rate	osed, flowing and shu	nd base of formations pe at-in pressures, whether est, along with final chart well site report.	shut-in pressure rea	ched static level,	hydrostatic press	sures, bottom h	nole temperature, fluid
Drill Stem Tests Take		☐ Yes ☐ No		og Formatio	n (Top), Depth ar	nd Datum	Sample
Samples Sent to Geo	ological Survev	☐ Yes ☐ No	Nam	ne		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Cop	ed Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
			RECORD No-	ew Used ermediate, producti	ion, 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
		ADDITIONA	L CEMENTING / SQI	JEEZE RECORD	I.		
Purpose: —— Perforate —— Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used		Type and I	Percent Additives	
—— Plug Back TD —— Plug Off Zone							
Shots Per Foot	PERFORATI Specify	ON RECORD - Bridge Plu Footage of Each Interval Pe	gs Set/Type rforated		cture, Shot, Cemen mount and Kind of Ma		d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	IHR. Producing Me		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	ter B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ION OF GAS:		METHOD OF COMPL	_		PRODUCTIO	ON INTERVAL:
Vented Sol	d Used on Lease	Open Hole	Perf. Dually (Submit		mmingled mit ACO-4)		

HUGHES DRILLING REPORT

SURFACE CASING
Size 7

Feel 20 70 Well No. 5-A Farm Flyhn

PERMANENT CSG.

Size 278 810 EVE (New)
Feet 860' of PIPL
Bolt of 854

OPERATOR H.S.W.S. D.T.ILLIANS OPERATOR H.S.W.S. D.T.I.I.I.I.I.I.I.I.I.I.I.I.I.I.I.I.I.I.	i ai iii A	7		Circula	red 0	sx cement \	301tot 85	4		9		(1001	11
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DATE	OPERATO	MACHIL. RC		17/17/22) [-	C	Contractor	711000			Û		
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7-8-13 0 2 soil (1/21.5-21.5) 1 short 127 2 11 (101) 3/22.5-49.0 5 5/mit 184 2 11 (101) 3/22.5-66.5 46 5 46 5/mit 201 7/1/3 19 2-0 c/mc (501) 41 22.5-81.0 17 c/mc 200 3/27.5-66.5 46 5/mit 2/mc 7/1/3 19 2-0 c/mc (501) 41 22.5-81.0 17 c/mc 2/mit 2/m	DATE	21	-promote party - to the second			REMARKS - TYPE	WORK BILLING REF.		LILE INCE!	2	4		100
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Sec. 24, Twp. 15, Rng. 2.0
Fr. Co., Kansas 660 FSL 2420 FEL API# 15-059-26448

STRATA

THICKNESS

FORMATION DRILLED

501

T.D.

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Kb. 20' Juled 35th TD. ASZ 11 Jts on Troiler

HUGHES DRILLING CO.

PS-3

Wellsville, Kansas 66092

Roger 913-883-2235 Darrel 913-883-4027 PORMATION #1 SQUICCO DATE: 79-13

Ron 913-883-4856 Clay 913-883-4385

chip sample

FROM	FEET TO	TIME	MINUTES	REMARKS	
789	1-95	Gas sandi (V	cry/Lavnin with	Shall 1	and the second s
795	798	solid Gas Sav	AC	A CONTRACTOR OF THE PARTY OF TH	**************************************
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301	814	Solid Sand	(Bleeding)	9:1)	
314	817	Sandy Lime	(do show)		
317	825	solid sand	(Dil Track)	With starts	
325	836	Black Saw	COERY/ CONTIN	WIN Such C	9 mm-1
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260448

TICKET NUM	BER_	42126) (
LOCATION_	Dti	tawa	
FOREMAN	Ala	a mad	0 /

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

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WEL	L NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-10-13	3425	Flynn	# 5.A	SEZY	15	20	FR
USTOMER	- Dayl	. ' '		TRUCK #	DRIVER	TRUCK #	NO NED
Mughe	5 Dr:11:	79		516	AlaMad	TRUCK#	DRIVER
122	Main			368	A.IMED		
ITY	Mair	STATE	ZIP CODE	503	Dan Det		
Wells	11/2	K5	66092	200	1099 007		
	15 string	HOLE SIZE_	3 5/8 HOLE DEF	тн 875	CASING SIZE & V	VEIGHT 2	1/8
ASING DEPTH		DRILL PIPE	TUBING			OTHER P.	
LURRY WEIGH		SLURRY VOL	WATER ga	al/sk	CEMENT LEFT in		
ISPLACEMEN'	3	DISPLACEMEN	IT PSI 800 MIX PSI	200	RATE 7 6		
EMARKS: H	OOKED t	0 645	une, Estab	blished 1	ate N	lixed	_
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CODE	QUANITY	or UNITS	DESCRIPTION	of SERVICES or PI	RODUCT	UNIT PRICE	TOTAL
5401		1	PUMP CHARGE		368		10850
5406		20	MILEAGE		368		8400
5402	8	60	casine to	potase	368		
3407	M	in	ton miles		503		388-
			,				
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win 2727			J			SALES TAX ESTIMATED	116,16
ivin 3737 —	TXXX)	<- r	1 8			TOTAL	3 179.92
UTHORIZTION	TOW:	561	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.