

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division 1159004

Form ACO-1
August 2013
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:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West
Recompletion Date		Recompletion Date	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
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I III Approved by: Date:

Page Two



Operator Name:			L	ease Name: _			Well #:	
Sec Twp	S. R	East We	est C	County:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres	sures, whether sh	ut-in pressur	e reached stati	c level, hydrosta	tic pressures, bott		rval tested, time tool erature, fluid recovery,
Final Radioactivity Lo files must be submitted					ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taker (Attach Additional		Yes [	No	L	_	on (Top), Depth an		Sample
Samples Sent to Geo	logical Survey	Yes	No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes Yes	No No					
List All E. Logs Run:								
		(	CASING REC	ORD Ne	ew Used			
		· ·		ıctor, surface, inte	ermediate, producti	1		I
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
		ADD	ITIONAL CEN	MENTING / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cem	ent #	Sacks Used		Type and P	ercent Additives	
Perforate Protect Casing	100 20111111							
Plug Back TD Plug Off Zone								
1 lag on zono								
Did you perform a hydrau	ulic fracturing treatment	on this well?			Yes	No (If No, ski	o questions 2 ar	nd 3)
Does the volume of the to		•				_ ` ` '	p question 3)	
Was the hydraulic fractur	ing treatment information	on submitted to the c	hemical disclo	sure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)
Shots Per Foot		ION RECORD - Bri Footage of Each Into				cture, Shot, Cement		d Depth
	, ,	<u> </u>			,		,	·
TUBING RECORD:	Size:	Set At:	Pa	acker At:	Liner Run:			
						Yes No		
Date of First, Resumed	Production, SWD or Ef		cing Method: owing	Pumping	Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. G	as Mcf	Wate	er Bi	ols. G	as-Oil Ratio	Gravity
DIODOCITI	ON OF CAS:		N 4 - T - 1		TION:		PPODUOTIO	ON INTERVAL.
Vented Solo	ON OF GAS:  Used on Lease	Open Ho		IOD OF COMPLE $\Box$		nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)	Other (Si	necify)	(Submit		mit ACO-4)		

Skyy Drilling, L.L.C. Park Place - Becker Building 11551 Ash Street, Suite # 205 Leawood, Kansas 66211 Office (913) 499-8373 Fax (913) 766-1310

August 9, 2013

Company: Haas Petroleum, LLC

11551 Ash Street, # 205 Leawood, Kansas 66211

Lease:

Arnold - Well #2 I HP

County:

Woodson

Spot:

SW NW NE NE Sec 35, Twp 23, R 14 E

API:

15-207-28610-00-00

TD:

1735'

Total Footage 1735' 💍 Total Rig Time 21 Hours 25 Sacks Cement ( Total Dozer Work 6 Hours §

TOTAL





TICKET NUMBER _	43412
LOCATION EURA	
FOREMAN RICK LA	

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

## FIELD TICKET & TREATMENT REPORT CEMENT

020-401-3210	01 000 401 0010	•		VEINEI1	•			
DATE	CUSTOMER#	WE	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
8-8-13	345)	Acoald "	2iho		35	23	146	Woodsen
CUSTOMER			•		TOU YOU #	DRIVER.	TRUCK#	DRIVER
<i>H</i>	993 Petroleur	<u> </u>		-	TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDR	ESS				485	Alan M.		ļ
115	51 Ash 54.				(41)	Jacy		ļ
CITY		STATE	ZIP CODÉ		467	Melc		
100	Uond	K3	46211	_] [	437	J/m		
JOB TYPE		HOLE SIZE	6314"	_ HOLE DEPTH	1735'	CASING SIZE & W	/EIGHT <u> </u>	9.5*
CASING DEPTH	1/691'	DRILL PIPE		_TUBING			OTHER	
SLURRY WEIG	нт <i>/25°-/</i> 35°	SLURRY VOL	60 Bb1	WATER gal/sl	k 9.1-9.0	CEMENT LEFT in	CASING	
DISPLACEMEN	T 27.4 SV	DISPLACEMEN	NT PSI	18 PSI /20	<u>פעלק בהייו 8</u>	RATE		
REMARKS: 5	afet meeting	- kiz w	to 415" co	mar Brew	CITY	4/11.00 fr	sh water	Mised
150 sus 6	alta Pezmis C	enet 4/8	70 90) +/4	Cherrolly	@ 12.80/90	. Tail in u	50 ses this	cvut
Cement w/	SA Ket so I he	2 /354/0	e J. Lueshad	pro + like	s iclease pl.	19 Bisplace	27.4 B	ou fash
Wester Fin	e) Dung press	ve 200 PS	I Bunga	lig to 1200	PSI. Ielegy	pressure flood	1 play hold	. Carl
count cet	WAS to SWIFE	ce ? 11 Bbl	sluce to a	t. Job con	olett. Rig de	<u> </u>		<u> </u>
· · · · ·			<u> </u>					
			·· 7	hany Ya."				

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461		PUMP CHARGE	1085.00	1085.00 V
5406	45	MILEAGE	4.20	189.00
1131	150 343	60140 Posmis conet	/3.18	1927.00 V
11198	1030 *	87, 91	. 22	227.04 1
VIETA	156#	1 pherosolfu	1.35	202.50
1124A	50 515	thicked cement	20.16	1068.00
1116/	256*	5 4 Kal-scol/sw	. 46	115.01 V
5767	9. 2	ton mileage bulk trus	0/42	236.00 V
55026	3 1/2 hrs	80 Obl vac. = ex	90.00	315.00 V
1,23	3000 9015	city water	17.30/110	51.90
4464	1	4'h" top asseptie	47.25	47.25 V
			Jubistal	5953.69
		7.15		259.45
avin 3737	11		ESTIMATED TOTAL	6213 14

TITLE TO-1-pusher 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. Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

September 19, 2013

Mark Haas Haas Petroleum, LLC 11551 ASH ST., STE 205 LEAWOOD, KS 66211

Re: ACO1 API 15-207-28610-00-00 Arnold 2i-HP NE/4 Sec.35-23S-14E Woodson County, Kansas

### **Dear Production Department:**

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Mark Haas