

Kansas Corporation Commission Oil & Gas Conservation Division

1162786

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 🔲 East 🗌 West
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?
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 Twp S. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
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 III Approved by: Date:					

Side Two



Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
time tool open and clo	osed, flowing and shu es if gas to surface te	d base of formations pen t-in pressures, whether s st, along with final chart(s well site report.	hut-in pressure read	ched static level,	hydrostatic press	ures, bottom h	ole temperature, fluid
Drill Stem Tests Taker (Attach Additional		Yes No		og Formation	n (Top), Depth an	d Datum	Sample
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	е		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitte (If no, Submit Copy	d Electronically	Yes No Yes No Yes No					
List All E. Logs Run:							
		Report all strings set-		ermediate, producti		T 2 .	
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 / SQL	JEEZE RECORD	I	1	
Purpose: —— Perforate —— Protect Casing —— Plug Back TD	Depth Top Bottom	Type of Cement	# Sacks Used	s Used Type and Percent Additives			
Plug Off Zone							
Shots Per Foot		DN RECORD - Bridge Plug Footage of Each Interval Perl					
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Meth		Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil I	Bbls. Gas	Mcf Wate	er Bl	ols. G	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:	N.	METHOD OF COMPLE	ETION:		PRODUCTIO	DN INTERVAL:
Vented Solo	d Used on Lease	Open Hole	Perf. Dually		nmingled mit ACO-4)		
(If vented, Su	bmit ACO-18.)	Othor (Specify)	(Submit)	100-0) (SUDI	IIII ACO-4)		

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

CONSOLIDATED OIL WELL SERVICES, INC.

P. O. Box 884

El Dorado, Ks. 66720

Chanute, Kansas 66720

11/2% per month (annual per-

centage rate of 18%) will be added to balances over 30 days.

PHONE (316) 431-9210

THE WATER THE OFF	William A Company				The state of the s
Account No.	Invoice No. 50594	Invoice Date 9/5/80	Job Ticket No. 27346	Control of the Contro	Nearest Town
	all the second control of the second	Lease and Well No.	(A) 2002.0. (B) Y (B) (B) (B) (B) (B) (B)	County	State
	Stockebrank #10				
то:	Tec Drilling		٦	TERMS: Net 30 A Finan	Days. nce Charge computed at

	Quantity		Unit		
Description	Number	Unit	Price	Code	Amount
Services: Pumping Charge — Cementing Pumping Charge — Other				12 13 13	\$ 322.00
Cement: Bulk Cement	101	Sack	4.10	19 19	414.10
Ton Mileage				20	80.80
Additives: Premium Gel Flo Seal Calcium Chloride Other	2	Sack Sack Sack	6.35	16 15 15 15	12.70
Equipment: Cementing Plug Float Shoe Centralizers		Each Each Each		21 21 21 21 21	6.00
Transport and Vacuum: Transport Truck Vacuum Truck Fuel Surcharge		Hour Hour		17 18 18	
Hauling		Hour Hour		22 22 23 23 23	
	•	Sales Tax Total		76	\$.21 \$ 835.81

THANK YOU