Kansas Corporation Commission 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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
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 ☐ 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?
If Workover/Re-entry: Old Well Info as follows:	·
Operator: Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Conv. to ENHR	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 TwpS. R
☐ ENHR Permit #: ☐ GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date 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:		

1164772 CORRECTION #1

Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
time tool open and cle	osed, flowing and shes if gas to surface t	nd base of formations per ut-in pressures, whether s est, along with final chart(al well site report.	shut-in pressure rea	ched static level,	hydrostatic press	ures, bottom h	ole temperature, fluid
Drill Stem Tests Taker (Attach Additional		Yes No		og Formatio	n (Top), Depth and	d Datum	Sample
Samples Sent to Geo	ological Survev	☐ Yes ☐ No	Nam	e		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:							
		Report all strings set-	RECORD No conductor, surface, into		on, 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 / SQL	JEEZE RECORD	I	1	
Purpose: —— Perforate —— Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives			
Plug Back TD Plug Off Zone							
Shots Per Foot	PERFORAT Specify	TION RECORD - Bridge Plug Footage of Each Interval Per	gs Set/Type forated		cture, Shot, Cement 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 El	NHR. Producing Met		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wat	er B	bls. G	Sas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COMPLI	ETION:		PRODUCTIO	ON INTERVAL:
Vented Solo			Perf. Dually	/ Comp. Cor	nmingled		
(If vented. Su	abmit ACO-18.)	Othor (Specify)	(Submit	ACU-5) (Sub	mit ACO-4)		

Summary of Changes

Lease Name and Number: Light C-5 API/Permit #: 15-107-24712-00-00

Doc ID: 1164772

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	07/05/2013	11/12/2013
Electric Log Run?	No	Yes
Electric Log Submitted Electronically?		Yes
Elogs_PDF		Gamma
Method Of Completion - Perf	No	Ray/Neutron/CCL Yes
Perf_Material_1		Acid 500 gal 7.5% HCL
Perf_Record_1		276-286
Perf_Record_2		287-293
Perf_Shots_1		3
Perf_Shots_2		3

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=11 42596	//kcc/detail/operatorE ditDetail.cfm?docID=11 64772