

Kansas Corporation Commission Oil & Gas Conservation Division

1166084

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 ☐ SWD ☐ SIOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Amount of Surface Pipe Set and Cemented at: Feet Multiple Stage Cementing Collar Used?
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ sx cmt.
Operator:	
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content:ppm Fluid volume:bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD ☐ Conv. to GSW	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 #:	QuarterSecTwpS. R East West
ENHR Permit #:	County: Permit #:
GSW Permit #:	County Fermit #
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 cl	osed, flowing and shu es if gas to surface te	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	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
		ADDITIONA	L CEMENTING / SQI	JEEZE RECORD	1		
Purpose: Depth Type of Cement — Perforate Top Bottom Protect Casing		# Sacks Used	Type and 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		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	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:		METHOD OF COMPL	_		PRODUCTIO	ON INTERVAL:
Vented Sol	d Used on Lease	Open Hole	Perf. Dually (Submit		mit ACO-4)		

LEASE NAME Dempsey OPERATOR Utak O./ STARTDATE: 10-9-13
WELL # KOTH LO ATION: API =
SURFACE PIPE: 7" Ft 20 Cement(=bags) 6
PRODUCTION: PIPE: SIZE: 27/6 = FT 811-15 baff/c 779.55

Thickness	Formation	Coniment	Depth	Thickness	Formation	Comment	Depth
۲	soil line		2	2	1		661
3	line		5	19	shale		600
5	shale		10	5	10:1 50-0	good bleed	685
3	line		13	4	on sand silty shalk	3	689
24	Shale		39	28	Thele		רור
18	1'		57	_3	lin		720
96	lin- shalo		153	17	shall		737
18	line		171	1	grey sand		738
28	shale		199	1	o. (sand	good bleed	739
	line		204	L	brokensand	good bleed	741
39	Stale		243	5	oilsad	very Jood blead	746
	lin-		253	5	silty shele		751
16	shale		269	69	shile		820
14	1		253				
	lim shalo		289				
8	lim		297				
3	shale		302				
		BKC	340				
38	1.50		454			IDBS TOXOS DES. IS AL.	
<u> 114</u>	shite sal		468			W. dpoirel	
28		-	494				
14	shale		510				
44			554				
8	shele		562				
12			574				
4	shale 1:-		578			NO	
9	Shale		567				
5	line		592			Kenny	
7	shale		599) core	
9	lim		608			31.9 BAFFLE	
3	Shele		611			820 TD	The second second second
4	brown line	good bleed	615			811.4577	
	shale	Joseph March	617				
3	oil sand	ury good bleed	620				
39	sh412		659	1			



263163

TICKET NUMBER	44695
LOCATION OHOL	va KS
FOREMAN (Gey	Kennedy

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

FIELD TICKET & TREATMENT REPORT

020-431-8210	01 000-401-001	0	CEME	:N (
DATE	CUSTOMER#	WELL NA	ME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/11/13	5000	Dupsay	#KOI-4	SE 29	17	21	FR
USTOMER		1 /			基本企业	1	STATE OF THE PARTY OF
24	nger Ven	tures		TRUCK#	DRIVER	TRUCK #	DRIVER
AILING ADDR	RES6	- N		481	Case, Ken	15050	
5113	East-No	M. St		466		Danny	Meeting
ITY	0 101	STATE ZIF	CODE		GarMoo	<u> </u>	
Saline	<u> </u>		7401	228	Mat Coc	V	
				370	Jas Ric	1	y are me see
DB TYPE OF	ngstring	HOLE SIZE SIZE	HOLE DEP	TH_COST	CASING SIZE & V	WEIGHT 27	"EUE
ASING DEPT	H 811	DRILL PIPE	-TUBING b	affle - 779	1	OTHER	-
URRY WEIGI	НТ	SLURRY VOL		l/sk			,
SDI ACEMEN	TU. 57 11/5	DISPLACEMENT PS	BI MIX PSI				
					RATE 4.5 6	pm	
		meeting, gs	tablished circ	ulation in	ixed + pu	med 100	# Premi
el tolle		0 bbs fre	sh water n	rixed to	sunged 129	Sts 2/50	POZUL
eurent	w/ 2% g	el + /2 #	Pheno soul pe		sent to s	uctage, y	0.1.0
ions of	min now	and 21/2"	rubber plug y	La La 100-	11114	1-11-11	TONDOX
1000	1	TICL COLO	can be trained	DO THE U	7 451 12	is Megn	unter,
(ESS VIEC	40 800°	131, leter	sed pressure	, Shut in	casing.		
						-	
					// /		
					114		
1201 /10	d ocession	Por 30 mis	MITH		1271		
W WAY	Z. P. ESSOY		ACCUIN				
ACCOUNT							
CODE	QUANITY	or UNITS	DESCRIPTION	of SERVICES or PR	ODUCT	UNIT PRICE	TOTAL

CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401		FUMP CHARGE		105000
5406	20 mi	MILEAGE		1045.00
5402	811'	casing toologe		
5407	minimum	ton mileage		365.00
55026	ahrs	SO Vac		. 18000
1124	129 stes	50/50 Pozuix ceresent		1483.50
1118B	317 #	Tremium Gel		69.74
1107A	65 #	Phenoseal		87.75
4402		Phenoseal D's "rubber plug		29.50
vln 3737		7.65		127.80
	le Co. Rep on local	TITLE	ESTIMATED TOTAL DATE	3515.29

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 for

