



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1163980  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- CM *(Coal Bed Methane)*
- Cathodic     Other *(Core, Expl., etc.):* \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening     Re-perf.     Conv. to ENHR     Conv. to SWD
- Plug Back       Conv. to GSW     Conv. to Producer
  
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion    Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27     NAD83     WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

*(Data must be collected from the Reserve Pit)*

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. \_\_\_\_\_  East  West

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  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



1163980

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**INSTRUCTIONS:** Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, 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 / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:      Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. \_\_\_\_\_ Producing Method:  
 Flowing  Pumping  Gas Lift  Other *(Explain)* \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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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/>

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

Sam Brownback, Governor

October 18, 2013

Elizabeth Brinkmeyer  
Energex Kansas, Inc.  
2038 S. PRINCETON ST., STE B  
OTTAWA, KS 66067

Re: ACO1  
API 15-059-26510-00-00  
Gilchrist BSP-GC11  
SE/4 Sec.04-18S-21E  
Franklin 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,  
Elizabeth Brinkmeyer



**CONSOLIDATED**  
Oil Well Services, LLC

261875

TICKET NUMBER 42390

LOCATION Ottawa KS

FOREMAN Fred Madur

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-29-13	2577	Gilechrist # BSP GC 11	SE 4	18	21	FR
CUSTOMER Enerjet Resources Inc			TRUCK #			
MAILING ADDRESS 10975 Grandview Dr.			DRIVER			
CITY Overland Park		STATE KS	TRUCK #		DRIVER	
ZIP CODE 66210		TRUCK #		DRIVER		
		TRUCK #		DRIVER		
		TRUCK #		DRIVER		
		TRUCK #		DRIVER		

JOB TYPE Longstring HOLE SIZE 6 HOLE DEPTH 720 CASING SIZE & WEIGHT 2 7/8 EUE  
 CASING DEPTH 695 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 2 1/2" Plug  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 5 BPM

REMARKS: Hold crew safety meeting. Establish pump rate. Mix Pump 100#  
 Gel Flush. Mix & Pump 94 sks 70/30 Premix Cement 20% Gel  
 5% Salt 1/2" Phenol Seal 1sk. Cement to Surface. Flush pump  
 & lines clean. Displace 2 1/2" Rubber plug to casing TB  
 Pressure to 800# PSI. Release pressure to set float  
 valve. Shut in casing

JTC Drilling

Fred Madur

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1085 <sup>00</sup>
5406	20 mi	MILEAGE		N/C
5402	695	Casing footage		N/C
5407	1/2 minimum	Ton Miles	510	184 <sup>00</sup>
5500C	1 1/2 hr	80 BBL Vac Truck	369	135 <sup>00</sup>
1127	94 sks	70/30 Premix Cement		1254 <sup>00</sup>
118B	266#	Premium Gel		58 <sup>52</sup>
1111	191#	Granulated Salt		74 <sup>49</sup>
1107A	47#	Phenol Seal		63 <sup>48</sup>
4402	1	2 1/2" Rubber plug		29 <sup>80</sup>
			7.65%	SALES TAX
				ESTIMATED
				TOTAL

completed

Ravin 9797

AUTHORIZATION Jay Webb Enerjet

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

Operator License #	33741	API #	15-059-26510-00-00		
Operator	Energex Kansas	Lease Name	Gilchrist		
Address	2038 S. Princeton St., Ste B	Well #	BSP-GC11		
City	Ottawa, KS 66067	Spud Date	8/28/2013		
Contractor	JTC Oil, Inc.	Cement Date			
Contractor License #	32834	Location	Sec 4	T 18	R 21
T.D.	720		1835 feet from	S	line
T.D. of pipe	695		988 feet from	E	line
Surface pipe size	7"	County	Franklin		
Surface pipe depth	20'				
Well Type	Production				

Driller's Log

Thickness	Strata	From	To
5	Dirt	0	5
5	Lime	5	10
7	Shale	10	17
8	Lime	17	25
93	Shale	25	118
20	Lime	118	138
14	Shale	138	152
3	Lime	152	155
5	Shale	155	160
10	Lime	160	170
36	Shale	170	206
16	Lime	206	222
9	Shale	222	231
29	Lime	231	260
5	Black Shale	260	265
22	Lime	265	287
5	Coal	287	292
12	Lime	292	304
147	Shale	304	451
10	Lime	451	461
1	Shale	461	462
16	Lime	462	478
10	Shale	478	488
8	Sandy Shale	488	496
29	Shale	496	525
6	Lime	525	531
11	Shale	531	542
3	Lime	542	545
11	Black Shale	545	556
5	Lime	556	561
11	Shale	561	572
4	Lime	572	576
2	Lime Oil	576	578
2	Lime Oil	578	580

2	Lime Oil/Shale	580	582	
4	Shale	582	586	
2	Oil	586	588	OK
2	Oil	588	590	
2	Oil	590	592	
2	Good	592	594	
2	OK	594	596	
2	OK	596	598	
2	OK	598	600	
2	Little	600	602	
2	Little	602	604	
2	Tiny	604	606	
10	Sandy Shale	606	616	
42	Shale	616	658	
2	Sand/Little Oil	658	660	
2	Sand/Little Oil	660	662	
2	Tiny	662	664	
8	Sandy Shale	664	672	
48	Shale	672	720	