

## Kansas Corporation Commission Oil & Gas Conservation Division

### 1168880

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? Yes No  If yes, show depth set: Feet  If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt.
Operator:	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	

#### **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  # Sacks Used  Type and Percent Additives							
Plug Off Zone							
Shots Per Foot		DN RECORD - Bridge Plug Footage of Each Interval Perl			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 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)		



# Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083

Fax: 913-557-9084

# Paola, KS 66071

### **WELL LOG**

Colt Energy, Inc. Kirk #KJ5 API #15-001-30,666 May 13 - May 15, 2013

Thickness of Strate	Farmatian	T-4-1
Thickness of Strata 52	Formation lime	<u>Total</u> 52
49	shale	
12	lime	101
11		113
47	shale	124
	lime	171
18	shale	189
7	lime	196
3	shale	199
8	lime	207
45	shale	252
60	lime	312
3	shale	315
52	lime	367
30	shale	397
7	sand	404
7	shale	411
18	sand	429
76	shale	505
5	limey sand	510
9	sand	519
19	shale	538
12	lime	550
14	shale	564
7	lime	571
10	shale	581
4	sand	585
33	shale	618
8	sand	626
7	shale	633
2	lime	635
1	coal	636
4	shale	640
14	lime	654
10	shale	664
4	lime	668
12	shale	680
5	lime	685
17	shale	702
8		
O .	lime	710

22	Sec. 2	shale	732
18		broken sand	750 brown & green, light odor
8		shale	758
3		lime	761
67	y 8	shale	828
75		broken sand	903 brown & grey, oil odor 890
4		oil sand	907 brown, light show
3		oil sand	910 black, light odor
15		shale	925
1	8	coal	926
27		shale	953
22		broken sand	975 brown & white, light oil show
			975 TD

Drilled a 12 1/4" hole to 21.5'. Drilled a 7 7/8" hole to 975'.





LOCATION Eureka KS
FOREMAN Shannon Feck

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

FIELD TICKET & TREATMENT REPORT

CEMENT APE # 15-001-30666

620-431-9210	or 800-401-6016	)		CEINIEIA	MAL	, , , , , ,		
DATE	CUSTOMER#	WELL	NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
5/16/2013	1828	Mich	# K	J-5	9	24	18E	Allen
CUSTOMER							2 100 7 100	
Col	+ Energ	v. INC.	100		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE					445	Dave 6		
	P.O. Box	1 388			479	colbyn		
CITY			ZIP CODE					
10%		MS	7					
JOB TYPE 4/		HOLE SIZE	77/8	HOLE DEPTH	975	CASING SIZE & V	VEIGHT 5/2	15.50
CASING DEPTH	971.85	DRILL PIPE		_TUBING			OTHER	
SLURRY WEIGH	IT 13.6	SLURRY VOL_		WATER gal/s	k	CEMENT LEFT in		
DISPLACEMENT	122.5 Bbl	DISPLACEMEN'	T PSI	MIX PSI		RATE 4 BAN	1	
KO W = N O C O	Fety Mee			0 5/2"		/ washead	wash a	lown 101
W 30 Bb	7	ixed 36		el flush	, all hards	15 Bb/	dye HZI	o, mixed
160 5ks		A ceme	nt W/	2% 98	1% cal	cium, + 17	# Phenos	eal/sk.
Shut do	wn was	hout 1	omo '4	- lines.	displace	w/ 22.5		O, Etoppa
plug w	wiveline	@ 942!	Good C	revlation	n@ all	times a	27 Bbl .	Slurry to
pit. We	ll wireline	n @ 300	-400 Psi.	Job	Complete			
			11-	onks	Shamon 4	1.601		
			101	arin)	20,000	Crew		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1085,00	1085.00
5406	50	MILEAGE	4.20	210.00
1/045	160 5K5	class "A" cement	15.70	2512.00
1/18 B	300 #	bel@ 2%	, 27	66.00
1102	150 #	Calcium @ 1%	, 78	17.00
1107 A	160 #	Phenoseal @ 1#/sk	1.35	216.00
			1 41	C2- 16
5407A	7.52 Tons	Ton mileage bulk Truck	1.41	530.16
		111-01	72.50	- 60
4406		51/2" TOP Rubber Plug	73.50	73.50
IIKB	300#	Gel flush	, 22	66.00
			SubTotal	4875,66
		2500 NU 7.550	6 SALES TAX	230.31
Ravin 3737	02 - 11	1//	ESTIMATED TOTAL	5105.97

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.

TITLE