



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1166445  
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: \_\_\_\_\_



1166445

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](mailto: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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# JOB SUMMARY

PROJECT NUMBER: **TN # 166**      TICKET DATE: **7/8/2013**

COUNTY: **Kearney**      COMPANY: **Linn Energy**      CUSTOMER REP: **Weldon Higgins**  
 LEASE NAME: **L.B. Willits**      Well No.: **A4-ATU-29**      JOB TYPE: **Surface**      EMPLOYEE NAME: **Eddie Pickard**

EMP NAME	Eddie Pickard	Derek Lewis			
	Chris Lewis				
	Mario Abrego				
	Rory Morris				

Form Name: \_\_\_\_\_ Council - Grave Type: \_\_\_\_\_  
 Packer Type: \_\_\_\_\_ Set At: \_\_\_\_\_  
 Bottom Hole Temp: \_\_\_\_\_ Pressure: \_\_\_\_\_  
 Retainer Depth: \_\_\_\_\_ Total Depth: \_\_\_\_\_

Date	Called Out	On Location	Job Started	Job Completed
	7/8/13	07/12/13	07/12/13	07/13/13
Time	15:00	1930	2230	100

Type and Size	Qty	Make
Auto Fill Tube	1	IR
Insert Float Valve	1	IR
Centralizers	6	IR
Top Plug	1	IR
HEAD	1	IR
Limit clamp	1	IR
Weld-A	2	IR
Texas Pattern Guide Shoe	1	IR
Cement Basket	0	IR

Well Data						
	New/Used	Weight	Size	Grade	From	To
Casing	New	24#	8.625"	J40	KB	730
Liner						
Liner						
Tubing						
Drill Pipe						
Open Hole			12.25"		K.B.	?      Shots/Ft
Perforations						
Perforations						
Perforations						

Materials			
Mud Type	WBM	Density	Lb/Gal
Disp. Fluid	H2O	8.33	
Spacer type	H20	BBL	10
Spacer type		BBL	
Acid Type		Gal	%
Acid Type		Gal	%
Surfactant		Gal	ln
NE Agent		Gal	ln
Fluid Loss		Gal/Lb	ln
Gelling Agent		Gal/Lb	ln
Fric. Red.		Gal/Lb	ln
MISC.		Gal/Lb	ln

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
07/12/13	6.0	07/12/13	3.0	Surface
				44 BBL Cement to Surf
				Good Circ during job
Total	6.0	Total	3.0	

Perfpac Balls \_\_\_\_\_ Qty. \_\_\_\_\_  
 Other \_\_\_\_\_  
 Other \_\_\_\_\_  
 Other \_\_\_\_\_  
 Other \_\_\_\_\_

Pressures	
MAX 900	AVG 180
Average Rates in BPM	
MAX 4	AVG 3
Cement Left in Pipe	
Feet 44	Reason SHOE JOINT

Cement Data			
Stage	Sacks	Cement	Additives
1	450	Class C	2% C.C. + 0.25#/SK. Celloflake
2			
3			
4			

Summary			
Preflush Breakdown	Type: _____	Preflush: BBI	10.00
	MAXIMUM	Load & Bkdn: Gal - BBI	
	Lost Returns-N	Excess /Return BBI	44
Average	Actual TOC	Calc TOC	Surface
ISIP 5 Min	Frac. Gradient	Treatment: Gal - BBI	
	10 Min	Cement Slurry: BBI	105.0
	15 Min	Total Volume	BBI 160.00

CUSTOMER REPRESENTATIVE Weldon Higgins

SIGNATURE \_\_\_\_\_

**Thank You For Using  
O - TEX Pumping**

<b>JOB SUMMARY</b>		PROJECT NUMBER <b>TN # 167</b>	TICKET DATE <b>7/13/2013</b>
COUNTY <b>Kearny</b>	COMPANY <b>Linn Energy</b>	CUSTOMER REP <b>Weldon Higgins</b>	
LEASE NAME <b>L.B. Willits</b>	Well No. <b>A4 - ATU - 29</b>	EMPLOYEE NAME <b>Jessie McClain</b>	
JOB TYPE <b>Production</b>			

EMP NAME <b>Jessie McClain</b>					
<b>Lamont Patterson</b>					
<b>Steve Crocker</b>					

Form Name Council - Grove Type: \_\_\_\_\_

Packer Type \_\_\_\_\_ Set At \_\_\_\_\_

Bottom Hole Temp. \_\_\_\_\_ Pressure \_\_\_\_\_

Retainer Depth \_\_\_\_\_ Total Depth \_\_\_\_\_

Date	Called Out	On Location	Job Started	Job Completed
	7/13/13	07/14/13	07/14/13	07/14/13
Time	2300	430	1107	1246

Type and Size	Qty	Make
Auto Fill Tube	1	IR
Insert Float Valve	1	IR
Centralizers	26	IR
Top Plug	1	IR
HEAD	1	IR
Limit clamp	1	IR
Weld-A	0	IR
Guide Shoe	1	IR
Cement Basket	0	IR

Well Data							
	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	15.5	5.5		KB	3115	2000
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7.875"		K.B.		
Perforations							Shots/Ft.
Perforations							
Perforations							

Materials			
Mud Type	WBM	Density	8.9 Lb/Gal
Disp. Fluid	H2O	Density	8.33 Lb/Gal
Spacer type	m Silicate BBL		35
Spacer type	BBL		
Acid Type	Gal.		%
Acid Type	Gal.		%
Surfactant	Gal.		In
NE Agent	Gal.		In
Fluid Loss	Gal/Lb		In
Gelling Agent	Gal/Lb		In
Fric. Red.	Gal/Lb		In
MISC.	Gal/Lb		In
Perfpac Balls		Qty.	
Other			
Other			
Other			
Other			

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
07/14/13	9.6	07/14/13	2.0	Production
				Final pump psi 500
				58 bbls cement to surface
				325 ft3 or 89 sacks
Total	9.6	Total	2.0	

<b>MAX</b> 1100	<b>AVG</b> 50
<b>MAX</b> 4	<b>AVG</b> 3
<b>Feet</b> 44	<b>Reason</b> Shoe Joint

Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	205	Class C	0.2% C-41P, + 5% GYP, + 0.25%W/SK CaO/Sk	23.49	3.65	10.8
2	95	Class C	2% GEL + 0.2% C-16A, + 2% C.C.	10.4	1.90	13.0
3			DO NOT PUMP OVER 4 B.P.M. WATCH FOR CIRC. WHILE PUMPING JOB. 2 B.P.M. MIN. IF NO CIRC.			
4						

Summary			
Preflush Breakdown	Type: _____	Preflush: BBI	35.00
	MAXIMUM _____	Load & Bkdn: Gal - BBI	
	Lost Returns-N _____	Excess /Return BBI	58
	Actual TOC _____	Calc. TOC: _____	Surface
Average ISIP 5 Min	Frac. Gradient 10 Min	Treatment: Gal - BBI	165.0
	15 Min _____	Cement Slurry: BBI	273.00
		Total Volume: BBI	

CUSTOMER REPRESENTATIVE Weldon Higgins

SIGNATURE  
**Thank You For Using  
O - TEX Pumping**

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

November 01, 2013

Shawn Hildreth  
Linn Operating, Inc.  
600 TRAVIS STE 5100  
HOUSTON, TX 77002-3018

Re: ACO1  
API 15-093-21887-00-00  
L.B. WILLITS A4-ATU-29  
NW/4 Sec.05-26S-38W  
Kearny 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,  
Shawn Hildreth