



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1179361
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: _____

1179361

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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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802 N. Industrial Rd.
P.O. Box 664
Iola, Kansas 66749
Phone: (620) 365-5588

Payless Concrete Products, Inc.

SOLD TO:
CASH CUSTOMER

Handwritten: A. J. Mott

10/1/21
JV OIL P.O. BOX 151 CHANUTE
39 W TO 75 S 4 MI TO HIGH
PRARIE CHURCH W 4 MI TO TEE
S 1/2 MI STAY LEFT TO NESS RD
S TO 1600 E 1/2 MI

SHIP TO:

CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's location, seller assumes no responsibility for damages in any manner to abutments, structures, or other property. The maximum allowed time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for mixing this concrete. Water is added at customer's request.
Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	% TRL	DRIVER/TRUCK	PLANT/TRANSACTION #
02:17:53p	WELL	13.00 yd	13.00 YD	0.00	CS 35	WJ20
DATE	to Date	LOAD #	YARDS DEL	BATCH #	WATER/TNK	TICKET NUMBER
12-19-13	today	4	13.00 YD	15183	6 yd	35898

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
13.00	WELL	WELL (10) SACKS PER UNIT	58.00	754.00
13.00	MIX & HAUL	MIXING & HAULING	25.00	325.00
3.00	TRUCKING	TRUCKING CHARGE	55.00	165.00
1.00	WINTER CHARGE	WINTER CHARGE	30.00	30.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/UNDER TEST TAKEN	TIME ALLOWED
		4:50	1. JOB NOT READY 2. SLOW POUR OR PAUSE 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	
LEFT PLANT	ARRIVED JOB	START UNLOADING	6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
2:34	8:30	5:35		
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		

Subtotal \$	1274.00
Tax % 6.150	78.35
Total \$	1352.35
Order \$	1352.35
ADDITIONAL CHARGE 1	
ADDITIONAL CHARGE 2	
GRAND TOTAL	

WARNING
IRITATING TO THE SKIN AND EYES
Concrete Portland Cement, Water, Rubble, Sand and Gravel. MIXED CONCRETE CONTACT MAY CAUSE BLINDS. Avoid Contact With Eyes and Nearest Contact With Skin. A Case of Contact With Skin at Once. Flush Thoroughly with Water, if Irritation Persists, Get Medical Attention. **NESS CHURCH HWY.**

CONCRETE IS A PERISHABLE COMMODITY and BECOMES THE PROPERTY OF THE PURCHASER UPON LEAVING THE PLANT. ANY CHARGES OR CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorney's fees, incurred in collecting any sums owed.

All accounts not paid within 30 days of delivery will bear interest at the rate of 2% per annum.

We are responsible for Reactive Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.

A 25¢ Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.

Excess Delay Time Charged @ \$20/Hr.

PROPERTY DAMAGE RELEASE
TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE
Dear Customer: The driver of this truck, presenting the RELEASE to you for your signature is of the opinion that the size and weight of the load may possibly cause damage to the premises and/or adjacent property. It is your responsibility to determine if the premises and/or adjacent property can handle the load. If you sign this RELEASE, you are releasing the driver from any responsibility for any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of the material and that you understand and agree to the above conditions. If you do not sign this RELEASE, the undersigned agrees to indemnify and hold harmless the driver of this truck and the supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to whom delivery of the material is made.

EXCESSIVE WATER IS DETERMINAL TO CONCRETE PERFORMANCE
H₂O Added By Request/Authorized By
GAL X

WELL WASTE

LOAD REGISTERED BY

NOTICE: PLEASE BE CAREFUL TO READ THE HEALTH WARNING LABEL ON EACH DRUM. SEE REVISIONS FOR ANY CHANGES.
31633-313-30 (REV. 01-98)

Handwritten: X 1352.35

2	50	34	Line	40	shale	44	lime
4	100		shale				
6	150	148	lime				
8	200		sand				
10	250	231	lime				
12	300		lime				
14	350	343	gas lime				
16	400		lime				
18	450		lime				
20	500	475	lime	476	shale		
22	550	527	lime	533	shale	548	lime
24	600	580	lime	581	shale		
26	650		shale				
28	700		lime	690	shale		
30	750	738	summit	744	lime		
32	800	775	shale				
34	850	832	lime	833	shale	835	shale
36	900	886	lime	887	coal	890	shale
38	950	925	coal	930	shale		
40	1000	939 - 942					
42		945 - 947					
44		949 - 950					

Pipe Set
935

68 lime

50 shale 763 lime
756 shale 60 through
764 sand

840-848 odd sand

shale 924 lime

E. Morton 22-H 12-17-13 TD 951

951TD