



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1209129  
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: \_\_\_\_\_

1209129

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 <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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Hi Plains Lumber  
CASH RECEIPT

SKU #	DESCRIPTION	EXT
9901004	Portland Cement Type I & Qty 35.00 @ 14.30	500.50

SUBTOTAL: 500.50  
TAX: 38.29  
TOTAL: 538.79  
TENDERED: 538.79  
CHANGE: 0.00

Hi-Plains Lumber Company  
Returned merchandise must be accomp  
with this receipt.

04/02/14 08:58:43 721446 cohys

Hi Plains Lumber  
CASH RECEIPT

SKU #	DESCRIPTION	EXT
	PALLET Pallet	17.00

SUBTOTAL: 17.00  
TAX: 1.30  
TOTAL: 18.30  
TENDERED: 18.30  
CHANGE: 0.00

Hi-Plains Lumber Company  
Returned merchandise must be accomp  
with this receipt.

04/02/14 09:00:37 721447 cohys

**COMPANY:** Magellan  
**COMPANY REP.:** Tyler Kraus  
**LOCATION:** Sharon Springs Terminal  
**JOB NO.:** 340310594  
**FOREMAN:** Todd/Jay  
**DRILLER:** Crescent

**DATE:** 4/14/2014  
**DIA. HOLE:** 10 in  
**DEPTH:** 300  
**COKE TYPE:** Petroleum  
**# OF COKE:** 175 bags  
**# OF BENTONITE:** 220

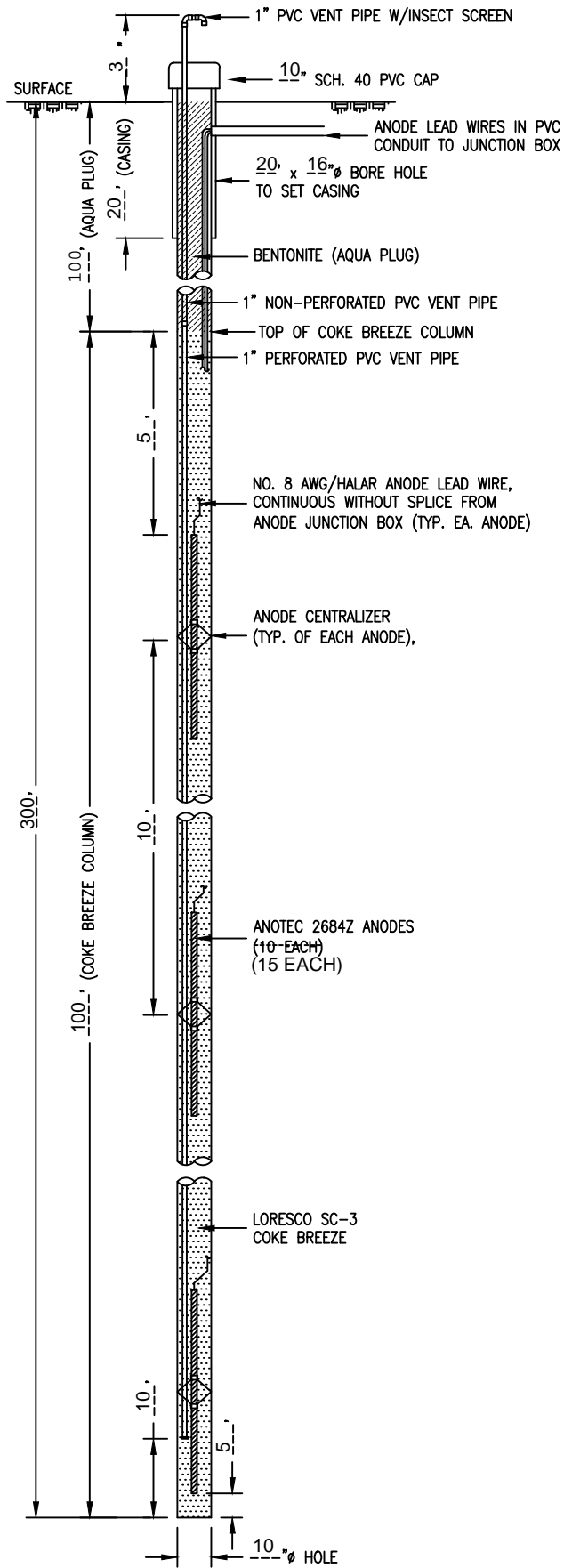
**CASING:** PVC SDR 21  
**DIAMETER:** 10 in  
**CASING DEPTH:** 20 ft  
**# OF ANODES:** 15  
**ANODE TYPE:** Anotec #3448 Z  
**ANODE LEAD:** Halar



**RECTIFIER MFG:** \_\_\_\_\_  
**MODEL:** \_\_\_\_\_  
**SERIAL #:** \_\_\_\_\_  
**V-DC:** \_\_\_\_\_ **A-DC:** \_\_\_\_\_

DEPTH FT.	DRILLERS LOG	ANODE NO.	ELECTRIC LOG			
			VOLTS	AMPS	RESIS.	REMARKS
0			BATTERY			
5						
10						
15						
20	Cemented Sand			0		
25						
30				3.4		
35						
40	Cemented Sand			3.9		
45						
50	Sand			5		
55						
60	Sand			13.2		
65						
70	SandStone Little Clay			14		
75						
80	Sand Little Clay			13		
85						
90				6		
95						
100	Sand Little Clay			5.9		
105						
110				13.8		
115	Sand Little Clay					
120	Sandy Clay			21		
125						
130				17.2		
135						
140	Sandy Clay			12.1		
145						
150		15		14.7		
155						
160	Sandy Clay	14		15.4		
165						
170		13		26.3		
175						
180	Sandy Clay	12		25.1		
185	Blue Shale					
190		11		25.6		
195						
200	Blue Shale	10		25.4		
205						

DEPTH FT.	DRILLERS LOG	ANODE NO.	ELECTRIC LOG			
			VOLTS	AMPS	RESIS.	REMARKS
210		9		31.8		
215						
220	Blue Shale	8		26.4		
225						
230		7		23		
235						
240	Blue Shale	6		24.4		
245						
250		5		23.8		
255						
260	Blue Shale	4		22.7		
265						
270		3		22.6		
275						
280	Blue Shale	2		22.1		
285						
290		1		22.3		
295						
300	Blue Shale					
305						
310						
315						
320						
325						
330						
335						
340						
345						
350						
355						
360						
365						
370						
375						
380						
385						
390						
395						
400						



G:\Regional\JOBS\2013\31\_TULSA\340310416\_MAGELLAN\_MIDSTREAM\340310416-01.dwg LAYOUT: TEMPLATE

REVISED		REVISIONS		REV.	CHK.	APP.
NO.	DATE					
△						
△						
△						
△						

**corrpro**  
An Aegion Company

DRAWN BY	FMoreno
DESIGNED BY	
DATE	5-1-13
SCALE	N.T.S.
JOB NO.	
DWG. NO.	TEMPLATE

Sharon Springs Terminal

CATHODIC PROTECTION SYSTEM  
DEEP ANODE GROUND BED  
INSTALLATION-SECTION VIEW