



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1213006
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: _____

1213006

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	American Oil LLC
Well Name	Sutor 1-25
Doc ID	1213006

All Electric Logs Run

Dual Induction
Dual Compensated Porosity Log
Mircro
Cement Bond Log

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7056

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-22-14	25	10	20	Rooks	KS		2:45 PM
Location				Ellis N to C.L. 1 1/2 E 1 1/2 N E into			

Lease	Suter	Well No.	1-25	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	White Knight				
Type Job	Bottom Stage				
Hole Size	7 7/8	T.D.	3770'	Charge To	American Oil
Csg.	5 1/2	Depth	3771'	Street	
Tbg. Size		Depth		City	State
Tool	DV	Depth	1562'	The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.	21.83	Shoe Joint	21.83	Cement Amount Ordered	150 sx Com 10% Salt
Meas Line		Displace	89 1/4 bbl		

EQUIPMENT			Common	150
Pumptrk	17	No. Cementer Helper	Poz. Mix	
		Nick		
Bulktrk	14	No. Driver	Gel.	
		Doug		
Bulktrk	Pu	No. Driver	Calcium	
		Brett		

JOB SERVICES & REMARKS			150 KCK 2 gal
Remarks:			Salt 13
Rat Hole			Flowseal
Mouse Hole			Kol-Seal
Centralizers	- 1, 3, 5, 7, 52		Mud CLR 48 - 500 gal
Baskets	- 2, 4, 53		CFL-117 or CD110 CAF 38 20 bbl
DV	5, 53 5 + 53 @ 1562'		Sand
			Handling 163
			Mileage
Mix	500 Gal Mud Flush		5 1/2
	10 bbl H2O Spacer		FLOAT EQUIPMENT
	Mixed 150 sx Com 10% Salt		Guide Shoe
	Displaced 54 bbl H2O		Centralizer - 5
	Displaced 36 bbl Mud		Baskets - 3
	Lift Pressure 600 lbs		AFU Inserts
	Landed @ 1500 lbs		Float Shoe - 1
	Plug held		Latch Down - 1
	Dropped Dart		Rubber Plug - 1
	Opened DV		2 stage tool
	Get circulation		Pumptrk Charge prod string
			Mileage 34

Signature	Ann Wansley	Tax	
		Discount	
		Total Charge	

Bottom Stage

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7057

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-22-14	25	10	20	Rooks	KS		2:50 PM
Lease Sutor				Well No. 1-25		Owner	
Contractor White Knight				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Type Job Top Stage				Charge To American Oil			
Hole Size 7 7/8		T.D. 3770'		Street			
Csg. 5 1/2		Depth 3771'		City State			
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Tool DV		Depth 1562'		Cement Amount Ordered 325 QMDC 1/4 flo			
Cement Left in Csg.		Shoe Joint		Used 250sx QMDC			
Meas Line		Displace 37 bbl		Common 250			
EQUIPMENT				FLOAT EQUIPMENT			
Pumptrk 17	No.	Cementer Helper Nick		Poz. Mix			
Bulktrk 13	No.	Driver David		Gel.			
Bulktrk PU	No.	Driver Brett		Calcium			
JOB SERVICES & REMARKS				Hulls			
Remarks:				Salt			
Rat Hole - 30sx				Flowseal 75#			
Mouse Hole				Kol-Seal			
Centralizers				Mud CLR 48			
Baskets				CFL-117 or CD110 CAF 38			
DV @ 1562'				Sand			
Plugged Rat hole - 30sx				Handling 325			
Mixed 250sx QMDC				Mileage			
Displaced 37 bbl							
Lift pressure @ 700 lbs							
Landed Plug @ 1600 lbs							
Cement circulated							
				Guide Shoe			
				Centralizer			
				Baskets			
				AFU Inserts			
				Float Shoe			
				Latch Down			
				Pumptrk Charge prod string			
				Mileage 34			
				Tax			
				Discount			
				Total Charge			
Signature Ann W. [unclear]							

Top Stage

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 7686

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-18-14	25	10	20	Rooks	KS		5:00 AM
				Location Ellis N to CL, N to CC Rd, E to D.F., 1/2 S, En 2			

Lease Sutor	Well No. 1-25	Owner
Contractor White knight		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Type Job Surface		Charge To American Oil
Hole Size 12 1/4	T.D. 220	Street
Csg. 8 5/8	Depth 217	City
Tbg. Size	Depth	State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint 20	Cement Amount Ordered 150 sk com 3% cc 2% gel
Meas Line	Displace 12 1/2 bbl	

EQUIPMENT

Pumptrk 17	No.	Cementer	Common 150
		Helper Nick	Poz. Mix
Bulktrk 19	No.	Driver	Gel. 3
		Driver Heath	Calcium 5
Bulktrk P4	No.	Driver	
		Driver Travis	

JOB SERVICES & REMARKS

Remarks: cement did circulate	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Koi-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand

Handling 158

Mileage

FLOAT EQUIPMENT

Guide Shoe

Centralizer

Baskets

AFU Inserts

Float Shoe

Latch Down

Pumptrk Charge Surface

Mileage 34

Terry Austin
Signature

Tax
Discount
Total Charge

