



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1213570  
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: \_\_\_\_\_

1213570

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

<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> _____ <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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Company/Operator Colt Energy Inc.		Well No. 8	Lease Name Pendley	Well Location 2185fsl,200fel	1/4 SE	1/4 NE	1/4 NE	Sec. 22	Twp. 26	Rge, 14	
P.O. Box 388 Iola, KS 66749		Well API # 15-207-28838	Type/Well Oil	County Woodson	State KS	Total Depth 1407	Date Started 3/10/2014	Date Completed 3/14/2014			
Job/Project Name/No.		Surface Record			Bit Record			Coring Record			
Driller/Crew Andy King	Bit Size: 11 1/4	From 11 1/4	To 0'	Size 11 1/4	From 0'	To 44'	Core # 1	Size 2 1/8"	From 1236	To 1253	% Rec.
	Casing Size: 8 5/8	From 8 5/8	To 44'	Size 6 3/4	From 44'	To 995	Core # 2	Size "	From 1334	To 1358	
	Casing Length: 44'										
	Cement Used: 10sx										
	Cement Type: Portland										

Formation Record

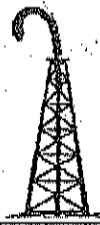
From	To	Formation	From	To	Formation	From	To	Formation
0	4	lime	1220	1225	mostly shale			
4	205	sandy shale	1225	1229	sandy shale (oil odor)			
205	256	lime	1229	1233	mostly sand			
256	259	shale	1233	1236	sand			
259	384	lime	1236	1253	core #1 (oil sand)			
384	405	shale	1253	1310	shale			
405	469	soft lime	1310	1320	grey sandy shale			
469	546	shale	1320	1329	mostly sand			
546	721	kc lime	1329	1334	mostly sand			
721	820	shale	1334	1358	core #2 sand			
820	853	sandy/shale	1358	1407	dark shale			
853	863	lime						
863	970	sandy/shale						
970	986	lime						
986	1014	shale						
1014	1032	lime						
1032	1039	black shale						
1039	1045	lime						
1045	1060	shale						
1060	1075	sandy shale						
1075	1129	shale						
1129	1131	lime						
1131	1219	shale						
1219	1220	lime						

810 E 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561

**Elite**

**Cementing & Acidizing  
 of Kansas, LLC**

API 15-207-28835



**Cement or Acid Field Report**

Ticket No: **1020**

Foreman Roy Ledford

Camp Eureka, Ks

Date	Customer ID #	Lease & Well Number	Section	Township	Range	County	State
3/11/14	1003	Pendley # 8	22	26	14E	Woodson	KS
Customer			Unit #	Driver	Unit #	Driver	
Colt Energy, Inc			102	Shannon F			
Mailing Address			110	Alan M.			
P.O. Box 388							
City	State	Zip Code					
Iola	Ks	66749					

Job Type LIS Hole Depth 1407 Slurry Vol. 47 Bbl Tubing \_\_\_\_\_  
 Casing Depth 1396' Hole Size 6 3/4" Slurry Wt. 13.7" Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 4 1/2" Cement Left in Casing 5.25 Water Gal/SK 9.0 Other \_\_\_\_\_  
 Displacement 22.2 Bbl Displacement PSI 1000 Bump Plug to 1400 PSI BPM \_\_\_\_\_

Remarks: Safety meeting - Rig up to 4 1/2" casing. Break circulation w/ 5 Bbl water. Pump to 500 gal flush w/ bulls, 10 Bbl water spacer. Mixed 1100 lbs thickset cement w/ 2" phenoseal/sk @ 13.7"/gal. Washout pump + loss, release plug. Displace w/ 22.2 Bbl water. Final pump pressure 1000 PSI. Bump plug to 1400 PSI. release pressure float + plug held. Good cement returns to surface = 8 Bbl slurry to pit. Job complete. Rig down.

*'THANK YOU'*

Code	Qty or Units	Description of Product or Services	Unit Price	Total	
C102	1	Pump Charge	1050.00	1050.00	
C102	25	Mileage	3.95	98.75	
C201	1100 lbs	thickset cement	19.50	3120.00	
C208	320 #	2" phenoseal/sk	1.25	400.00	
C206	300 #	gal flush	2.0	600.00	
C214	40 #	bulls	.45	18.00	
C102	8.8	for mileage bulk fuel	m/l	345.00	
C403	1	4 1/2" top rubber plug	45.00	45.00	
			Subtotal	5136.75	
			7.15%	Sales Tax	260.47
Authorization	<u>Roy Ledford</u>	Title		Total	5397.22

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.