



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1213691  
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: \_\_\_\_\_

1213691

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Lone Jack Oil Company  
Blue Mound, KS  
1-913-756-2307 1-620-363-0492

Lease Welch Operator: Lone Jack Oil API # 15-011-24400-00-00  
 Contractor: Lone Jack Oil Company Date Started: 4/11/14 Date Completed: 4/17/14  
 Total Depth: 668 feet Well # 1 Hole Size: 5 5/8  
 Surface Pipe: 20' 7" Surface Bit: 9 7/8 Sacks of Cement: 5  
 Depth of Seat Nipple: \_\_\_\_\_ Rag Packer At: \_\_\_\_\_  
 Length and Size of Casing: 669' - 2 7/8 Sacks of Cement: 80  
 Legal Description: SW SE SE NE Sec: 23 Twp: 24S Range: 21E County: Bourbon

Thickness	Depth	Type of Formation	Core Thickness	Depth	Time
1	1	Top Soil			
2	3	Clay			
1	4	Broken Lime (Clay)			
3	7	Clay			
40	47	Lime			
5	52	Shale			
3	55	Lime			
8	63	Shale			
18	81	Lime			
2	83	Shale			
4	87	Lime			
5	92	Shale			
5	97	Lime			
6	103	Shale			
16	119	Lime			
143	262	Shale			
15	277	Lime			
7	284	Shale			
1	285	Lime			
4	289	Shale			
9	298	Lime			
75	373	Shale			
18	391	Lime			
4	395	Shale			
5	400	Lime			
45	445	Shale			
14	459	Lime			
11	470	Shale			
6	476	Lime			
77	653	Shale			
2	655	Sandy Shale (Slight Odor)			
2	657	Shale			
5	662	Oil Sand (Slight Bleed)			
5	667	Oil Sand (Good Bleed)			
1	668	Black Sand			
	668	TD			

**DIEBOLT LUMBER AND SUPPLY INC.**

2661 Nebraska Road  
La Harpe, Kansas 66751

FAX: (620) 496-2226

PHONE: (620) 496-2222

CUST NO: 5    JOB NO: 000    PURCHASE ORDER:    REFERENCE:    TERMS: CASH/CHECK/BANKCARD    CLERK: RS    DATE / TIME: 4/11/14 9:41

SOLD TO: \*\*\*\* CASH \*\*\*\*

SHIP TO: JACKSON

TERMINAL: 552

SALESPERSON: RS ROLAND SUTTERBY  
TAX: 001 KANSAS TAX

**INVOICE: A29999**

LINE	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	LOCATION	UNITS	PRICE/ PER	EXTENSION
1	5	5	BG	94PC	94# TYPE I PORTLAND CEMENT	2	5	10.45 /BG	52.25
<del>2</del>	<del>2</del>	<del>2</del>	<del>BG</del>	<del>30116</del>	<del>80# FLY ASH POST MIX 40/PALLET</del>	<del>2</del>	<del>2</del>	<del>7.75 /BG</del>	<del>15.50</del>
					<i>Weich</i>				
					<i>weil #1</i>				

\*\* PAID IN FULL \*\*

*ck# 6078*  
CASH PAYMENT

72.76    TAXABLE    67.75  
NON-TAXABLE    0.00  
SUBTOTAL    67.75

72.76    TAX AMOUNT    5.01

**TOTAL    72.76**



TOT WT: 630.00

X \_\_\_\_\_  
Received By

802 N. Industrial Rd.  
P.O. Box 664  
Iola, Kansas 66749  
Phone: (620) 365-5588

# Payless Concrete Products, Inc.



**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 direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted 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 strength test when water is added at customer's request.  
**NOTICE TO OWNER**  
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.

LOWE'S  
LOWE JACK OIL CO.  
509 E. WALNUT

LEASE:  
54 W ID 3 HWY N 3.5 MI TO JUST  
PAST SOLIDER RD WAD (TOMAHAWK RD  
IS TOO FAR)

BLUE MOUND KS 66010

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	DRIVER/TRUCK	PLANT/TRANSACTION #
9:45 AM	WELL	8.00	8.00	JD 32	8000
DATE	PO NUMBER	LOAD #	YARDS DEL	BATCH #	TICKET NUMBER
4/17/14	WELL #	1	8.00	4	36511

**WARNING**  
**IRRITATING TO THE SKIN AND EYES**  
Concrete is a PERISHABLE COMMODITY and BECOMES the PROPERTY of the PURCHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE LOADING STARTS.  
The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed.  
All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.  
Not 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 @ \$50/HR.

**PROPERTY DAMAGE RELEASE**  
(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)  
Dear Customer: The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and height of his truck may possibly cause damage to the premises and/or adjacent property if it passes the material in the bed where you desire it. It is our wish to help you in every way that we can, but in order to do this we must have your signature on this RELEASE, relieving him and his supplier 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 this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not "mud" the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of the truck and his supplier from and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.  
SIGNED  
X

**Excessive Water is Detrimental to Concrete Performance**  
H<sub>2</sub>O Added By Request/Authorized By  
GAL X  
WIGHMASTER  
NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.  
LOAD RECEIVED BY: *[Signature]*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
8.00	WELL	WELL (10 SACKS PER UNIT)	8.00	
8.00	TRUCKING	TRUCKING CHARGE	2.00	
8.00	MIX/HOUL	MIXING AND HAULING	8.00	

*WELCH  
WELL #1*

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
			1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER	
			6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		TIME DUE
9:55				
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		DELAY TIME

% TAX 7.15  
ADDITIONAL CHARGE 1  
ADDITIONAL CHARGE 2

**GRAND TOTAL** ▶