

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1225225

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

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: _____



1225225

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 (Attach Additional Sheets)	<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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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 (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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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4520 State Hwy 136, Amarillo, TX 79108-7617 • tel. 806-383-5047 • fax 806-383-1716

Deep Well GroundBed Data:			Date: 09/20/14		
Job Number: RGC06-2014-KS			Drilling Contractor: McLean's CP Installation, Inc		
Company Name: REGENCY			Facility/Line: SWANK		
Subject: DEEL WELL			State: KS		
Well Depth: 300'			County: HAMILTON		
Diameter: 10"			Other-Driller: KK		
Casing: 20'			TEST VOLTS:		
Type of Backfill: SC2					
Anode Type: 1 SET OF 20-ANOTECH 2684					
Remarks:					
Drilling Log			Electrical Log		
			BEFORE BACKFILL		
Depth:	Formation Type:	Material:	Volt	Anode Depth	Anode #
0'	TOP SOIL	CASING/HOLE PLUG			
5'	TOP SOIL	CASING/HOLE PLUG			
10'	GRAVEL	CASING/HOLE PLUG			
15'	GRAVEL	CASING/HOLE PLUG			
20	GRAVEL	CASING/HOLE PLUG			
25	GRAVEL	HOLE PLUG			
30	GRAVEL	HOLE PLUG			
35	GRAVEL	HOLE PLUG			
40	SANDY CLAY	HOLE PLUG			
45	SANDY CLAY	HOLE PLUG			
50	SANDY CLAY	HOLE PLUG			
55	SANDY CLAY	HOLE PLUG			
60	SANDY CLAY	COKE			
65	SANDY CLAY	COKE			
70	SANDY CLAY	COKE			
75	SANDY CLAY	COKE			
80	SANDY CLAY	COKE			
85	SANDY CLAY	COKE			
90	SANDY CLAY	COKE			
95	SANDY CLAY	COKE			
100	SANDY CLAY	COKE			
105	SANDY CLAY	COKE		20	
110	SANDY CLAY	COKE			
115	SANDY CLAY	COKE		19	
120	SANDY CLAY	COKE			
125	SANDY CLAY	COKE		18	
130	SANDY CLAY	COKE			
135	SANDY CLAY	COKE		17	
140	SANDY CLAY	COKE			
145	SANDY CLAY	COKE		16	
150	SANDY CLAY	COKE			
155	SANDY CLAY	COKE		15	
160	SANDY CLAY	COKE			
165	SANDY CLAY	COKE		14	
170	SANDY CLAY	COKE			
175	BLUE SHALE	COKE		13	
180	BLUE SHALE	COKE			
185	BLUE SHALE	COKE		12	
190	BLUE SHALE	COKE			
195	BLUE SHALE	COKE		11	
200	BLUE SHALE	COKE			
205	BLUE SHALE	COKE		10	
210	BLUE SHALE	COKE			
215	BLUE SHALE	COKE		9	
220	BLUE SHALE	COKE			
225	BLUE SHALE	COKE		8	
230	BLUE SHALE	COKE			
235	BLUE SHALE	COKE		7	
240	BLUE SHALE	COKE			
245	BLUE SHALE	COKE		6	
250	BLUE SHALE	COKE			



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Diameter: 10"			Other-Driller: KK		
Casing: 20"					
Type of Backfill: SC2			TEST VOLTAGE: 0		
Anode Type: 1 SET OF 20-ANOTECH 2684					
Remarks:					
Drilling Log			Electrical Log		
			Anode Log		
			BEFORE BACKFILL		
			AFTER BACKFILL		
Depth:	Formation Type:	Material:	Volt	Anode Depth	Anode #
255	BLUE SHALE	COKE			5
260	BLUE SHALE	COKE			
265	BLUE SHALE	COKE			4
270	BLUE SHALE	COKE			
275	BLUE SHALE	COKE			3
280	BLUE SHALE	COKE			
285	BLUE SHALE	COKE			2
290	BLUE SHALE	COKE			
295	BLUE SHALE	COKE			1
300	BLUE SHALE	COKE			

WELL #: SWANK
HAMILTON COUNTY

17.5 in.

9.875 in.

