



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1222473  
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: \_\_\_\_\_

1222473

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> _____ <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> _____ _____
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270647

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	KANSAS ENERGY LLC	State, County	Chautauqua, Kansas	Cement Type	CLASS A	
Job Type	LS	Section	15	Excess (%)	30%	
Customer Acct #	4271	TWP	34	Density	14-14.3	
Well No.	HILLS 15-2	RGE	12 E	Water Required	7.94	
Mailing Address		Formation		Yeild	1.74	
City & State		Tubing	4 1/2"	Sacks of Cement	135	
Zip Code		Drill Pipe		Slurry Volume	41	
Contact		Casing Size	6 3/4"	Displacement	19.5	
Email		Hole Size		Displacement PSI	1000	
Cell		Casing Depth	1228'	MIX PSI	300-500	
Dispatch Location	BARTLESVILLE	Hole Depth	1238'	Rate	4-4.5	
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit		
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,085.00	\$ 1,085.00	
5402	FOOTAGE	1228	PER FOOT	\$0.23	\$ 282.44	
5405	EQUIPMENT MILEAGE (ONE-WAY)	40	PER MILE	\$4.20	\$ 168.00	
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$368.00	\$ 368.00	
5621	4 1/2 INCH PLUG CONTAINER	1	PER UNIT	\$215.00	\$ 215.00	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
<b>EQUIPMENT TOTAL</b>					<b>\$ 2,118.44</b>	
<b>Cement, Chemicals and Water</b>						
1126	OWC. CEMENT (CAL SEAL) 6%OWC. 2% CAL. CLORIDE 2% GE	135	0	\$19.75	\$ 2,666.25	
1107A	PHENOSEAL	80	0	\$1.35	\$ 108.00	
1110A	KOL SEAL (50 # SK)	850	0	\$0.46	\$ 391.00	
1111	GRANULATED SALT (50#) SELL BY #	900	0	\$0.39	\$ 351.00	
1118B	PREMIUM GEL/BENTONITE (50#)	150	0	\$0.22	\$ 33.00	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
0		0		\$0.00	\$ -	
<b>Chemical Total</b>					<b>\$ 3,549.25</b>	
<b>Cement Water Transports</b>						
0			0	\$0.00	\$ -	
0			0	\$0.00	\$ -	
0			0	\$0.00	\$ -	
<b>Transports Total</b>					<b>\$ -</b>	
<b>Cement Floating Equipment (TAXABLE)</b>						
<b>Cement Basket</b>						
0			0	\$0.00	\$ -	
<b>Centralizer</b>						
0			0	\$0.00	\$ -	
0			0	\$0.00	\$ -	
<b>Float Shoe</b>						
0			0	\$0.00	\$ -	
<b>Float Collars</b>						
0			0	\$0.00	\$ -	
<b>Guide Shoes</b>						
0			0	\$0.00	\$ -	
<b>Baffle and Flapper Plates</b>						
0			0	\$0.00	\$ -	
<b>Packer Shoes</b>						
0			0	\$0.00	\$ -	
<b>DV Tools</b>						
0			0	\$0.00	\$ -	
<b>Ball Valves, Swedges, Clamps, Misc.</b>						
0			0	\$0.00	\$ -	
0			0	\$0.00	\$ -	
0			0	\$0.00	\$ -	
<b>Plugs and Ball Sealers</b>						
4404	4' 1/2" RUBBER PLUG	1	PER UNIT	\$47.25	\$ 47.25	
<b>Downhole Tools</b>						
0			0	\$0.00	\$ -	
<b>CEMENT FLOATING EQUIPMENT TOTAL</b>					<b>\$ 47.25</b>	
				0	SUB TOTAL	\$ 5,714.94
				8.30%	SALES TAX	\$ 278.46
					TOTAL	\$ 6,013.45
				5%	(-DISCOUNT)	\$ 286.70
					<b>DISCOUNTED TOTAL</b>	<b>\$ 5,707.65</b>

TRUCK#	DRIVER NAME
419	JEFF F.
518	RYAN P.

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE \_\_\_\_\_  
FOREMAN B. J. Hill

I ACKNOWLEDGE THAT THE PAYMENT TERMS, UNLESS SPECIFICALLY AMENDED IN WRITING ON THE FRONT OF THE FORM OR IN THE CUSTOMER'S ACCOUNT RECORDS, AT OUR OFFICE, AND CONDITIONS OF SERVICE ON THE BACK OF THIS FORM ARE IN EFFECT FOR SERVICES IDENTIFIED ON THIS FORM.

CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	KANSAS ENERGY LLC	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	LS	Section	15	Excess (%)	30%
Customer Acct #	0	TWHP	34	Density	14-14.3
Well No.	HILLS 15-2	RGE	12 E	Water Required	7.94
Mailing Address	0	Formation	0	Yield	1.74
City & State	0	Tubing	4 1/2"	Sacks of Cement	135
Zip Code	0	Drill Pipe	0	Slurry Volume	41
Contact	0	Casing Size	6 3/4"	Displacement	19.5
Email	0	Hole Size	0	Displacement PSI	1000
Cell	0	Casing Depth	1228'	MIX PSI	300-500
Dispatch Location	BARTLESVILLE	Hole Depth	1238'	Rate	4-4.5
<b>Time:</b>	<b>Description</b>	<b>Rate (bpm)</b>	<b>Volume (bbl)</b>	<b>Pressure</b>	<b>Notes</b>
<b>Amount of Cement Left in Casing</b>		0 ft			
Remarks:					
Ran 20bbls ahead to get cir. Ran 150# of gel. Ran 135sks OWC cem. w/ 6# kol seal, 10% salt, .50# pheno seal @14ppg @4bpm @300psi flushed lines and pump, dropped plug and displaced 19.5 bbls to land plug @ 1000psi. Plug held, shut in washed up.					
THANKS BRYAN					