



1222486

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> _____				
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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Linn Operating, Inc.
Well Name	BRATTIN 6 ATU-271
Doc ID	1222486

Tops

Name	Top	Datum
KRIDER	2340	KB
WINFIELD	2380	KB
TOWANDA	2440	KB
FT_RILEY	2499	KB
FUNSTON	2619	KB
CROUSE	2686	KB
MORRILL	2769	KB
GRENOLA	2814	KB



<b>JOB SUMMARY</b>			PROJECT NUMBER <b>TN # 999</b>	TICKET DATE <b>7/24/2014</b>
COUNTY <b>Stanton</b>	COMPANY <b>Linn Energy</b>	CUSTOMER REP <b>Orlando</b>		
LEASE NAME <b>Brattin</b>	Well No. <b>6 ATU 271</b>	Job Type <b>Surface</b>	EMPLOYEE NAME <b>Steve Crocker</b>	

Steve Crocker				
Tony Lewis				
Daniel Muniz				
Chris Layton				

Form Name Chase Control Grows Type: \_\_\_\_\_  
Packer Type \_\_\_\_\_ Set At \_\_\_\_\_  
Bottom Hole Temp. \_\_\_\_\_ Pressure \_\_\_\_\_  
Retainer Depth \_\_\_\_\_ Total Depth \_\_\_\_\_

Date	Called Out	On Location	Job Started	Job Completed
		07/24/14	07/24/14	07/24/14
Time		1900	2300	15

Type and Size	Qty	Make
Auto Fill Tube	0	IR
Insert Float Valve	0	IR
Centralizers	0	IR
Top Plug	0	IR
HEAD	0	IR
Limit clamp	0	IR
Weld-A	0	IR
Texas Pattern Guide Shoe	0	IR
Cement Basket	0	IR

Well Data							
	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing		24	8.625	JH	0	730	1500
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole							
Perforations							Shots/Ft
Perforations							
Perforations							

Materials			
	Qty	Density	Lb/Gal
Mud Type	0		
Disp. Fluid	H2O	Density 8.33	Lb/Gal
Spacer type	H2O	BBL 10	
Spacer type		BBL	
Acid Type		Gal	%
Acid Type		Gal	%
Surfactant		Gal	In
NE Agent		Gal	In
Fluid Loss		Gal/Lb	In
Gelling Agent		Gal/Lb	In
Fric. Red.		Gal/Lb	In
MISC.		Gal/Lb	In

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
07/24/14	5.0	07/24/14	1.3	Surface
				Pump 18bbbls Spacer
				Pump 189bbbls Lead CMT at 14.8ppg
				Pump 44bbbls Displacement
				CMT to Surface: 50bbbls 297sks
Total	5.0	Total	1.3	

Perfpac Balls \_\_\_\_\_ Qty \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_  
Other \_\_\_\_\_

MAX	1000	AVG	100	Pressures
MAX	3.5	AVG	3	Average Rates in BPM
Feet	44	Reason		Cement Left in Pipe Shoe Joint

Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	455	Premium Class C	2% Calcium Chloride and .25 Bsk Cellulose	6.34	1.35	14.8
2						
3						
4						

Preflush Breakdown		Type: _____	Summary		Preflush: BBI	10.00	Type: H2O
		MAXIMUM _____	Load & Bkdn: Gal - BBI	50	Excess /Return BBI	0	Pad Bbl -Gal
		Lost Returns: _____	Actual TOC	0	Calc. TOC	0	Actual Disp. Bbl
		Frac. Gradient _____	Treatment: Gal - BBI	109.0	Cement Slurry BBI	183.00	Disp Bbl
Average _____ 5 Min		10 Min _____ 15 Min _____	Total Volume	BBI			

CUSTOMER REPRESENTATIVE Walter Hogg SIGNATURE

**Thank You For Using  
O - TEX Pumping**

# JOB SUMMARY

<b>PROJECT NUMBER</b> TN # 1003		<b>TICKET DATE</b> 7/25/2014
<b>COURTY</b> Stanton	<b>COMPANY</b> Linn Energy	<b>CUSTOMER REP</b> 0
<b>LEASE NAME</b> Brattin	<b>Well No</b> 6 ATU 271	<b>JOB TYPE</b> Production
<b>EMPLOYEE NAME</b> BEAU CLEM		

<b>BEAU CLEM</b>				
<b>MARIO ABREGO</b>				
<b>ANGEL GARCIA</b>				

Form. Name \_\_\_\_\_ Type: \_\_\_\_\_

Packer Type \_\_\_\_\_ Set At \_\_\_\_\_

Bottom Hole Temp. \_\_\_\_\_ Pressure \_\_\_\_\_

Retainer Depth \_\_\_\_\_ Total Depth \_\_\_\_\_

	Called Out	On Location	Job Started	Job Completed
Date	7/24/14	07/25/14	07/25/14	07/25/14
Time	8:41PM	9:00AM	12:33PM	2:25PM

**Tools and Accessories**

Type and Size	Qty	Make
Auto Fill Tube	0	IR
Insert Float Valve	0	IR
Centralizers	0	IR
Top Plug	0	IR
HEAD	0	IR
Limit clamp	0	IR
Weld-A	0	IR
Texas Pattern Guide Shoe	0	IR
Cement Basket	0	IR

**Well Data**

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	15.5	5.5	J44	0	3050	2000
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole							
Perforations							Shots/Ft.
Perforations							
Perforations							

**Materials**

Mud Type	Density	Lb/Gal
Disp. Fluid	H2O	8.33
Spacer type	LOW STO BBL.	30
Spacer type	BBL.	
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
MISC.	Gal/Lb	In

**Hours On Location**

Date	Hours
07/25/14	6.5
<b>Total</b> 6.5	

**Operating Hours**

Date	Hours
07/25/14	2.0
<b>Total</b> 2.0	

**Description of Job**  
Production

Perpac Balls \_\_\_\_\_ Qty. \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

Other \_\_\_\_\_

**Pressures**

<b>MAX</b> 1190	<b>AVG.</b> 220
Average Rates in BPM	
<b>MAX</b> 3	<b>AVG</b> 3
Cement Left in Pipe	
<b>Feet</b> 44	<b>Reason</b> Shoe Joint

**Cement Data**

Stage	Sacks	Cement	Additives	W/Rq	Yield	Lbs/Gal
1	425	O-Tex LowDense Cement	2% Gypsum, 2% Calcium Chloride, 2% C-45, 0.4% C-13, 0.4% C-41P, 0.2% C-51, 0.25 lbs/sk Catalyst	13.29	2.25	11.5
2	0	0	0	0	0	0
3	0	0	0	0	0	0
4						

**Summary**

Preflush Breakdown	Type: _____	Preflush: BBI 30.00	Type: FLOW STOP
	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad Bbl - Gal _____
	Lost Returns: _____	Excess /Return BBI 57	Calc Disp Bbl _____
	Actual TOC _____	Calc. TOC. SURFACE _____	Actual Disp _____
Average _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp Bbl _____
5 Min _____	10 Min _____	Cement Slurry BBI 170.0	
		Total Volume BBI 272.00	

CUSTOMER REPRESENTATIVE Walter Higgins SIGNATURE

Thank You For Using  
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