

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1222552

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 #			API No. 15						
Name:			Spot Description:						
Address 1:			SecTwpS. R East West						
Address 2:			F6	eet from North /	South Line of Section				
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section				
Contact Person:			Footages Calculated from Nearest Outside Section Corner:						
Phone: ()			□ NE □ NW	V □SE □SW					
CONTRACTOR: License #			GPS Location: Lat:, Long:						
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)				
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84					
Purchaser:			County:						
Designate Type of Completion:			Lease Name:	W	ell #:				
	e-Entry	Workover	Field Name:						
	_		Producing Formation:						
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:					
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:				
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet						
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No				
If Workover/Re-entry: Old Well I			If yes, show depth set:						
Operator:			If Alternate II completion, cement circulated from:						
Well Name:			feet depth to:	w/	sx cmt.				
Original Comp. Date:									
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan					
Plug Back	Conv. to G		(Data must be collected from to						
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls				
Dual Completion			Dewatering method used:_						
SWD			Location of fluid disposal if	hauled offsite:					
ENHR	Permit #:								
GSW	Permit #:		Operator Name:						
			Lease Name:						
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West				
Recompletion Date		Recompletion Date	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:									



Operator Name:			Lease Name: _			Well #:			
Sec Twp	S. R	East West	County:						
open and closed, flowi	ng and shut-in pressu	rmations penetrated. Eres, whether shut-in preth final chart(s). Attach	essure reached stat	c level, hydrosta	tic pressures, bott				
		tain Geophysical Data a r newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log		
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth ar		Sample		
Samples Sent to Geol	ogical Survey	☐ Yes ☐ No	Nam	е		Тор	Datum		
Cores Taken Electric Log Run		Yes No							
List All E. Logs Run:									
			RECORD Ne						
	Size Hole	Report all strings set-o		1		# Sacks	Type and Percent		
Purpose of String	Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	Used	Type and Percent Additives		
		ADDITIONAL	CEMENTING / SQL	 JEEZE RECORD					
Purpose: Perforate Protect Casing Plug Back TD	Depth Top Bottom	# Sacks Used	Sacks Used Type and Percent Additives						
Plug Off Zone									
	tal base fluid of the hydra	this well? ulic fracturing treatment ex		Yes [Yes [Yes [No (If No, ski	p questions 2 ai p question 3) out Page Three	,		
Shots Per Foot		N RECORD - Bridge Plug			cture, Shot, Cement		d Depth		
Specify Footage of Each Interval Perforated (Amount and Kind of Material Used)									
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No				
Date of First, Resumed I	Production, SWD or ENH	R. Producing Meth	nod:	Gas Lift (Other (Explain)				
Estimated Production Per 24 Hours	Oil Bt	ols. Gas	Mcf Wat	er B	bls. G	Gas-Oil Ratio	Gravity		
DISPOSITIO	ON OF GAS:	l <u> </u>	METHOD OF COMPLE			PRODUCTION	ON INTERVAL:		
Vented Sold	Used on Lease	Open Hole	Perf. Dually (Submit)		mmingled mit ACO-4)				

Form	ACO1 - Well Completion							
Operator	McCoy Petroleum Corporation							
Well Name	MTPRC 'A' #2-27							
Doc ID	1222552							

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
None	17.5	0	0	47	Thixotropi c / Pozmix	110	None



TREATMENT REPORT

	89.5													
Customer	relox i	Pet. C	orp,	Le	ease No.		The Area T			Date	<i>-</i>			
Customer Me(cy Pes, Corp. Lease MTPRC A					Well # 2-2-7				8.5.20M					
Field Order # Station Pressures							Casing	Z', Depth	30'	County / State				
Type Job	NU/	PTK).					Formation	1 D. a	10		Legal D	escription 2	7-30-19
PIP	E DATA	PE	RFOF	RATING	DATA		FLUID (JSED		TF	REAT		RESUME	
Casing Size	Tubing Si	ze Sho	ts/Ft		Acid			RATE		PRESS		ISIP		
Depth 30	Depth	Fron	n	То	То		Pre Pad		Max				5 Min.	
Volume O	Volume	Fron	n	То	То		Pad		Min			20.00	- 10 Min.	
Max Press	Max Pres	s Fron	n	To	То		Frac		Avg				15 Min.	
Well Connecti		/ol. From	า	То				10	HHP Used				Annulus Pressure	
Plug Depth	Packer D	l Fron	า	То	(2)	Flu	ısh		Gas Volume		Total Load			
Customer Re	presentative	Aller	١		Station	Mar	nager Ke	In Gor	2100	Treate	r D	Sun	Frank	
Service Units				0520	337	08	21010							77.7
Driver Names	Dern	Scut.	+ 5	COJL	ASIC				8					
Time	Casing Pressure	Tubing Pressur		Bbls. Pum	ped		Rate	Service Log						
12:30pm	ing the fact of the second		2		4		on L	0094:	on/5	SCI	PL.	meetin	2.5	
			2					Pun 30' 2" Pipe						
								Sos, Thissiopic, 14 th Cellof 15 ke, 3 Yold						
		- 4						Mr. 505 10% Gypsum, 2% Get, 10 # Gisonia						
			-							·				
1.00pm	100		/ 5		5		3	Mix SOSX Thirsdiegic						
	100	2		200			3	Mix Hos, 60/40 Shut down Plus Ret here - 45sy Plus Mouse how - 20sy						
			1											
	100						3							
	100						3							
			_					USSHU	ก				****	
-			_					2		4				
3:00 pm			_					JOB 0	om Pla	re/ D	1511	n d Cr	PW	
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