



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1225529  
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: \_\_\_\_\_



1225529

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> _____
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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"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 581

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-19-14	25	8	14	OSBORNE	KANSAS		7:30 PM

Location **COVERT KS, 1W 4N 1/4 N 3/4 W 1/4 S INTO**

Lease	Well No.	Owner
L-S UNIT	#2	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	Rig #	Charge To
Mallard DRG.	Rig #1	BRUCE OIL CO. INC.
Type Job	Hole Size	Cement Amount Ordered
PRODUCTION STRING	7 7/8 A.T.D. 2900'	180 SX <sup>60</sup> / <sub>40</sub> 10% SALT
Csg.	Depth	Meas Line
5 1/2 USED	2900'	Displace 68. BBL
Tbg. Size	Depth	Common
15.50		108
Tool	Shoe Joint	Poz. Mix
LATCH DOWN PLUG ASSY @ 2887'	12.70	72
Cement Left in Csg.	Displace	Gel.
12.70	68. BBL	2% GEL 5% GILSONITE

**EQUIPMENT**

Pumptrk	No.	Cementor	Glenn G.
18		Helper	CODY B.
Bulktrk	No.	Driver	LONNIE M.
15		Driver	
Bulktrk	No.	Driver	
		Driver	

**JOB SERVICES & REMARKS**

Remarks:  
Rat Hole 30 SX  
Mouse Hole  
Centralizers  
Baskets  
D/V or Port Collar  
Ran 74 JOINTS OF USED 15.50 # Csg.  
SET @ 2900, Received  
CIRCULATION, DROP "AFU BALL"  
& CIRCULATE a TOTAL OF 1 HR.  
Cement Down Hole w/ 150 SX  
<sup>60</sup>/<sub>40</sub> 10% SALT, 2% GEL, 5% GILSONITE PER SX.  
Clear-Line, Release Latch-Down  
Plug, & Displaced a TOTAL  
OF 70/BBL H<sub>2</sub>O.  
LAND Plug @ 1500 # Release  
PRESSURE, & "AFU + LATCH Plug (HOLD)  
THANK'S!  
Signature *Len Kuch*

Common	108
Poz. Mix	72
Gel.	
Calcium	
Hulls	
Salt	16
Flowseal	
Kol-Seal	900#
Mud CLR 48	NO,
CFL-117 or CD110 CAF 38	
Sand	
Handling	205
Mileage	

**FLOAT EQUIPMENT**

Guide Shoe	
Centralizer	X 3
Baskets	X 3
AFU Inserts	
Float Shoe	X 1
Latch Down Plug Assy	X 1
Pumptrk Charge	prod String
Mileage	35

Tax	
Discount	
Total Charge	

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 577

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-15-14	25	8	14	OSBORNE	KANSAS		8:30PM

Location Colvert Ks. 1 W N To Dead End

Lease	Well No.	Owner	
LS UNIT	2	W @ Pasture Gate	
Contractor	Rig #	To Quality Oilwell Cementing, Inc.	
Mallard JV	#1	You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Type Job		Charge To	
Long SURFACE		Bruce Oil Co. LLC	
Hole Size	T.D.	Street	
12 1/4	808		
Csg.	Depth	City	
8 5/8 New	808	State	
Tbg. Size	Depth	The above was done to satisfaction and supervision of owner agent or contractor.	
24 # csg.			
Tool	Depth	Cement Left in Csg. 42.20	
		Shoe Joint 42.20	
		Cement Amount Ordered 325.00 38cc	
Meas Line	Displace	2 % Gel	
	48.80 / BBL		

**EQUIPMENT**

Pumptrk	No.	Cementer	Common
18		Glenn G.	195
		Helper	Poz. Mix
		Cody R.	130
Bulktrk	No.	Driver	Gel.
19		Doug H.	7
		Driver	Calcium
Bulktrk	No.	Driver	12

**JOB SERVICES & REMARKS**

Remarks:	Hulls
	Salt
Rat Hole	Flowseal
Mouse Hole	Kol-Seal
Centralizers	Mud CLR 48
Baskets	CFL-117 or CD110 CAF 38
D/V or Port Collar	Sand
Ran 19 New JTS of 24 # 8 5/8 csg.	Handling 344
Set @ 808,	Mileage

**FLOAT EQUIPMENT**

Guide Shoe
Centralizer
Baskets
AFU Inserts
Float Shoe
Latch Down
8 5/8 Baffle Plate
8 5/8 Solid Rubber Plug
Pumptrk Charge Long Surface
Mileage 35

Cement Did Circulate To Surface!

Signature	Tax
Mallard JV	Discount
	Total Charge