



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1226698  
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
-----------------------------------	-----------------	---

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: \_\_\_\_\_



1226698

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](mailto: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
--	---

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"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
--	---	---

810 E 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561

**Elite**

**Cementing & Acidizing  
 of Kansas, LLC**



**Cement or Acid Field Report**

Ticket No. **1258**  
 Foreman Rick Ledford  
 Camp Eureka Ks

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
5/5/14	1059	Stueve # 1	14	213	10E	Lyon	Ks	
Customer <u>Shanvie Well Services Inc.</u>			Safety Meeting <u>PL</u> <u>CB</u> <u>CM</u>		Unit #	Driver	Unit #	Driver
Mailing Address <u>P.O. Box 397</u>					102	<u>Chris B.</u>		
City <u>Madison</u>					110	<u>Chris M.</u>		
State <u>Ks</u>		Zip Code <u>66860</u>						

Job Type surface Hole Depth 118' Slurry Vol. 19 Tubing \_\_\_\_\_  
 Casing Depth 105 G.L Hole Size 12 1/4 Slurry Wt. 14.8\* Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 8 5/8" Cement Left in Casing 15' Water Gal/SK 6.5 Other \_\_\_\_\_  
 Displacement 6 1/2 Bbl Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ fresh water.  
Mixed 80 sks class A cement w/ 3% cacl2 + 2% gel @ 14.8\*/gal. Displace w/ 6 1/2  
Bbl fresh water. Shut casing in w/ good cement returns to surface = 6 Bbl slurry to pit.  
Job complete Rig down.

"Thank You"

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	840.00	840.00
C107	35	Mileage	3.95	138.25
C200	80 sks	class A cement	15.00	1200.00
C205	225*	3% cacl2	.60	135.00
C206	150*	2% gel	.20	30.00
C108A	3.76	tan mileage bulk trix	m/c	345.00
			subtotal	2688.25
			7.15% Sales Tax	97.60

Authorization called by Mike Stafford Title Tankpusher Total 2785.85

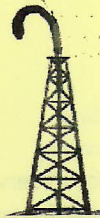
I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.



810 E 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561

**Elite**

**Cementing & Acidizing  
 of Kansas, LLC**



**Cement or Acid Field Report**  
 Ticket No. **1282**  
 Foreman Kevin McCoy  
 Camp EUREKA

API # 15-111-20507

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
5-8-14	1059	Stueve #1	14	215	10E	Lyon	Ks	
Customer Schankie Well Service, Inc.			Unit #		Driver		Unit #	Driver
Mailing Address P.O. Box 397			104		ALAN M.			
			111		CHRIS M.			
			145		ALLEN S.			
City Madison	State Ks	Zip Code 66860						

Job Type LONGSTRING Hole Depth 2608' KB Slurry Vol. 50 BBL Tubing \_\_\_\_\_  
 Casing Depth 2598' G.L. Hole Size 7 7/8 Slurry Wt. 13.7" Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 5 1/2 15.50" Cement Left in Casing 0' Water Gal/SK 9.0 Other \_\_\_\_\_  
 Displacement 62.5 BBL Displacement PSI 750 Bump Plug to 1200 PSI BPM \_\_\_\_\_

Remarks: Safety Meeting: Rig up to 5 1/2 Casing w/ Rotating Head. BREAK CIRCULATION w/ 5 BBL WATER, Pump 12 BBL CAUSTIC SODA Pre Flush, 5 BBL water SPACER. MIXED 150 SKS THICK SET Cement w/ 5\* Kol-Seal/SK @ 13.7"/gal, yield 1.85 = 50 BBL slurry. WASH OUT Pump & Lines. Shut down. Release LATCH down Plug. Displace Plug to Seat w/ 62.5 BBL Fresh water. FINAL Pumping Pressure 750 PSI. Bump Plug to 1200 PSI. WAIT 2 minutes. Release Pressure. Float & Plug Held. Good Circulation @ ALL times while Cementing. Rotated casing while Displacing Plug. Job Complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge	1050.00	1050.00
C 107	35	Mileage	3.75	138.25
C 201	150 SKS	THICK SET Cement	19.50	2925.00
C 207	750 "	KOL-SEAL 5"/SK	.45 "	337.50
C 208	150 "	PHENO SEAL 1"/SK	1.25 "	187.50
C 217	100 "	CAUSTIC SODA Pre Flush	1.60 "	160.00
C 108 B	8.25 TONS	TON Mileage 35 miles	1.35	389.81
C 113	4 HRS	80 BBL VAC TRUCK	85.00	340.00
C 224	3300 GALS	CITY WATER	10.00/1000	33.00
C 421	1	5 1/2 LATCH DOWN Plug	230.00	230.00
C 112	1	5 1/2 Rotating Swivel Rental	100.00	100.00
C 661	1	5 1/2 AFU FLOAT shoe	294.00	294.00
C 604	1	5 1/2 Cement BASKET	225.00	225.00
C 504	6	5 1/2 x 7 7/8 CENTRALIZERS	48.00	288.00
THANK YOU			Sub Total	6698.06
—A—			Sales Tax	341.77
Authorization <u>Witnessed By Cliff &amp; Randall Schankie</u> Title _____			Total	7039.83

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.



810 E 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561



**Cementing & Acidizing  
 of Kansas, LLC**



**Cement or Acid Field Report**  
 Ticket No. **1350**  
 Foreman Steve Mead  
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
1-18-14	1059	Sturue 1				Lyons	Ks	
Customer Shankie Well Services Inc			Safety Meeting		Unit #	Driver	Unit #	Driver
Mailing Address 1006 Southwest Blvd					104	Alahm		
City Madison					112	Christm		
State Ks		Zip Code 66860						

Job Type Topout side Hole Depth \_\_\_\_\_ Slurry Vol. \_\_\_\_\_ Tubing 1" 1320'  
 Casing Depth \_\_\_\_\_ Hole Size \_\_\_\_\_ Slurry Wt. \_\_\_\_\_ Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 5 1/2 147 Cement Left in Casing \_\_\_\_\_ Water Gal/SK \_\_\_\_\_ Other \_\_\_\_\_  
 Displacement \_\_\_\_\_ Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety Meeting: Rig up to 1" Tubing. Break Circulation with Fresh Water. Mix 124 sks 60/40 Pozmix Cement w/ 4% Gel. 1320' to Surface. Pull out 1" Tubing. Well stay full. Job complete Rig down.

Thank you

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C104	1	Pump Charge	1050.00	1050.00
C107	35	Mileage	3.95	138.25
C203	124 sks	60/40 Pozmix Cement	12.75	1581.00
C206	425 lb	Gel 4%	.20	85.00
C109A	5.33	Ton Mileage Bulk Truck	m/c	345.00
			Sub Total	3199.25
			7.15% Sales Tax	119.12
Authorization _____ Title _____			Total	3318.37

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.