Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1227264

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:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84
Wellsite Geologist:	
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
Gas D&A ENHR SIGW	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached 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:				

	Page 1wo 1227264	
Operator Name:	_ Lease Name: Well #:	
Sec TwpS. 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 (Attach Additional Sh	eets)	Yes No		-	on (Top), Depth ar		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	9		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c	RECORD Ne		on, 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 / SQL	EEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used		Type and F	Percent Additives	

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)
No	(If No, fill out Page Three of the

(If No, skip question 3) (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				A		ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner Rı	un:	No	
Date of First, Resumed	I Producti	ion, SWD or ENHR		Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bbl	S.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									I	
DISPOSITI	ION OF G	GAS:			METHOD		TION:		PRODUCTION INT	ERVAL:
Vented Solo	d 🗌 l	Used on Lease		Open Hole	Perf.	Uually (Submit A		Commingled		
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify))	(Submit A	,	(Submit ACO-4)		

EDWARD E BIRK 302 SOUTH 16TH BURLINGTON, KS 66839	SERVICE TICKET WELL CEMENTING
620-364-1311 - OFFICE, 620-364-6719 - C	ELL COUNTY $\begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \begin{array}{c} \end{array} \\ \end{array} \end{array} \end{array} \begin{array}{c} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \begin{array}{c} \end{array} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \begin{array}{c} \end{array} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \end{array} \end{array}$
ADDRESSLEASE & WELLINO. S. WITHAMS KIND OF JOB AMANT ION STAID DIR. TO LOC	CITY ST ZIP CONTRACTOR RG SEC TWP RG OLD NEW

QUANTITY		MATERIAL USED		SERV. CHG
1 DOSK	Portlan	d Cement		
	+			
	BULK CHARGE			
	BULK TRK. MILE	2S		
	PUMP TRK. MILE	S		
· · · · · · · · · · · · · · · · · · ·				
	PLUGS			
	TOTAL			
т.D/ОД	2'	CSG. SET AT 1000 '	VOLUME	
SIZE HOLE	<u>, 14 "</u>	TBG SET AT	VOLUME	
MAX. PRESS		SIZE PIPE 2 1/8 "		

PLUG DEPTH TIME FINISHED:

coment into well Good Circ. to REMARKS

PKER DEPTH

NAME

Edward Bir OWNER'

SREP

PLUG USED

1

CEMENTER OR TREATER

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