



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1228263  
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: \_\_\_\_\_



1228263

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	American Oil LLC
Well Name	Solomon 1-33
Doc ID	1228263

All Electric Logs Run

Compenstated Density Neutron
Dual Induction
Micro
Bond Log







# 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. 185

Date	5-16-14	Sec.	Twp.	Range	County	State	On Location	Finish
					Ellis	KS		1:00 PM

Location Yocemento 8N 3/4 W N10

Lease	Soloman	Well No.	1-33	Owner	To Quality Oilwell Cementing, Inc.
Contractor	Western Well Service	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	Port Collar	Charge To	American Oil		
Hole Size	T.D.	Street			
Csg. 5 1/2	Depth	City	State		
Tbg. Size 2"	Depth	The above was done to satisfaction and supervision of owner agent or contractor.			
Tool Port collar	Depth 1440'	Cement Amount Ordered	225 QMDC 1/4 Flo		
Cement Left in Csg.	Shoe Joint	Used	200 sx QMDC		
Meas Line	Displace 3 1/2 bbl	Common	200		

**EQUIPMENT**

Pumptrk 5	No.	Cementer	David	Poz. Mix
Bulktrk 1	No.	Helper	Chad	Gel.
Bulktrk Py	No.	Driver	Brett	Calcium

**JOB SERVICES & REMARKS**

Remarks:	Salt
Rat Hole	Flowseal 50#
Mouse Hole	Kol-Seal
Centralizers	Mud CLR 48
Baskets	CFL-117 or CD110 CAF 38
Port Collar 1440'	Sand
Tested PC to 800 lbs	Handling 225
Opened PC	Mileage
Mixed 200 sx QMDC	
Displaced 3 1/2 bbl	
Ran 5 J+e	
Washed Clean	

**FLOAT EQUIPMENT**

Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
Pumptrk Charge	port collar
Mileage	14

Tax	
Discount	
Total Charge	

X Signature



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

No. 121

Date	Sec.	Twp.	Range	County	State	On Location	Finish
5-8-2014	33	11	19	ELLIS	Kansas		930
Lease				Location			
Solomon				Hay's KS. Yocemento Exit 8N 3/4W 1/4N			
Well No. 33-1				Owner			
Contractor Discovery DRG Rig #1 CLIFF				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.			
Type Job PRODUCTION STRING w/ PORT COLLAR				Charge To <del>DISC</del> AMERICAN OIL LLC			
Hole Size 7 7/8		T.D. 3710		Street			
Csg. 5 1/2 New		Depth 3709		City			
Tbg. Size 14 # CSG		Depth 3688		State			
Tool LATCH DOWN PLUG Assy		Shoe Joint 21.31		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg. 21.31		Displacement 90 BBL		Cement Amount Ordered 175 sx Com 10% SALT			
EQUIPMENT				Common 175			
Pumptrk 18		Cement Helper GLENN G.		Poz. Mix			
Bulktrk 1		Driver CODY B.		Gel.			
Bulktrk		Driver DOUG H.		Calcium			
JOB SERVICES & REMARKS				Hulls			
Remarks:				Salt 16			
Rat Hole 30 SX				Flowseal			
Mouse Hole 15 SX				<del>20 BBL</del> KCL - 2 GAL "20 BBL"			
Centralizers 1, 3, 5, 7, 9, 11, 55				Mud CLR 48 500 GAL			
Baskets 2, 56 CENTER				CFL-117 or CD110 CAF 38			
D/V or Port Collar @ JT # 56				Sand			
Ran 88 New JOINTS OF 14 # CSG.				Handling 191			
SET @ 3 Received CIRCULATION				Mileage			
Drop FLOAT-Shoe Ball. CIRCULATE				5 1/2 FLOAT EQUIPMENT IND. RUB.			
3/4 HR. Pump MUD FLUSH				Guide Shoe			
Cement w/ 130 SX Com 10% SALT				Centralizer TURBO 7			
Clear-line, Release Latch				Baskets 2			
Down Plug, + Displace @				1 PORT COLLAR			
TOTAL OF 90 BBL H <sub>2</sub> O				1 Float Shoe			
LAND Plug @ 1400 #				1 Latch Down			
FLOAT-Shoe + Latch DN. Plug				Pumptrk Charge prod string			
DID HOLD!				Mileage 14			
THANK'S				Tax			
Signature Cliff Mayfield				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. 116

Date	5-2-14	Sec.	33	Twp.	11	Range	19	County	ELLIS	State	KANSAS	On Location		Finish	6:30PM
Location								I-70 TOULON EXT 8 N 1/2 W 1/4 N							

Lease	Solomon		Well No.	33-1		Owner	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	Discovery DAIG #1					Charge To	AMERICAN OIL Co.								
Type Job	Cement SURFACE					Hole Size	12 1/4	T.D.	221'		Street				
Csg.	8 5/8 New		Depth	221'		Tbg. Size	# csg.	Depth							
Tool						Cement Left in Csg.	15'	Shoe Joint							
Meas Line			Displace	13.885				2% GEL 3% CC		Cement Amount Ordered 150 SX Com.					

**EQUIPMENT**

Pumptrk	17	No.	Cementer	Glenn G.	Common	150
			Helper	Copy B.	Poz. Mix	
Bulktrk	14	No.	Driver	CLAYTON B.	Gel.	3
			Driver		Calcium	5
Bulktrk		No.	Driver			
			Driver			

**JOB SERVICES & REMARKS**

Remarks:		Hulls	
Rat Hole		Salt	
Mouse Hole		Flowseal	
Centralizers		Kol-Seal	
Baskets		Mud CLR 48	
D/V or Port Collar		CFL-117 or CD110 CAF 38	
		Sand	
		Handling	158
		Mileage	
		<b>FLOAT EQUIPMENT</b>	
		Guide Shoe	
		Centralizer	
		Baskets	
		AFU Inserts	
		Float Shoe	
		Latch Down	
		Pumptrk Charge	Surface
		Mileage	14

Ran 5 New JOINTS OF 8 5/8  
23# csg  
Set @ 221 Relevelled  
CIRCULATION, & Cement  
w/ 150 SX Com, 2% Gel - 3% CC  
Displace 13 BBL,  
SHUT IN @ 200#  
Cement Did Circulate  
TO SURFACE

THANK'S!

X  
Signature *Chf Mappell*

Tax  
Discount  
Total Charge