



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1225861
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: _____

1225861

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
--	---

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
----------------	-------	---------	------------	---

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> _____
---	--

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____	PRODUCTION INTERVAL: _____ _____
--	---	---

HUGHES DRILLING REPORT

Well No. N. McMiller Size 7"
 Farm # 17 Feet 30'
 Circulated 9 sx cement

PERMANENT CSG.
 Size plugged well
 Feet.....
 T. D. at Completion 748
 Contractor HUGHES DRILLING CO.

OPERATOR Hughes Drilling

STRATA THICKNESS	FORMATION DRILLED	T.D.
3	Soil	3
21	Clay	24
16	Shale	40
5	Lime	45
4	Shale	49
15	Lime	64
7	Shale	71
10	Lime	81
8	Shale	89
17	Lime	106
40	Shale	146
30	Lime	176
64	Shale	240
21	Lime	261
18	Shale	279
6	Lime	285
28	Shale	313
9	Lime	322
7	Shale	329
3	Lime	331
15	Shale	346
30'	23 Lime	369
8	Shale	377
20	24 Lime	401
4	Shale	405
3	Lime	408
2	Shale	410
"Hertth"	60 Lime	416
112	Shale	528
5	Gr. sand	532
40	Shale	572
4	Gr. sand	576
7	Shale	583
11	Lime	594
10	Shale	604
3	Lime	607
5	Shale	612
9	Lime	621
12	Shale	633
	Lime	636
	Shale	641

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
7/14/14	0	3	soil	(1) 21.5-21.5
30'	3	24	clay	(2) 22.5-44.0
7/15/14	24	40	Shale	(3) 22.5-66.5
5 5/8	40	45	Lime	(4) 22.5-89.0
PDC	45	49	Shale	(5) 22.5-111.5
bit	49	64	Lime	(6) 22.5-134.0
	64	71	Shale	(7) 22.5-156.5
	71	81	lime	(8) 22.5-179.0
	81	89	Shale	(9) 22.5-201.5
	89	106	Lime	(10) 22.5-224.0
	106	146	Shale (sdy)	(11) 22.5-246.5
	146	176	Lime	(12) 22.5-269.0
	176	240	Shale (lime break 186)	(13) 22.5-291.5
	240	261	Lime	(14) 22.5-314.0
	261	279	Shale	(15) 22.5-336.5
	279	285	Shale Lime	(16) 22.5-358.0
	285	313	Shale	(17) 22.5-381.5
	313	322	Lime	(18) 22.5-404.0
	322	329	Shale	(19) 22.5-426.5
	329	331	Lime	(20) 22.5-449.0
	331	346	Shale	(21) 22.5-471.5
30'	346	369	Lime	(22) 22.5-494.0
	369	377	Shale (slate 376-377)	(23) 22.5-516.5
20	377	401	Lime	(24) 22.5-539.0
	401	405	Shale (slate 404-405)	(25) 22.5-561.5
	405	408	Lime	(26) 22.5-584.0
	408	410	Shale	(27) 22.5-606.5

HUGHES DRILLING REPORT

Well No. #17 SURFACE CASING PERMANENT CSG.
 Farm (N. McMillen) Size Plugged well
 Feet Feet
 Circulated ex cement
 T. D. at Completion 748
 OPERATOR Hughes Drilling Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
4	Lime	650
13	Shale	663
7	Lime	670
3	Shale	673
#1 sq. 10	Lt Br Sand	683
40	Shale	723
1	Lime	724
#2 sq. 2	sand	726
15	Shale	741
#3 sq. 1	BRKN Sand	742
6	Shale	748
		T.D.

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
"Horn"	410	416	Lime	(28) 22.5-629.0
	416	528	Shale (BRKN 420-424) (sdy 459-474)	(29) 22.5-651.5
"Peru"	528	532	Gray sand (No show)	(30) 22.5-674.0
	532	572	Shale (BRKN 563-570)	(31) 22.5-696.5
"W-side"	572	576	Gray sand (some Bleeding)	(32) 22.5-719.0
	576	583	Shale	(33) 22.5-741.5
	583	594	Lime	
	594	604	Shale	
	604	607	Lime	
	607	612	Shale (slate 611-612)	
	612	621	Lime	
	621	633	Shale	
	633	636	Lime (Brown)	
	636	641	Shale (slate 636-637)	
	641	650	Lime	
	650	663	Shale	
	663	670	Lime	
	670	673	Shale	
#1 Squirrel	673	683	Lt Brown sand (Very Lamin) (Gray Sdy Lime)	(675-678)
	683	723	Shale (Lime Break 692) (Lime break 714) (Lime Break 720)	
	723	724	Sdy Lime	
#2 Squirrel	724	726	Broken sand (oil trace)	
	726	741	Shale	
#3 Squirrel	741	742	Broken sand (oil trace)	
	742	748	Shale	
			T.D.	

7/16/14 - Plugged Hole (consolidated Oilwell service,
 75' plug at T.D. - 748
 50' plug at 585'
 50' plug at 425'
 cement from 250' to surface



CONSOLIDATED
Oil Well Services, LLC

269743

TICKET NUMBER 47434
LOCATION Ottawa, KS
FOREMAN Jim Green

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
07-16-14	3425	417 N McMullen	2	16	20	FR

CUSTOMER Hughes Drilling
MAILING ADDRESS 122 Main
CITY Wellsville STATE Ks. ZIP CODE 66092

TRUCK #	DRIVER	TRUCK #	DRIVER
669	Jim Lane		
666	Ket Car		
803	Mik Fox		
Hughes	H2O		

JOB TYPE Plug Job HOLE SIZE 5 7/8" HOLE DEPTH 778 CASING SIZE & WEIGHT _____
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Held crew meeting. Established circulation mix and pump 155K 50% Poz mix Cement 6% Gel. Pump down drill steel to TD. Pulled Drill steel up to 585' mix and pump 10 SK 50% Cement. Pull drill steel up to 425' mix and pump 10 SK Cement. Pull drill steel up to 250'. Mix and pump 50% circulated to surface. Pull drill steel. Trip well back to surface 55 SK.

80SK Total Customer Supply H2O

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE Cement pump 666		1085 ⁰⁰
5406	15	MILEAGE Cement Pump 666		63 ⁰⁰
5407	mix	Ton mileage		368 ⁰⁰
		Customer Supply H2O		N/A
1124	80SK	50% Poz Mix Cement	920 ⁰⁰	
1118B	403	Premium Gel	88 ⁰⁰	
		sub-total	1008 ⁰⁰	
		less 30%	- 302 ⁰⁰	
		Total		760 ⁰⁰
			2601.82	
		SALES TAX		54.01
		ESTIMATED TOTAL		2276.00

Form 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records at our office, and conditions of service on the back of this form are in effect for services identified on this form.