



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1226839  
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: \_\_\_\_\_

1226839

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> _____

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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Miami County, KS  
Well:Hunt 15-I  
Lease Owner:MJT Enterprises

Town Oilfield Service, Inc.  
(913) 837-8400

Commenced Spudding:  
09/29/2014

WELL LOG

Thickness of Strata	Formation	Total Depth
14	soil/clay	14
5	shale	19
24	lime	43
15	shale	58
6	lime	64
2	shale	66
3	red bed	69
36	shale	105
15	lime	120
9	shale	129
29	lime	158
8	shale and slate	166
21	lime	187
6	shale and slate	193
2	lime	195
2	shale and slate	197
7	lime	204
18	shale	222
12	sand	234
78	sandy shale	312
5	sand	317
25	sandy shale	342
8	sand	350
9	sandy shale	359
10	sand	369
14	lime	383
51	shale	434
5	dlime	439
12	shale	451
3	lime	454
14	shale	468
8	lime	476
21	shale	497
4	lime	501
4	shale	505
9	lime	514
8	sandy shale	522
14	sand	536
34	sandy shale	570-TD

# Short Cuts

## TANK CAPACITY

BBLs. (42 gal.) equals  $D^2 \times h \times 14$

D equals diameter in feet.

h equals height in feet.

## BARRELS PER DAY

Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004

BPH - barrels per hour

PSI - pounds square inch

## TO FIGURE PUMP DRIVES

\* D - Diameter of Pump Sheave

\* d - Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

\*C - Shaft Center Distance

D - RPMxd over SPMxR

d - SPMxRxD over RPM

SPM - RPMXD over RxD

R - RPMXD over SPMxD

$$\text{BELT LENGTH} = 2C + 1.57(D + d) + \frac{(D-d)^2}{4C}$$

\* Need these to figure belt length

$$\frac{\text{WATTS}}{\text{VOLTS}} = \text{AMPS}$$

TO FIGURE AMPS:

746 WATTS equal 1 HP

# Log Book

Well No. 5-1

Farm Hurt

KS  
(State) Miami  
(County)

7  
(Section) 18 22  
(Township) (Range)

For MST Enterprises

**Town Oil  
Company, Inc.**

16205 W. 287th St.

Paola, KS 66071

913-294-2125

Hunt Farm: Miami County  
 KS State; Well No. 15-1

Elevation \_\_\_\_\_  
 Commenced Spuding 9-29 .20 14  
 Finished Drilling 10-1 .20 14  
 Driller's Name Scott Kirkland  
 Driller's Name \_\_\_\_\_  
 Driller's Name \_\_\_\_\_  
 Tool Dresser's Name Derick Holestein  
 Tool Dresser's Name \_\_\_\_\_  
 Tool Dresser's Name \_\_\_\_\_  
 Contractor's Name Town Oil Co  
 7 18 22

(Section) \_\_\_\_\_ (Township) \_\_\_\_\_ (Range) \_\_\_\_\_  
 Distance from \_\_\_\_\_ line, \_\_\_\_\_ ft.  
 Distance from \_\_\_\_\_ line, \_\_\_\_\_ ft.

**CASING AND TUBING RECORD**

10" Set \_\_\_\_\_ 10" Pulled \_\_\_\_\_  
 8" Set \_\_\_\_\_ 8" Pulled \_\_\_\_\_  
 6 1/2" Set 20' 3 socks 6 1/2" Pulled \_\_\_\_\_  
 4" Set \_\_\_\_\_ 4" Pulled \_\_\_\_\_  
 2" Set 563.15 T.P. 2" Pulled \_\_\_\_\_  
 2 7/8 8rd

**CASING AND TUBING MEASUREMENTS**

Feet	In.	Feet	In.	Feet	In.
31	70				
31	60				
27	90				
31	75				
31	65				
31	70				
31	85				
31	75				
31	70				
31	65				
31	65				
31	70				
31	65				
31	65				
31	75				
31	75				
566	75	threads	on		
563	15	threads	on		

Thickness of Strata	Formation	Total Depth	Remarks
14	Soil & clay	14	
5	shale	19	green
24	Lime	43	
15	Shale	58	
6	Lime	64	
2	Shale	66	
3	Red bed	69	
36	Shale	105	
15	Lime	120	grey Drum
9	Shale	129	
29	Lime	158	Winterset
8	Shale & slate	166	
21	Lime	187	Bethany Falls
6	Shale & slate	193	
2	Lime	195	K.C.
2	Shale & slate	197	
7	Lime	204	Hertha
18	shale	222	
12	Sand	234	green, no show
78	Sandy shale	312	grey
5	Sand	317	green, no show
25	Sandy shale	342	green
8	Sand	350	<del>grey</del> slight show to K odor, lime
9	Sandy shale	359	no show
10	Sand	369	Green, lime, slight odor & bleed, gas
14	Lime	383	
51	Shale	434	









**CONSOLIDATED**  
Oil Well Services, LLC

271771

TICKET NUMBER 50513  
LOCATION Adawa, KS  
FOREMAN Casey Kennedy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8678

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/1/14	5472	D & C Hunt #15-I	SE 7	18	22	MI
CUSTOMER MJT Enterprises						
MAILING ADDRESS 37411 John Brown Hwy			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Osawatomie			STATE KS	ZIP CODE 66064		
			729	Casey Ken	✓ Safety	Mackling
			6660	KeiCar	✓	
			548	Dan Wha	✓	
			370	Mik Fox	✓	

JOB TYPE log string HOLE SIZE 5 5/8" HOLE DEPTH 570' CASING SIZE & WEIGHT 2 7/8" EUE  
CASING DEPTH 563' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
DISPLACEMENT 3.20 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4.5 bpm

REMARKS: held safety meeting established circulation, mixed & pumped 200# Premium Gel followed by 5 bbls fresh water, mixed & pumped 71' sks OWC cement w/ 1/2 # Phenoseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing, TD w/ 3.20 bbls fresh water, pressured to 800 PSI, well held pressure for 30 min MIT, released pressure, shut in casing.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	25 mi	MILEAGE		105.00
5402	563'	casing footage		
5407	minimum	ton mileage		368.00
5502c	2 hrs	PO Vac	N/C	
1126	71 sks	BWC cement	1402.25 ✓	
1183	200 #	Premium Gel	44.00 ✓	
1107A	36 #	Phenoseal	48.60 ✓	
		materials	1494.85	
		-30%	448.46 ✓	
		subtotal		1046.39
4402	1	2 1/2" rubber plug		29.50 ✓
			3398.96	
		7.65%	SALES TAX	82.31 ✓
			ESTIMATED TOTAL	2716.20 ✓

Revin 9737

AUTHORIZATION Mike Taylor 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.