



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1227851  
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: \_\_\_\_\_

1227851

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:  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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Stratex Oil & Gas Holdings, Inc.
Well Name	Whitten 12-4
Doc ID	1227851

All Electric Logs Run

CPI
DIL
DUCP
MEL



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. 1572  
Foreman Kevin McCoy  
Camp EUREKA

API # 15-191-22757

Date	Cust ID #	Lease & Well Number	Section	Township	Range	County	State
8-6-14	1101	Whitten # 12-4	12	335	2W	Sumner	Ks
Customer			Unit #	Driver	Unit #	Driver	
STRATEX OIL & GAS HOLDINGS, INC.			104	RIAN M			
Mailing Address			113	CHRIS M.			
30 ECHO LAKE RD							
City	State	Zip Code					
WATER TOWN	CT	06795					

Job Type SURFACE Hole Depth 290' K.B. Slurry Vol. 60 BBL Tubing \_\_\_\_\_  
 Casing Depth 288' K.B. Hole Size 14 3/4" Slurry Wt. 14.8 # Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 10 3/4 40-50 Cement Left in Casing 15' Water Gal/SK 6.5 Other \_\_\_\_\_  
 Displacement 26.8 BBL Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety Meeting: RAN. 275' 10 3/4" casing. Landed w/ 13' 8 5/8" Landing Joint = 288' OVERALL KB. Rig up to 8 5/8" Landing Joint. BREAK CIRCULATION w/ 10 BBL FRESH WATER. MIXED & PUMP 250 SKS CLASS "A" CEMENT w/ 3% CACLZ, 2% GEL, 1/4" # FLO-SEAL /SK @ 14.8 #/GAL, yield 1.35 = 60 BBL SLURRY. Displace w/ 26.8 BBL FRESH WATER. Shut casing in. Good Cement to SURFACE = 2 BBL SLURRY to Pit. Job Complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 101	1	Pump Charge	840.00	840.00
C 107	80	Mileage	3.95	316.00
C 200	250 SKS	CLASS "A" CEMENT	15.00	3750.00
C 205	700 #	CACLZ 3%	.60 #	420.00
C 206	470 #	GEL 2%	.20 #	94.00
C 209	62 #	FLO-SEAL 1/4 #/SK	2.25 #	139.50
C 108 B	11.75 TONS	Ton Mileage 80 Miles	1.35	1269.00
<u>THANK YOU</u>				
			Sub Total	6828.50
			Sales Tax 6.65%	292.83
Authorization <u>Eric Davidson</u>			Total	7121.33

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



**Cement or Acid Field Report**

Ticket No. 1627  
 Foreman Kevin McCoy  
 Camp EUREKA

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
8-17-14	1101	Whitten #12-4	12	33S	2W	SUMNER	KS
Customer			Unit #	Driver	Unit #	Driver	
Mailing Address			104	ALAN M.			
City			110	STRIE M.			
State			113	CHRIS M.			
Zip Code							
WATER TOWN CT. 06795							

Job Type LONGSTRING Hole Depth 4305' KB Slurry Vol. 47 BBL LEAD Tubing \_\_\_\_\_  
 Casing Depth 4301' KB Hole Size 9 7/8" Slurry Wt. 12.7 # 13.7 # Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 7" 23 # Cement Left in Casing 20.51 Water Gall/SK \_\_\_\_\_ Other \_\_\_\_\_  
 Displacement 171.5 BBL Displacement PSI 900 Bump Plug to 1400 PSI BPM \_\_\_\_\_

Remarks: SAFETY MEETING: RIG UP TO 7" CASING. BREAK CIRCULATION. PUMP 5 BBL WATER, 12 BBL CAUSTIC SODA PRE FLUSH, 10 BBL WATER SPACER. MIXED 150 SKS 60/40 POZMIX CEMENT w/ 6% GEL. 2" PHENO SEAL 1SK @ 12.7 #/GAL YIELD 1.75 = 47 BBL SLURRY. TAIL IN w/ 150 SKS THICK SET CEMENT w/ 2" PHENO SEAL @ 13.7 #/GAL YIELD 1.72 = 46 BBL SLURRY. WASH OUT PUMP & LINES. SHUT DOWN. RELEASE PLUG. DISPLACE PLUG TO SEAT w/ 171.5 BBL KEL WATER. FINAL PUMPING PRESSURE 900 PSI. BUMP PLUG TO 1400 PSI. WAIT 2 MINUTES. RELEASE PRESSURE. FLOAT HELD. GOOD CIRCULATION @ ALL TIMES WHILE CEMENTING. JOB COMPLETE. RIG DOWN.

Note: Plug RAT Hole w/ 30 SKS Mouse Hole w/ 20 SKS (60/40 Pozmix Cement)  
RAN CENTRALIZERS ON SHOE JT. MIDDLE OF 1<sup>ST</sup> LONG JOINT #2 3 5 7 9 11 BASKET ON TOP OF #5, #22

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge	1500.00	1500.00
C 107	80	Mileage	3.95	316.00
C 224	3300 gals	CITY WATER TO MIX CEMENT (D & T SERVICES)	10.00/1000	33.00
C 203	200 SKS	60/40 Pozmix Cement	12.75	2550.00
C 206	1030 #	GEL 6%	.20 #	206.00
C 203	400 #	PHENO SEAL 2 #/SK	1.25 #	500.00
C 201	150 SKS	THICK SET CEMENT } TAIL CEMENT	19.50	2925.00
C 208	300 #	PHENO SEAL 2 #/SK }	1.25 #	375.00
C 217	100 #	CAUSTIC SODA w/ 12 BBL WATER (PRE FLUSH)	1.60 #	160.00
C 108	16.85 TONS	TON MILEAGE 80 MILES	1.35	1819.80
C 222	20 GALS	KCL 2% IN DISPLACEMENT WATER	34.00	680.00
C 113	6 HRS	80 BBL VAC TRUCK (D & T SERVICES)	85.00	510.00
C 405	1	7" TOP RUBBER PLUG	83.00	83.00
C 732	2	7" STOP RINGS	35.00	70.00
C 605	2	7" CEMENT BASKETS	257.00	514.00
C 505	8	7" X 9 7/8" CENTRALIZERS	53.00	424.00
C 675	1	7" AFU FLOAT COLLAR	450.00	450.00
C 692	1	7" GUIDE SHOE	265.00	265.00
		THANK YOU	Sub Total	13,380.80
			Sales Tax	614.12
Authorization _____	Title <u>Doc Coy</u>		Total	13,994.92

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.