

Confidentiality Requested:

Yes No

#### Kansas Corporation Commission Oil & Gas Conservation Division

1228382

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:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached 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:	



Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow	ring and shut-in pressu	ormations penetrated. Cures, whether shut-in prediction of the pre	essure reached stat	ic level, hydrosta	tic pressures, bot		
		otain Geophysical Data a or newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth ar		Sample
Samples Sent to Geol	logical Survey	Yes No	Nam	ie		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING	RECORD N	ew Used			
		Report all strings set-			ion, 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 / SQI	JEEZE RECORD	I	1	
Purpose:  Perforate  Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives			
Plug Back TD Plug Off Zone							
	ulic fracturing treatment or	n this well? aulic fracturing treatment ex	sceed 350 000 gallons	Yes		p questions 2 ar	nd 3)
		submitted to the chemical of	=	Yes	= ' '	out Page Three	of the ACO-1)
Shots Per Foot		N RECORD - Bridge Plug ootage of Each Interval Per			cture, Shot, Cement		d Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:			
TODING RECORD.	OILG.	Jet At.	i aunei Al.		Yes No		
Date of First, Resumed	Production, SWD or ENF	HR. Producing Meth	nod:	Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil B	Bbls. Gas	Mcf Wat	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITION Vented Sold	ON OF GAS:	N Open Hole	METHOD OF COMPLI		mmingled	PRODUCTIO	DN INTERVAL:
	bmit ACO-18.)	Other (Specify)	(Submit		mit ACO-4)		

Form	ACO1 - Well Completion
Operator	Utah Oil LLC
Well Name	Neese SV 12
Doc ID	1228382

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
SURFACE	11.25	7.00	17.00	20	PORTLAN D	5	50/50 POZ
COMPLET ION	5.875	2.875	6.5	661.4	PORTLAN D	90	50/50 POZ

HELL = 2012 LOCATION: Kantoul API = 15-059-26737
SURFACE PIPE: Ft Cement = bags:
PRODUCTION: PIPE: SIZE 276 = 11461,4 Baffle 629.9

Thickness	1 =				7	1	
THICKNESS	Formation	Comment	Deptr:	Tnickness	Formation	Comment	Depth
	Lime		1.1	a	Lime		406
gi	Shale		* 38	4	Shale		410
9	Lime		40	8	Sand	No Show	418
69	Shale		109	18	Shale		410 418 436
	Lime		110	6	Sand	Nothow	442
	Shale		III		Shale		449
4	Lime		115	13	Ime		462
1	Shale		116	40	Shale		502
7	Lime		123	5	Coal		507
	Shale		194	9	Lime	5sft	516
3	Lime		186	10	Shale		526
13	Shale		138	a	Lime		578
a	Lime		140	9	Coal		530
10	Shale		150	15	Sharle		545
9	Lime		158	4	Lime	Last Foothadoi Sha	549
	Shale		153	1	Lime	Coaly Smelly	550
3	Lime		156	2	unelcoal	Sandy Soft	355
ನಿವಿ	Thale		156	9	Lime/coal	Sandy Vonsoft	552 554
	Lime		179	a	Limelcoa		556
15	Shale		194	8	Shale	11410	558
19	Lime			2	Broken	oom Bleed as	560
9	Shale		30% 30%	\$2	Soon 1		563
4	Lime		212	1	Brone	Cit Salvo George	363
10	Shale		229	1/2	Shale		56372
13	Lime		<u>aaa</u> a34	1/2	Shale oil San		564
	Shale		335	1/2	Shale		564/2
1.1	Line		246	ava	oilSan	1	
1	Shale	:			Broken		567
à	Lime		247	48	5000		569
9	Shale		256	70	Shale Broken	120.1111.817	617
3	Coal		259	11	Broken	Very 1. HeBd	618
31	Lime		990			Verylitte Blo Verylitte Show	1600
21	Shalo		200	7	Broken	Little Bld	
13	Shale	V CB	524	-#-	Shale		630
100	Lime	N CD	396	-	Shale		630 634 638
100	Shale		404	4	Cog		638

\* Ft. Scott Didn't Bleed as good As The others\*

LEASE NAME Neese OPERATOR START DATE:
WELL = 57 12 LOCATION: API =
SURFACE PIPE: Ft Cement(=bags)
PRODUCTION: PIPE: SIZE: =[1]

Thickness	Formation	Comment	Depth	Thickness	Formation	Comment	Depth
39	Thale		670		1		
4	Coal		6674				
3	Shale		676				
a	VeryBr	Wen Littleshow	678				
14	Broken	VeryloHKShow					
4	Shale	TH	696				
	Orage	10	1010				
	4	I core 5/1	5-581	)*			
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# 269718

TICKET NUMBER 47461

LOCATION OFFGW9

FOREMAN Alan Made

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

## FIELD TICKET & TREATMENT REPORT

	01 000-407-0070			CEME	TV			
DATE	CUSTOMER#	WELL NA	ME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
7-11-14	5000	Neese	51	1-12	Sw 29	17	121	10
CUSTOMER.	00.V 1	entures					11.	1 /2
MAILING ADDRE	SS	ENTOUC)			TRUCK#	DRIVER	TRUCK#	DRIVER
5113	East	1) - 12 .	+		730	Ala Man	a Sake	Me Mee
CITY	L 43	The second secon	CODE		1066	Bei Gar		1
Salina			7401		675	Bri Me)		
JOB TYPE   De	-1-	town, Qui	73		510	Duswich		
CASING DEPTH	9,1,0		***************************************	HOLE DEPT	H_696	CASING SIZE &	WEIGHT 37	8
SLURRY WEIGH		DRILL PIPE		TUBING			OTHER by	630
DISPLACEMENT	011	SLURRY VOL		WATER gal/s	_	CEMENT LEFT I		1e5
REMARKS:	3:10/a	DISPLACEMENT PS				RATE 4/6	on ,	
KEMARKS:	A DE	dnee	FINS	ES	tablished	g rate.	MIXE	204
pumpe	200	Sel	wilg	well	by 90	15K 5		cemen
P 143	d 10 g	0 /2	FPH	eno s	eal pe	1 GGCK	Cir	cy lated
Cline	17	Jushed	2	upp.	Pump	ed plu	15 /0	
buttle	vel	held	800	r.S.T.	set.	£1041		
111.1	V .							
11tah,	Kon						Mario	11
			Other designations and the state of the stat			1 Dans	1000	
ACCOUNT						14000		
CODE	QUANITY o	r UNITS	DES	CRIPTION of	SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5401	1	PUN	P CHARGE			666		10 AL
5406	, ,		AGE					1085
54122	lolel		ca51	of Fo	04950-	466		63-
5407	Min	.1	in N	1.1.00	0.956	666		
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					G	X		
0 2727							SALES TAX	63.90
n 3737	NO C	ompany	rep	***************************************			ESTIMATED	_
THORIZTION_	Jim	DKA	•				TOTAL	2615.08
INUNIZION_		VIV	TI	TLE			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.