



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1232032  
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: \_\_\_\_\_

1232032

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

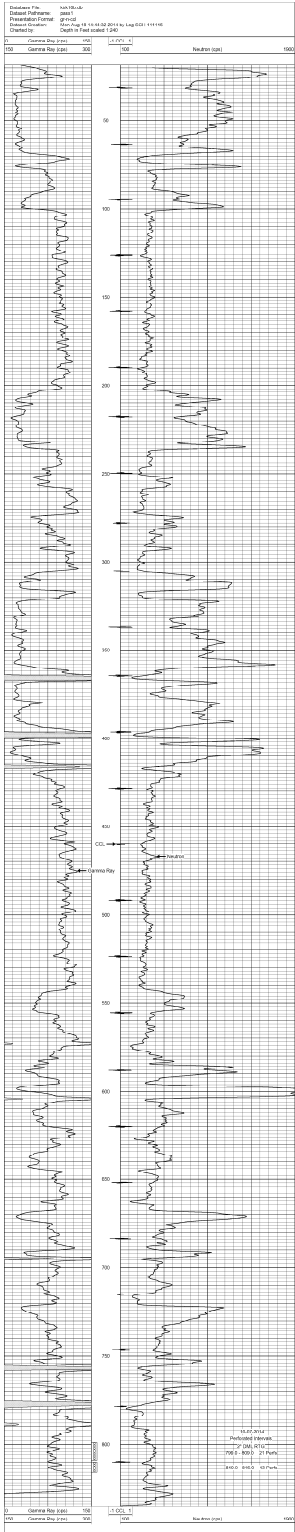
<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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 <b>MIDWEST SURVEYS</b> 1000 West 10th Street, Suite 100 Kansas City, MO 64108 Phone: (816) 432-1100 Fax: (816) 432-1101 Email: info@midwestsurveys.com	
<b>Job No.</b> 15-003-26306	<b>Client</b> CAMM RAY / BENSON / CO.
<b>Project</b> 9.1 S. 8th St 9th St 10th St 11th St 12th St 13th St 14th St 15th St 16th St 17th St 18th St 19th St 20th St 21st St 22nd St 23rd St 24th St 25th St 26th St 27th St 28th St 29th St 30th St 31st St 32nd St 33rd St 34th St 35th St 36th St 37th St 38th St 39th St 40th St 41st St 42nd St 43rd St 44th St 45th St 46th St 47th St 48th St 49th St 50th St 51st St 52nd St 53rd St 54th St 55th St 56th St 57th St 58th St 59th St 60th St 61st St 62nd St 63rd St 64th St 65th St 66th St 67th St 68th St 69th St 70th St 71st St 72nd St 73rd St 74th St 75th St 76th St 77th St 78th St 79th St 80th St 81st St 82nd St 83rd St 84th St 85th St 86th St 87th St 88th St 89th St 90th St 91st St 92nd St 93rd St 94th St 95th St 96th St 97th St 98th St 99th St 100th St	<b>Location</b> 9.1 S. 8th St 9th St 10th St 11th St 12th St 13th St 14th St 15th St 16th St 17th St 18th St 19th St 20th St 21st St 22nd St 23rd St 24th St 25th St 26th St 27th St 28th St 29th St 30th St 31st St 32nd St 33rd St 34th St 35th St 36th St 37th St 38th St 39th St 40th St 41st St 42nd St 43rd St 44th St 45th St 46th St 47th St 48th St 49th St 50th St 51st St 52nd St 53rd St 54th St 55th St 56th St 57th St 58th St 59th St 60th St 61st St 62nd St 63rd St 64th St 65th St 66th St 67th St 68th St 69th St 70th St 71st St 72nd St 73rd St 74th St 75th St 76th St 77th St 78th St 79th St 80th St 81st St 82nd St 83rd St 84th St 85th St 86th St 87th St 88th St 89th St 90th St 91st St 92nd St 93rd St 94th St 95th St 96th St 97th St 98th St 99th St 100th St

Comments

Drilling Contractor  
 John Lee Oilfield Services



Hurricane Services, Inc.  
 104 Prairie Plaza Parkway  
 Garnett, KS 66032  
 Office # 785-448-3100  
 Toll Free # 855-718-8027



Ticket № 50363  
 Location \_\_\_\_\_  
 Foreman Joe Blanchard

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
8-8-14		Kirk B-10	17 21 20	Anderson
Customer		Mailing Address	City	State Zip
B AND B oil Recovery				

Job Type:

	Truck #	Driver
Langstring	26	Joe
Hole Size:	231	Tom
Hole Depth: 847	242	DAN
Bridge Plug:	108	Alex
Packer:	111	Tyler
	extra	TJ

Quantity Or Units	Description of Services or Product	Pump charge	
5 mi	Mileage Pump truck # 231	\$3.25/Mile	NC
5 mi	Pick up # 26	1.50	NC
124 SK	60/40 Cement	12.00	1488.00
200 LB	Gel Sweep	.30	60.00
248 LB	Gel	.30	74.40
31 LB	Flo Seal	2.15	66.65
1.5 hr	80 vac # 108	84.00	126.00
1.5 hr	80 vac # 111	84.00	126.00
4600 Gal	Garnett water	1.3	59.80
5.32 Tons	Bulk Truck MINIMUM Charge # 242	\$1.15/Mile	150.00
1	Plugs 2 7/8	25.00	25.00
		Subtotal	2850.85
		Sales Tax	
		Estimated Total	

Remarks: Hook onto 2 7/8 pump 3 bbl H<sub>2</sub>O to achieve circulation. Ran 200 pound gel sweep. followed by 5 bbl dye & SKS of 60/40 To get dye to surface. Flush Pump. Pump Plug to bottom of sub fleet shoe. Good Cement to surface.

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