

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1233903

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: _____



1233903

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 (Attach Additional Sheets)	<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 (Amount and Kind of Material Used)	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 (Explain) _____			
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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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SOUTHERN STAR CENTRAL GAS PIPELINE

Sta. 19230 + 26

Native Fill (0'-3')

10" Casing (0-20')

☐ Cement
(12'-178')

 12 EnvirAnode
12' Centers

☐ Conducrete
Anode Backfill
(190'-290')

Grade	Drill Log	Native	Before Backfill	After Backfill	EnviroAnodes
10'	Shale & limestone				
20'	Shale & limestone stringers				
30'	Shale & limestone stringers				
40'	Shale & limestone stringers				
50'	Shale & limestone stringers				
60'	Shale & limestone stringers				
70'	Shale & limestone stringers				
80'	Shale & limestone stringers	1.1a			
90'	Shale & limestone stringers	1.3a			
100'	Shale & limestone stringers	.7a			
110'	Shale & limestone stringers	.6a			
120'	Shale & limestone stringers	.5a			
130'	Shale & limestone stringers	.4a			
140'	Shale & limestone stringers	.4a			
150'	Shale & limestone stringers	.4a			
160'	Shale & limestone stringers	.4a	.4a	.8a	12
170'	Shale & limestone stringers	.4a	.4a	.8a	11
180'	Shale & limestone stringers	.4a	.4a	.8a	10
190'	Shale & limestone stringers	.4a	.4a	.8a	9
200'	Limestone & shale lenses	.5a	.4a	.8a	8
210'	Limestone & shale lenses	.5a	.5a	1.0a	7
220'	Limestone & shale lenses	1.1a	.5a	1.0a	6
230'	Limestone & shale lenses	.7a	1.0a	1.7a	5
240'	Limestone & shale lenses	.4a	.4a	.8a	4
250'	Limestone & shale lenses	.5a	.4a	.8a	3
260'	Limestone & shale lenses	.4a	0.4a	0.8a	2
270'	Limestone & shale lenses	.5a	.4a	0.8a	1
280'	Limestone & shale lenses	.3a			
290'					
300'					

10"

Test Voltage: 12.31v

CATHODIC PROTECTION HOLE COMPLETION DIAGRAM & DRILL LOG



Installed by:
Pipeline Integrity Resources, Inc.
P.O. Box 6916
Longview, TX 75608
(903) 663-9393 fax (903)-663-9390

Installed for Southern Star
Date: 11/8/14
System: EnviroAnode DB
Location: Sta. 19230 + 26
Technician: Russel Downey

DEEP/SHALLOW CATHODIC PROTECTION GROUNDBEDS
DRILL FLUID DISPOSAL
LETTER OF AGREEMENT

This agreement is made and entered into this 6 Day of Novemeber,
2014 by and between Southern Star Central Gas Pipeline

Hereinafter referred as the "Cathodic Protection System Owner", with

Pipeline Integrity Resources, Inc.
5634 S 107th East Ave
Tulsa, Oklahoma 74146

Hereinafter referred as the "Contractor", with

Tom Scimeca
115 E. East
Caney, KS 67333

Hereinafter referred to as "Property Owner"

The Property Owner acknowledges that the signing of this Agreement is an independent act of the Property Owner agrees to allow access to their property at:

State: Kansas County: Montgomery
Section: 1 Township: 35s Range: 13E

And at the approved by the Property Owner, Fluids will be hauled or spread to the above location on private property disposed of by the Contractor; The Property Owner is accepting any and all responsibility for this action.

IN WITNESS WHEREOF, the parties have executed this Agreement in several counterparts original on the day and year first above written.

[Signature]
Company Representative

Date 11-6-2014

[Signature]
Property Representative

Date 11-6-2014



Chanute Plant
620-437-0112

O'BRIEN ROCK CO., INC.
READY MIX 800-449-2257
Box 217 - St. Paul, Kansas 66771

52661

10143 MAX

ORDER NO. 918-257-2081 DATE 11-7-14

SOLD TO PIPELINE INTEGRITY SERVICES

ADDRESS 534 S 107TH E. AVE TULSA OK

DELIVER TO Yale #1800 74146

ADDRESS Proj # 1455001 Southern Star

TRUCK NO 1260 DRIVER Troy WEATHER CONDITIONS

QTY.	DESCRIPTION	UNIT PRICE	AMOUNT
2	CU. YDS. SACK CONCRETE		
	CU. YDS. 2500 PSI 3000 PSI		
	CU. YDS. 3500 PSI 4000 PSI		
	CALCIUM HOT WATER		
	GALS. WATER AUTHORIZED <u>225K</u>		
	LBS. SAND <u>16</u> WATER REDUCER		<u>1031.00</u>
	LBS. ROCK <u>16</u>		
	GALS. WATER ADDED		
JOB TIME LEFT		TRUCK TIME BACK	TAX
ARRIVED		OUT	DISCOUNT
ELAPSED TIME		TOTAL	

1107.93

NOTICE

We assume no responsibility for damage to sidewalks, buildings, trees, etc. when required to deliver inside of curb. Additional water added to this concrete will reduce its strength. Any water added is at customer's own risk.

CAUTION: Cement may cause burns if exposed. Wash immediately.

NO CREDIT ALLOWED FOR CONCRETE RETURNED

A 1 1/2% per month service charge will be added on unpaid balance over 30 days which is an 18% annual percentage rate.

Received the above in good condition. No guarantee or warrant is expressed beyond this.

TOW TRUCK CHARGE WHEN APPLICABLE \$40.00 MINIMUM OR \$35.00 PER HOUR

Received By: [Signature]