



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1234370
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: _____



1234370

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> _____
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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 <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Job No. 10-13-2817
 Client ONEOK
 Location YAGGY EAST TO-82

PO/WO No. _____ Date 7/29/2014
 Drilling Co.: GILES ENVIROMENTAL DRILLING
 GPS: Lat: 38.10267 Long: 98.02276

Calibrated Instrument Used: FLUKE 87 III S/N 79430055

Depth	Logging Volts: 13.9		Geological Log	Depth	Logging Volts: 13.9		Geological Log	No	Depth	No Coke	With Coke				
	Amps	Ohms			Amps	Ohms									
5			CASING	205	3.00	4.63		1	290	4.60	5.30				
10			CASING	210	3.10	4.48		2	277	4.30	5.10				
15			CASING	215	3.40	4.09		3	264	4.30	5.00				
20			CASING	220	3.80	3.66		4	251	4.40	5.00				
25			CASING	225	4.00	3.48		5	238	4.30	4.80				
30			CASING	230	4.00	3.48		6	225	4.00	4.90				
35			CASING	235	4.20	3.31		7	212	3.30	4.50				
40			CASING	240	4.30	3.23		8	199	3.30	4.10				
45			CASING	245	4.20	3.31		9	186	2.60	3.60				
50			CASING	250	4.40	3.16		10	173	3.20	4.10				
55			CASING	255	4.00	3.48		11	160	3.10	4.00				
60			CASING	260	4.30	3.23		12	147	2.50	3.50				
65			CASING	265	4.30	3.23		13	134	2.70	3.70				
70			CASING	270	4.40	3.16		14	121	3.00	3.80				
75			CASING	275	4.30	3.23		15	101	2.80	3.60				
80			CASING	280	4.30	3.23		16							
85	2.60	5.35		285	4.50	3.09		17							
90	2.40	5.79		290	4.60	3.02		18							
95	2.40	5.79		295				19							
100	2.60	5.35		300				20							
105	2.80	4.96		305				21							
110	2.80	4.96		310				22							
115	2.90	4.79		315				23							
120	3.00	4.63		320				24							
125	3.00	4.63		325				25							
130	3.10	4.48		330				26							
135	2.80	4.96		335				27							
140	2.20	6.32		340				28							
145	2.30	6.04		345				29							
150	2.80	4.96		350				30							
155	3.10	4.48		355				31							
160	3.10	4.48		360				32							
165	3.30	4.21		365				33							
170	3.20	4.34		370				34							
175	3.20	4.34		375				35							
180	3.00	4.63		380				36							
185	2.70	5.15		385				37							
190	2.40	5.79		390					Volts	13.90	13.90				
195	3.20	4.34		395					Amps	52.40	65.00				
200	3.30	4.21		400					Ohms	0.27	0.21				
Hole Dia.:		7.5"	Total Depth:		300'		Casing Feet:		80'	Dia.:		8"	Type:		SDR21
No. Anodes:		15	Size and Type:		3884Z CAST IRON		Anode Lead:			Size:		#8	Type:		HALAR
Lbs. Coke:		5000	Coke Type:		LORESCO RS-3		Top of Coke Column:		75'	Vent:				200'	
Lbs. Plug		1000	Plug Type:		BENTONITE		Top of Plug:						5		