



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1236026  
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: \_\_\_\_\_



1236026

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Mud Rotary Drilling  
Andrew King - Manager/Driller

Bar Drilling, LLC  
Phone: (719) 210-8806

1317 105th Rd.  
Yates Center, KS 66783

<b>Company/Operator</b> Colt Energy Inc. P. O. Box 388 Iola, KS 66749		<b>Well No.</b> 14	<b>Lease Name</b> Pendley	<b>Well Location</b> 2475's, 606'e	<b>1/4</b> NW	<b>1/4</b> NE	<b>1/4</b> NE	<b>Sec.</b> 22	<b>Twp.</b> 26s	<b>Rge,</b> 14e										
<b>Well API #</b> 15-207-29059		<b>Type/Well</b> Oil	<b>County</b> Woodson	<b>State</b> KS	<b>Total Depth</b> 1406	<b>Date Started</b> 9/29/2014	<b>Date Completed</b> 10/2/2014													
<b>Job/Project Name/No.</b>		<b>Surface Record</b>		<b>Bit Record</b>				<b>Coring Record</b>												
	<b>Driller/Crew</b>	<b>Bit Size:</b>	11 1/4	<b>Type</b>	PDC	<b>Size</b>	11 1/4	<b>From</b>	0'	<b>To</b>	42.8'	<b>Core #</b>	1	<b>Size</b>	2 1/8"	<b>From</b>	1232'	<b>To</b>	1251'	<b>% Rec.</b>
	Andy King	<b>Casing Size:</b>	8 5/8		PDC	6 3/4	42.8'	1406'												
	Charles King	<b>Casing Length:</b>	42.8'																	
		<b>Cement Used:</b>	15sx																	
		<b>Cement Type:</b>	Portland																	

**Formation Record**

From	To	Formation	From	To	Formation	From	To	Formation
0	8	overburden	1044	1051	lime			
8	11	lime	1051	1063	shale			
11	14	shale	1063	1064	lime			
14	17	lime	1064	1079	sq. sand (oil show)			
17	210	shale	1079	1129	sandy shale			
210	473	lime	1129	1130	lime			
473	510	shale	1130	1135	black shale			
510	516	lime	1135	1161	sandy shale			
516	552	shale	1161	1162	lime			
552	642	KC lime	1162	1226	shale			
642	646	shale	1226	1232	black shale			
646	728	lime	1232	1251	sandy shale			
728	826	sandy shale	1251	1298	shale			
826	831	lime	1298	1303	oil sand			
831	858	sandy shale	1303	1331	core			
858	870	lime	1331	1391	shale			
870	883	shale	1391	1406	Miss lime			
883	968	sandy shale						
968	972	black shale						
972	993	lime						
993	1018	shale						
1018	1037	lime						
1240	1044	black shale						

**Well Notes:**

810 E 7TH  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561



**Cement or Acid Field Report**  
 Ticket No. **1773**  
 Foreman Shannon Feck  
 Camp Eureka, KS

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
10-2-14	1003	Pendley	# 14				Woodson	KS
Customer				Safety Meeting	Unit #	Driver	Unit #	Driver
Colt Energy				5F	105	Dave G		
Mailing Address				DG	110	Scott W		
P.O. Box 388				5W				
City	State	Zip Code						
Iola	KS	66749						

Job Type L/S Hole Depth 1408' Slurry Vol. 47 Bbl Tubing —  
 Casing Depth 1373.9 6L Hole Size 6 3/4" Slurry Wt. 13.6-13.7 # Drill Pipe —  
 Casing Size & Wt. 4 1/2" @ 10.50 # Cement Left in Casing 4' Water Gal/SK 9.0 Other —  
 Displacement 21.7 Bbl Displacement PSI 600 Bump Plug to 1000 BPM —

Remarks: Safety Meeting, Rig up to 4 1/2" casing, Break circulation, mixed 300# gel flush w/ hulls, 10 Bbl H2O spacer. Mixed 150 SKS Thick Set Cement w/ 2# Phenoseal/SK @ 13.7 #/gal. Shut down wash out pump & line. Displace w/ 21.7 Bbl H2O. Final pumping pressure of 600 PSI, bumped plug to 1000 psi, Plug & Float Held. Good circulation @ all times while cementing 7 Bbl slurry to pit. rig down job complete

" Thank you "  
 Shannon & Crew

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1050.00	1050.00
C107	25	Mileage	3.95	98.75
C201	150 SKS	Thick Set Cement	19.50	2925.00
C208	300 #	Phenoseal @ 2 #/SK	1.25	375.00
C206	300 #	gel flush	.20	60.00
C214	45 #	Hulls	.45	20.25
C108A	8.25 Ton	Ton mileage bulk Trk	m/c	345.00
C403	1	4 1/2" Top Rubber Plug	45.00	45.00
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;">           590 &lt; 208.00 &gt;            \$4905.71         </div>				
			Sub Total	4919.00
			Sales Tax	244.91
Authorization _____ Title _____			Total	5163.91

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.