Confidentiality Requested: Yes No

### KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1235524

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:	
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	OW Elevation: Ground: Kelly Bushing:
	GW Total Vertical Depth: Plug Back Total Depth:
	mp. Abd. Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv.	Drining Fluid Management Flain
Plug Back Conv. to GSW Conv.	to Producer (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:  Dual Completion Permit #:	Dewatering method used:
SWD     Permit #:	
ENHR     Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion D	Quarter Sec TwpS. R East West
Recompletion Date Recompletion	

#### 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:						

	Page Two	1235524
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS, Chow important tang of formations papatrated	Dotail all coros Poport all final	copies of drill stome tasts giving interval tasted, time tool

**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 Sh	neets)	Yes No		-	on (Top), Depth a		Sample
Samples Sent to Geolo	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING Report all strings set-o	RECORD Ne		on, 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 / SQL	EEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used		Type and F	Percent Additives	

Purpose: Perforate	Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

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						ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Si	ze:	Set At:		Packe	r At:	Liner F	Run:	No	
Date of First, Resumed	d Product	ion, SWD or ENHF	٦.	Producing M	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSIT	DISPOSITION OF GAS:			<b>.</b>					PRODUCTION INTE	RVAL:
Vented Sole	Vented Sold Used on Lease			Open Hole	Perf.	Uually (Submit)	Comp. 4 <i>CO-5</i> )	Commingled (Submit ACO-4)		
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify)				()		

Form	ACO1 - Well Completion
Operator	Grand Mesa Operating Company
Well Name	VESECKY 4-7
Doc ID	1235524

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	U U U	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11	7	17	40	Portland	8	



### **Operator:** Grand Mesa Operating Co. Wichita, KS

## Vesecky #4-7

Douglas Co., KS 23-14S-20E API: 045-22244

Spud Date:	11/14/2014	Surface Bit: 11.0"
Surface Casing:	7.0"	<b>Drill Bit:</b> 6.125"
Surface Length:	45.0'	Longstring: P&A
Surface Cement:	8 sx	Longstring Date:
Longstring:		

# Driller's Log

Тор	Bottom	Formation Comments
0	18	Soil & clay
18	40	Gravel, sand, clay
40	65	Shale
65	70	Lime
70	74	Sandy shale
74	92	Lime
92	95	Shale
95	97	Bl. Shale
97	137	Lime
137	159	Sandy shale
159	170	Lime
170	182	Shale
182	212	Sandy shale
212	249	Shale
249	254	Lime
254	257	Shale
257	270	Lime
270	295	Shale
295	301	Lime
301	333	Shale
333	340	Lime
340	354	Shale
354	379	Lime
379	389	Shale

		Vesecky #4-7
389	409	Douglas Co., KS Lime
409	415	Shale
415	418	Lime
418	422	Shale
422	429	Lime
429	598	Shale
598	608	Lime
608	642	Shale
642	645	Lime
645	654	Shale
654	661	Lime
661	669	Shale
669	671	Lime
671	675	Shale
675	677	Lime
677	679	Bl. Shale
679	684	Shale
684	690	Lime
690	694	Shale
694	757	Shale
757		TD

Dry hole. P&A through drill pipe w/20 sx at TD, 10 sx at base KC, Fill from 250 to surface.

KS

	Coring					
Run	Footage	Rec.				
1	675-695	19				
2	695-715	15				
3	737-757	19				

						TICKET NUMB		
	SNSOLID/					LOCATION 6		
	il Well Şervice					FOREMAN_F	ved vha	der-
Box 884, Ch	anute, KS 667	2.0		ET & TREA CEME	ATMENT REP	ORI		
DATE	r 800-467-8676	WELL	NAME & N		SECTION	TOWNSHIP	RANGE	COUNTY
DATE	30-0	Vecer		+21-7	NW 23	14	20	DC
ISTOMER	_337 4	<u> </u>	4		TRUCK #		, TRUCK #	. DRIVER
Gran	d Mesa	2 Openal	~ <del>}</del> +		·7/2	FreMad		
ILING ADDRE		J. J. DI			-195	HarBee		
17 00 TY	N. Wat	STATE	ZIP CODE	<u> </u>	369	MikHaa	r.	
Wichits		KS	672		548	Damluha	BW/ X	
B TYPE	04	HOLE SIZE	500	-614 OLE DEF	тн <u>757</u> '	CASING SIZE & V		
SING DEPTH	JU/A_	DRILL PIPE		TUBING		CEMENT LEFT in		[
URRY WEIGH	т	SLURRY VOL	<u> </u>	WATER ga MIX PSI	al/sk	RATE 43P		
SPLACEMENT		DISPLACEMEN	NT PSI		a divite o	i Ao Ko T.	B. Spot	10 sics
MARKS:	a d Sa	tety pru	XNAL	Kig IV	n to 44	of Spat	10 Sy Can	
Cemu		D. F.		Fill	to Surface			· · ·
PUNC	YAIN DI	Lu aiha		o off		ament. W.	ash out	·
rend	A MARCEN	- p.p.		- <i>p</i>	[			
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I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's