

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1237678

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	Twp S. R	East West
Address 2:			Feet	t from North / Sout	h Line of Section
City: St	ate: Zip	D:+	Feet	t from East / West	t Line of Section
Contact Person:			Footages Calculated from Ne	earest Outside Section Corne	r:
Phone: ()			□ NE □ NW	□ SE □ SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				g. xx.xxxxx) ((e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27 N		
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	Well #:	
New Well Re-	-Fntrv	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing:	
☐ Gas ☐ D&A ☐ OG	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total Depth:	<u>. </u>
CM (Coal Bed Methane)	G3W	iemp. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet
Cathodic Other (Core	Expl etc.)		Multiple Stage Cementing Co		
If Workover/Re-entry: Old Well Inf			If yes, show depth set:		Feet
Operator:			If Alternate II completion, cen		
Well Name:			feet depth to:		
Original Comp. Date:			loot dopar to:		
Deepening Re-perf.	_	NHR Conv. to SWD	B	D.	
☐ Plug Back	Conv. to GS		Drilling Fluid Management (Data must be collected from the		
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls
Dual Completion	Permit #:		Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if ha	auled offsite:	
☐ ENHR	Permit #:		Operator Name		
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date Rea	iched TD	Completion Date or	QuarterSec		
Recompletion Date		Recompletion Date	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:

Page Two



Operator Name:				Lease I	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whet vith final c	ther shut-in pre hart(s). Attach	essure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bod.	ottom hole temp	erature, fluid re	ecovery,
Final Radioactivity Lo files must be submitte						gs must be ema	liled to kcc-well-	ogs@kcc.ks.go	v. Digital electi	ronic log
Drill Stem Tests Taker (Attach Additional		Ye	es No			J	on (Top), Depth		Samp	
Samples Sent to Geo	logical Survey	Ye	es No		Nam	e		Тор	Datum	1
Cores Taken Electric Log Run		☐ Ye								
List All E. Logs Run:										
				RECORD	Ne					
	0: 11.1					ermediate, product		" 0 1	T 15	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives		
Perforate Protect Casing	Top Detterm									
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment of	on this well?	•			Yes	No (If No, s	kip questions 2 a	nd 3)	
Does the volume of the t			_		-		= ` `	kip question 3)		
Was the hydraulic fractur	ing treatment information	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, f	ill out Page Three	of the ACO-1)	
Shots Per Foot			D - Bridge Plug Each Interval Perf				cture, Shot, Ceme			Depth
						(_	
TUBING RECORD:	Size:	Set At:		Packer A		Liner Run:				
		0017111				[Yes N	0		
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gra	avity
DIODOCITI	01.05.040			4ETUOD 05	001451	TION		DDODUCT	ONLINITED (A)	
DISPOSITION Solo	ON OF GAS: Used on Lease		N Open Hole	∥ETHOD OF ☐ Perf.			nmingled	PRODUCTION	ON INTERVAL:	
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)			



REMILT TO

Consolidated Oil Well Services, LLC Dept. 970 P.O. Box 4346

Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

PETROLEUM RESOURCE MGMT CO 675 BERING DRIVE, SUITE 675 HOUSTON TX 77057 (281)482-1032 HAMMON I-3-14 V 46036 09/05/2014 KS

Part Number 4402 1131 1118B 1118B 1107A 1110A 1102 1123	Description 2 1/2" RUBBER PLUG 60/40 POZ MIX PREMIUM GEL / BENTONITE PREMIUM GEL / BENTONITE PHENOSEAL (M) 40# BAG) KOL SEAL (50# BAG) CALCIUM CHLORIDE (50#) CITY WATER	Qty 2.00 140.00 500.00 200.00 120.00 700.00 100.00 3000.00	.2200 .2200	110.00 44.00 162.00 322.00
Sublet Performed 9996-170	Description CEMENT MATERIAL DISCOUNT			Total -768.30
Description 445 80 BBL VACUUM 637 CEMENT PUMP 637 EQUIPMENT MILE 667 MIN. BULK DELI	AGE (ONE WAY)	Hours 2.00 1.00 45.00 1.00	Unit Price 90.00 1085.00 4.20 368.00	

Sed- 9-15-14

2501 - 007 Coment 27/8" casing

Amount Due 4685.16 if paid after 09/21/2014

	=======					====	
Parts:	2672.10	Freight:	.00	Tax:	136.13	AR	3861.93
Labor:	.00	Misc:	.00	Total:	3861.93		
Sublt:	-768.30	Supplies:	.00	Change:	.00		
	=======				=========	====	

Date Signed CUSHING, OK THAYER, KS GILLETTE, WY BARTLESVILLE, OK EL DORADO, KS EUREKA, KS PONCA CITY, OK OAKLEY, KS OTTAWA, KS 918/225-2650 620/839-5269 307/686-4914 918/338-0808 316/322-7022 620/583-7664 580/762-2303 785/672-8822 785/242-4044



270962

LOCATION Gureten PS
FOREMAN JESSMY R HUTE

PO Box 884, (Chanute.	KS	68720	
620-431-9210	or 800-	187	9678	

FIELD TICKET & TREATMENT REPORT

	CUSTOMER#	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	
9-5-14	6237	T-7-14 16			MINGE	COUNTY
USTOMER	Thank	I-3-14 Hammy	202			woodsor
Petrolin	n manage	ment Resources				
AILING ADDR	ESS	ALTO APPOUNCES	TRUCK#	DRIVER	TRUCK#	DRIVER
		ing its first	640	JETEMY		
TY		STATE ZIP CODE	137	Renee		
		ZIFCOE	667	Jeff		
DB TYPE 4	11		445	Brontagna	425	
LURRY WEIGH SPLACEMENT EMARKS: (44)	4 .4	DISPLACEMENT PSI 3000 MIX	TER gal/sk_ <u> </u>	CEMENT LEFT in C	ASING	
anked an 5 bb	up to 171 Forth we Shut down back 6.4	tubing bioles Circumster Then san 140 s	s sheffed 2-	a Coment 1	Phys in	tubine

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	. 1	PUMP CHARGE		10
5406	45 miles	MILEAGE	 	1085,00
9967	1		-	189.00
502	THES	min. bulk delivery		368.00
1402	2-27/8	XO DHC		180.00
1/3/	140 5/5	Rubber Places 60/40 4% Convert		59,00
118/3	500#	60/40 476 Convert	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1845:00
11813	200#	Coel	ing the Park of the Contract	110.00
IOTA	120 #	Coel Sweep	EQUIE EN COPERT	44,00
LIDA	300 ±	Phano Kolseni		162.00
102	100#	Rolsen		322 00
123	3000 Gral	City water		48,00
		TY WHIEL		57.90
			to be some processing	4494,10
		30% 0	Scount	-768.30
3737		7.15%	SALES TAX	134.13
		o for letting the particle of the second of	ESTIMATED	381.93

AUTHORIZTION_____TITLE_____DATE___