



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1237850  
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: \_\_\_\_\_

1237850

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 <i>(Attach Additional Sheets)</i>	<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 <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**TRILOBITE  
TESTING, INC**

## DRILL STEM TEST REPORT

CG Oil Inc  
2550 Airbase Rd  
Victoria KS 67671

ATTN: Roger Fisher

**28-16s-13w Barton,KS**

**JMR #3**

Job Ticket: 61876

**DST#: 1**

Test Start: 2014.10.23 @ 21:20:00

### GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 00:03:30

Time Test Ended: 05:48:30

**Interval: 3427.00 ft (KB) To 3445.00 ft (KB) (TVD)**

Total Depth: 3445.00 ft (KB) (TVD)

Hole Diameter: 7.88 inches Hole Condition: Fair

Test Type: Conventional Bottom Hole (Initial)

Tester: Jared Scheck

Unit No: S5

Reference Elevations: 1986.00 ft (KB)

1977.00 ft (CF)

KB to GR/CF: 9.00 ft

**Serial #: 8400**

**Outside**

Press@RunDepth: 1097.43 psig @ 3429.00 ft (KB)

Capacity: 5000.00 psig

Start Date: 2014.10.23

End Date: 2014.10.24

Last Calib.: 2014.10.24

Start Time: 21:21:00

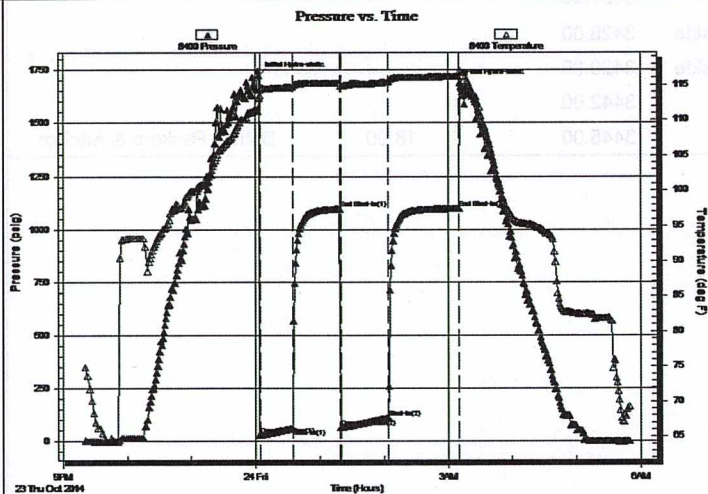
End Time: 05:49:30

Time On Btm: 2014.10.24 @ 00:03:00

Time Off Btm: 2014.10.24 @ 03:11:30

**TEST COMMENT:** IFP-30 Minutes-Fair blow built bottom of bucket in 30 minutes  
ISIP-45 Minutes-Very weak blow back  
FFP-45 Minutes-Fair blow built bottom of bucket in 41 minutes  
FSIP-60 Minutes-Very weak surface blow

### PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1725.68	113.07	Initial Hydro-static
1	28.18	113.53	Open To Flow (1)
32	57.85	114.67	Shut-In(1)
76	1096.07	115.23	End Shut-In(1)
77	62.14	114.82	Open To Flow (2)
121	109.08	115.42	Shut-In(2)
188	1097.43	116.22	End Shut-In(2)
189	1688.41	117.04	Final Hydro-static

### Recovery

Length (ft)	Description	Volume (bbl)
120.00	OW 5%oil 95%w ater	1.68
90.00	GCO 5%gas 95%oil	1.26

### Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 718

Date	10-19-14	Sec.	28	Twp.	16	Range	13	County	Barton	State	KS	On Location		Finish	6:45 PM
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Location: Sugank 1/2 E S10

Lease: JMR Well No. #13 Owner:

Contractor: Southwind #8 To Quality Oilwell Cementing, Inc.  
Type Job: Surface You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Hole Size: 12 1/4 T.D.: 1016' Charge To: C + G

Csg.: 8 5/8 Depth: 1016' Street:

Tbg. Size: Depth: City: State:

Tool: Depth: The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg.: Shoe Joint: Cement Amount Ordered: 375 60/40 3% cc 2% bd

Meas Line: Displace: 62 3/4 bbl

**EQUIPMENT**

Pumptrk 17	No.	Cementer		Common
		Helper	Cody	Poz. Mix
Bulktrk 13	No.	Driver	Ryan	Gel.
		Driver		Calcium
Bulktrk PU	No.	Driver	Brett	
		Driver		

**JOB SERVICES & REMARKS**

Remarks:	Hulls
Rat Hole	Salt
Mouse Hole	Flowseal
Centralizers	Kol-Seal
Baskets	Mud CLR 48
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand
	Handling
	Mileage

Cement

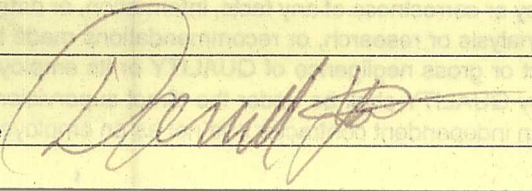
**FLOAT EQUIPMENT**

	8 5/8	Guide Shoe
		Centralizer
		Baskets
		AFU Inserts
		Float Shoe
		Latch Down
		Rubber Plug - 1

Circulated!

# Quality Oilwell Cementing

	Pumptrk Charge	
	Mileage	
		Tax
		Discount
		Total Charge

X Signature: 



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. **675**

Cell 785-324-1041

Date <u>10-25-14</u>	Sec. <u>28</u>	Twp. <u>16</u>	Range <u>13</u>	County <u>Barton</u>	State <u>KS</u>	On Location	Finish <u>8:45 AM</u>
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Location Susank, 1/2 E, S12

Lease <u>JMR</u>	Well No. <u>3</u>	Owner
Contractor <u>Southwind</u>	<u>#8</u>	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Type Job <u>long string</u>		
Hole Size <u>7 7/8</u>	T.D. <u>3500</u>	Charge To <u>C.G. Oil Inc.</u>
Csg. <u>5 1/2 15.5 #</u>	Depth <u>3503.25</u>	Street
Tbg. Size	Depth	City State
Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
Cement Left in Csg.	Shoe Joint <u>23.04</u>	Cement Amount Ordered <u>180 sx com, 10% salt</u>
Meas Line	Displace <u>82.92661</u>	

**EQUIPMENT**

Pumptrk <u>18</u>	No.	Cementer Helper	Common
Bulktrk <u>15</u>	No.	Driver Driver	Poz. Mix
Bulktrk <u>P4</u>	No.	Driver Driver	Gel.
			Calcium

**JOB SERVICES & REMARKS**

Remarks:	Hulls
Rat Hole <u>30sx</u>	Salt
Mouse Hole <u>15sx</u>	Flowseal
Centralizers <u>1,3,4,5</u>	Kol-Seal
Baskets	Mud CLR 48 <u>500 gal</u>
D/V or Port Collar	CFL-117 or CD110 CAF 38
	Sand

Pipe on bottom broke circulation. Pumped 500 gal Mud CLR 48 with 10 bbl fw behind it. Plugged Rat hole with 30sx and Mouse hole with 15sx. Hooked to 5 1/2 and Pump Mixed 135 sx com 10% salt. Shut down washed pump and lines. Released Plug and displaced with 82 3/4 bbl fw. Plug landed and held.

**FLOAT EQUIPMENT**

Guide Shoe
Centralizer <u>4 turbos</u>
Baskets
AFU Inserts
Float Shoe <u>1</u>
Latch Down <u>1</u>

lift pressure 700 psi

Plug landed at 1500 psi

Signature Kerry W. Reeser

Pumptrk Charge	Tax
Mileage	Discount
	Total Charge