



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1247602  
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: \_\_\_\_\_



1247602

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CEMENT FIELD TICKET AND TREATMENT REPORT**

Customer	Kansas NB Project	State, County	Chautauqua, Kansas	Cement Type	CLASS A
Job Type	Long String	Section		Excess (%)	35%
Customer Acct #		TWP		Density	13.6
Well No.	NB #4	RGE		Water Required	8.1
Mailing Address		Formation		Yield	1.8
City & State		Tubing		Sacks of Cement	170
Zip Code		Drill Pipe		Slurry Volume	54.5
Contact		Casing Size	4 1/2	Displacement	25.5
Email		Hole Size	6 3/4	Displacement PSI	800
Cell		Casing Depth	1606	MIX PSI	250
Dispatch Location	EUREKA	Hole Depth	1615	Rate	3.5
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,085.00	\$ 1,085.00
5406	EQUIPMENT MILEAGE (ONE-WAY)	40	PER MILE	\$4.20	\$ 168.00
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$368.00	\$ 368.00
5609	MISC PUMP (CEMENT TRUCK)	4	PER HOUR	\$210.00	\$ 840.00
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
<b>EQUIPMENT TOTAL</b>					<b>\$ 2,461.00</b>
Cement, Chemicals and Water					
1126	OWC. CEMENT (CAL SEAL) 6%OWC. 2% CAL.CHLORIDE 2% GE	170	0	\$19.75	\$ 3,357.50
1107A	PHENOSEAL	160	0	\$1.35	\$ 216.00
1110A	KOL SEAL (50 # SK)	1050	0	\$0.46	\$ 483.00
1111	GRANULATED SALT (50#) SELL BY #	1150	0	\$0.39	\$ 448.50
1118B	PREMIUM GEL/BENTONITE (50#)	2100	0	\$0.22	\$ 462.00
1105	COTTONSEED HULLS (45#)	45	0	\$0.46	\$ 20.70
0			0	\$0.00	\$ -
0	30% Discount		0	\$0.00	\$ (1,496.31)
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
1123	CITY WATER (PER 1000 GAL)	7.5	0	\$17.30	\$ 129.75
<b>CHEMICAL TOTAL</b>					<b>\$ 3,621.14</b>
Water Transport					
5501C	WATER TRANSPORT (CEMENT)	10	WATER TRANSPORT (CEME	\$120.00	\$ 1,200.00
5502C	80 BBL VACUUM TRUCK (CEMENT)	10	BL VACUUM TRUCK (CEM	\$90.00	\$ 900.00
5504B	FLATBED DELIVERY	10	FLATBED DELIVERY	\$105.00	\$ 1,050.00
<b>TRANSPORT TOTAL</b>					<b>\$ 3,150.00</b>
Cement Floating Equipment (TAXABLE)					
Cement Basket					
0			0	\$0.00	\$ -
Centralizer					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
Float Shoe					
0			0	\$0.00	\$ -
Float Collars					
0			0	\$0.00	\$ -
Guide Shoes					
0			0	\$0.00	\$ -
Baffle and Flapper Plates					
0			0	\$0.00	\$ -
Packer Shoes					
0			0	\$0.00	\$ -
DV Tools					
0			0	\$0.00	\$ -
Ball Valves, Swedges, Clamps, Misc.					
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
0			0	\$0.00	\$ -
Plugs and Ball Sealers					
4404	4' 1/2" RUBBER PLUG	1	PER UNIT	\$47.25	\$ 47.25
Downhole Tools					
0			0	\$0.00	\$ -
<b>CEMENT FLOATING EQUIPMENT TOTAL</b>					<b>\$ 47.25</b>
				SUB TOTAL	\$ 9,279.39
				SALES TAX	\$ 420.92
				TOTAL	\$ 9,700.31
				0% (-DISCOUNT)	\$ -
				<b>DISCOUNTED TOTAL</b>	<b>\$ 9,700.31</b>
TRUCK#	DRIVER NAME				
690	John Wade				
485	Jeremy Mcdonald				
667	Jeff				
637	Renee				
452/103	Brent Mellen				
123	Jimmy				

AUTHORIZATION \_\_\_\_\_  
DATE \_\_\_\_\_

TITLE \_\_\_\_\_  
FOREMAN \_\_\_\_\_

I ACKNOWLEDGE THAT THE PAYMENT TERMS, UNLESS SPECIFICALLY AMENDED IN WRITING ON THE FRONT OF THE FORM OR IN THE CUSTOMER'S ACCOUNT RECORDS, AT OUR OFFICE, AND CONDITIONS OF SERVICE ON THE BACK OF THIS FORM ARE IN EFFECT FOR SERVICES IDENTIFIED ON THIS FORM.



Operator **KANSAS MB PROJECT** Well No. **MB-4** Lease **WALTER MOORE** Loc. **1/4 1/4 1/4** Sec. **3** Twp. **34** Rge. **13**

County **CHAUTAQUA** State **KS** Type/Well **919'** Depth **919'** Hours **9-5-14** Date Started **9-5-14** Date Completed **9-6-14**

Job No.	Casing Used	41' 8 5/8"	Bit Record				Coring Record							
			Bit No.	Type	size	From	To	Bit No.	type	Size	From	To	% Rec.	
Driller	Cement Used				6 3/4"									
Driller	Rig No.													
Driller	Hammer No.													

**Formation Record**

From	To	Formation	From	To	Formation	From	To	Formation
0	41	SURFACE						
41	67	SHALE	428	432	BLK SHALE			
67	71	LIME	432	457	SHALE			
71	84	SHALE	457	491	SAND			
84	85	LIME	491	557	SHALE			
85	87	SHALE	557	565	LIME			
87	90	LIME	565	570	SHALE			
90	102	LIMEY SHALE	570	588	SAND			
102	133	SHALE	579		LIGHT ODOR			
133	140	LIME	588	707	SHALE			
140	157	SHALE	707	714	BLK SHALE			
157	163	LIME	714	716	LIMEY SHALE			
163	175	SHALE	716	724	BLK SHALE			
175	178	LIME	724	734	SHALE			
178	196	SANDY LIME	734	749	LIME			
196	205	SANDY SHALE	749	802	SHALE			
205	258	SHALE	802	815	LIME			
258	278	SANDY SHALE	815	822	BLK SHALE			
278	279	LIME	822	825	SANDY LIME			
279	285	SHALE	825	826	SHALE			
285	288	LIME	826	835	LIME			
288	291	SANDY SHALE	835	845	SANDY SHALE			
291	292	COAL	845	872	SAND			
292	296	SHALE	853		ODOR			
296	330	SAND	872	919	SANDY SHALE			
311		WENT TO WATER			T.D. 919'			
330	380	SHALE						
380	386	SAND						
386	390	SHALE						
390	407	SAND						
407	428	SANDY SHALE						