

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1248232

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

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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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>	☐ Yes	☐ No	☐ Log	Formation (Top), Depth and Datum	☐ Sample
Samples Sent to Geological Survey	☐ Yes	☐ No	Name	Top	Datum
Cores Taken	☐ Yes	☐ No			
Electric Log Run	☐ Yes	☐ No			
List All E. Logs Run:					

CASING RECORD ☐ New ☐ 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
☐ Perforate				
☐ Protect Casing				
☐ Plug Back TD				
☐ 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 (Amount and Kind of Material Used)		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

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>		METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> ☐ Other <i>(Specify)</i> _____		PRODUCTION INTERVAL: _____ _____	
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Form	ACO1 - Well Completion
Operator	JTC Oil, Inc.
Well Name	D. PETTIT P-5
Doc ID	1248232

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	9	7	10	20	PORTLAND	5	60/40 POZ
Production	5.625	2.875	8	500	PORTLAND	85	60/40 POZ

Operator License # 32834
 Operator JTC Oil, Inc.
 Address 35790 Plum Creek Road
 City Osawatomie, KS 66064
 Contractor JTC Oil, Inc.
 Contractor License # 32834
 T.D. 500'
 T.D. of pipe 0
 Surface pipe size 7"
 Surface pipe depth 20'
 Well Type Production

API # 15-121-30940-00-00
 Lease Name D. Pettit
 Well # P-5
 Spud Date 2/26/2015
 Cement Date 3/13/2015
 Location Sec 23 T 18 S R 22 E
 165 feet from N line
 2475 feet from W line
 County Miami

Driller's Log

Thickness	Strata	From	To
3	soil	0	3
1	lime	3	4
3	clay	4	7
42	shale	7	49
12	lime	49	61
10	shale	61	71
30	lime	71	101
7	coal	101	108
22	lime	108	130
4	coal	130	134
14	lime	134	148
147	shale	148	295
3	oil sand	295	298
2	oil sand	298	300
1	lime	300	301
2	sand	301	303
9	shale	303	312
16	lime	312	328
46	shale	328	374
9	lime	374	383
12	shale	383	395
3	lime	395	398
12	black shale	398	410
2	lime	410	412
6	shale	412	418
18	lime	418	436
13	shale	436	449
2	lime	449	451
12	coal	451	463
3	lime	463	466
34	shale	466	500

v-good
ok
empty

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer: JTC		Customer Name:		Ticket No.: 50539				
Address:		AFE No.:		Date: 3/13/2015				
City, State, Zip:		Job type: Cement Plug.. NEW WELL BUT DRY HOLE						
Service District:		Well Details: 500 ft of 5 7/8 open hole						
Well name & No. D.PETTIT P-5		Well Location:		County: Franklin	State: Kansas			
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED	AM	TIME
26	Joe					ARRIVED AT JOB	AM	
231	Tom					START OPERATION	AM	
240	Troy					FINISH OPERATION	AM	
111	Tyler					RELEASED	AM	
108	Jeff					MILES FROM STATION TO WELL	AM	
Treatment Summary								
Hooked onto 1 inch tubing and achieved circulation and pumped 85 sks of 60/40 cement 2 % gel to get cement to surface... Pulled all 500 ft of 1 inch out of hole and topped well off.. 2500 gallons water from Osawatomie..								
Product/Service								
Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	Net Amount	
c00101	Heavy Equip. One Way	mi	-	\$3.25	\$0.00	10.00%	\$0.00	
c00102	Light Equip. One Way	mi	-	\$1.50	\$0.00	10.00%	\$0.00	
c23103	Cement Pump (Multiple wells)	ea	1.00	\$675.00	\$675.00	25.00%	\$506.25	
p01603	60/40 Pozmix Cement	sack	85.00	\$12.00	\$1,020.00	25.00%	\$765.00	
p01607	Bentonite Gel	lb	-	\$0.30	\$0.00	25.00%	\$0.00	
p01631	Rubber Plug 2 7/8	ea		\$25.00		10.00%		
p02000	H2O	gal	2,500.00	\$0.01	\$32.50		\$32.50	
c11100	Vacuum Truck 80 bbl	ea	0.50	\$84.00	\$42.00	10.00%	\$37.80	
c10800	Vacuum Truck 80 bbl	ea	0.50	\$84.00	\$42.00	10.00%	\$37.80	
c24201	Cement Bulk Truck - Minimum	ea	1.00	\$300.00	\$300.00	50.00%	\$150.00	
TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and owing and subject to collection.								
Gross: \$ 2,111.50					Net: \$ 1,529.35			
Total Taxable \$ -					Tax Rate: 7.650%			
Frac and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.					Sale Tax: \$ -			
					Total: \$ 1,529.35			
Date of Service:					3/13/2015			
HSI Representative:					Joe Blanchard			
Customer Representative:					Curtis			
X _____								
CUSTOMER AUTHORIZED AGENT								
Customer Comments or Concerns:								

Hurricane Services appreciates any Comments, Concerns or Criticism's from our valuable customers as Safety and Customer Satisfaction are our Number 1 goal. All Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.