



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1254194  
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: \_\_\_\_\_



1254194

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	AAS Oil Co., Inc.
Well Name	Parks A1
Doc ID	1254194

All Electric Logs Run

Dual compensated porosity log
Microresistivity
Dual induction
Computer Processed Interpretation

JM 1345

FT 1298



**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER 48527

LOCATION El Dorado

FOREMAN Fuzz Y

Invoice # 802489

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

**CEMENT**

Ks

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-5-14	1091	Parks A-1	29	34	3	Cowley
CUSTOMER AAS			Guda Springs			
MAILING ADDRESS 2508 Edgemont Dr. St 4			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Arkansas City			5-282	Chris		
STATE KS			26	Jud		
ZIP CODE 67005			5:2			

JOB TYPE Production HOLE SIZE 7 1/8 HOLE DEPTH 3675' CASING SIZE & WEIGHT 5" x 15.5  
 CASING DEPTH 3671 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.7 SLURRY VOL 52.7 WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 87.3 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Gulick Bldg. Flood wrap Turb's 1-3-5-7-9-11  
 19-29 Baskets 10, 20, 30. Rig up and circulate 1/2 hr. Pump 5 BBL  
 water, several mud flush, 5 BBL water, mix 200SKS Class A'  
 390 gal, 280 calcium chloride w/ 5# Kolsval presk. Wash pump and  
 lines. Drop plug and displace 88 BBL. 750' lift land plug  
 1250# float hold.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	1085 <sup>00</sup>	1085 <sup>00</sup>	
5406	40	MILEAGE	42 <sup>00</sup>	252 <sup>00</sup>	
5407A	9.4 gal	Tow mileage delivery	141	795 <sup>20</sup>	
5402	1000'	Casing footage	.23	230 <sup>00</sup>	
11045/1997	200	Class A'	1570	3140 <sup>00</sup>	
118B	600*	Gel	.22	132 <sup>00</sup>	
1102	400*	Calcium chloride	.78	312 <sup>00</sup>	
110A	1000*	Kolsval	.46	460 <sup>00</sup>	
11446/1998	500 gal	mud flush	1.10	550 <sup>00</sup>	
4454	1	5 1/2 Latchman / insert	266 <sup>75</sup>	266 <sup>75</sup>	
41366	8	5 1/2 - S-Band Turbolizers (w)	132 <sup>50</sup>	1060 <sup>00</sup>	
4104	3	5 1/2 - Baskets (w)	290 <sup>00</sup>	870 <sup>00</sup>	
4203	1	5 1/2 Guide shoe	168 <sup>00</sup>	168 <sup>00</sup>	
				9320 <sup>75</sup>	
				disc	123 <sup>20</sup>
					8107 <sup>25</sup>
			6.4	SALES TAX	367.71
				ESTIMATED TOTAL	8475.50

Revin 3737

AUTHORIZATION Jay [Signature]

TITLE Prod Supt

DATE 12-5-14

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



**CONSOLIDATED**  
Oil Well Services, LLC

JM 1215

FT 1147

TICKET NUMBER 48482

LOCATION EL Dorado

FOREMAN Free

INVOICE # 802272

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-30-14	1091	Parks A-1	29	34	3	Cowley
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
AAS OIL Co.			760	Chris		
MAILING ADDRESS			681	Steven		
2508 Edgemont Dr Ste #4						
CITY	STATE	ZIP CODE				
ARKANSAS CITY	Ks	67005				

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 330' CASING SIZE & WEIGHT 8 5/8  
 CASING DEPTH 330 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.7 SLURRY VOL 42.3 WATER gal/sk 6.5 CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 20.3 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting on Gulick Dr. Rig up and circulate  
Mix 175 sks Class A' 37acc, 290gal 1\* poly flake /sk  
Displace 20 bbl water and shut in.  
Cement did circulate approx 3 bbls do pit

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	870.00	870.00
5406	60	MILEAGE	4.20	252.00
5407A	8.2 den	Tow mileage delivery	1.41	693.12
11045	175 sks	Class A'	15.20	2747.50
1102	500 #	Calcium chloride	.78	390.00
1118B	350 #	Bentonite	.22	77.00
1107	175 #	Poly-flake	2.47	432.25
4106	1	8 5/8 - Basket	336.00	336.00
4317	1	8 5/8 - Loc ring	42.40	42.40
		subtotal		5840.97
		discount		1094.03
		subtotal		4746.94
		6.4 SALES TAX		187.59
		ESTIMATED TOTAL		4934.44

Revin 3737  
 AUTHORIZATION M. Duff TITLE Tool Pusher DATE 11-30-14

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

Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair  
Jay Scott Emler, Commissioner  
Pat Apple, Commissioner

Sam Brownback, Governor

June 09, 2015

Dennis K. Shurtz  
AAS Oil Co., Inc.  
2508 EDGEMONT DR STE # 4  
ARKANSAS CITY, KS 67005-3844

Re: ACO-1  
API 15-035-24626-00-00  
Parks A1  
NE/4 Sec.29-34S-03E  
Cowley County, Kansas

Dear Dennis K. Shurtz:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/29/2014 and the ACO-1 was received on June 08, 2015 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department