



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1259410
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: _____



1259410

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <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> _____	PRODUCTION INTERVAL: _____ _____
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CONTRACTOR

June 2-8, 1987

OPERATOR

HUGHES DRILLING COMPANY
122 NORTH MAIN
WELLSVILLE, KANSAS 66092

Hughes Drilling Company
122 North Main
Wellsville, Kansas

LOG

NORTH McMILLEN

WELL NO. 4
FRANKLIN CO., KS.
SEC. 2, TWP. 16S, RNG. 20E

API # 15-059-24,220
1236' from S. line
2446' from E. line of
Section

STRATA THICKNESS	FORMATION DRILLED	T.D.	STRATA THICKNESS	FORMATION DRILLED	T.D.
1	Soil	1	4	Lime	405
17	Clay	18	2	Shale (Broken)	407
16	Shale (Limebreak 20-20.5)	34	7	Lime "HERIRA"	414
23	Lime (Bkn. w/shale 38-44)	57	7	Shale (Bkn. 418-421)	421
6	Shale (Dark) (Slate 62-63)	63	9	White Shale (Very Sandy)	430
12	Lime	75	97	Shale (Limebreak 526-527)	527
6	Shale	81	3	White Shale (Sdy.)	530
18	Lime	99	5	Sand "PERU" Gas (Some Shale)	535
9	Shale	108	27	Shale (Very Sdy. 535-542) (Slate 558-559)	562
6	Sand	114	6	Lime (Broken)	568
6	Shale (Sdy.)	120	3	Shale (Broken)	571
8	Sand	128	6	Sand "WAYSIDE" (Hard)(Bleeding oil) (Oil show)	577
11	Shale (Sdy.)	139		(Very Hard 574-575) (Slight oil show)	
34	Lime	173		(Good Bleeding oil 575-577)	
60	Shale lime shale (Sdy. lime shale 188-192)	233			
23	Lime	256			
17	Shale (Sdy.)	273	6	Shale	583
6	Lime	279	9	Lime	592
28	Shale	307	7	Shale (Dark)	599
11	Lime	318	8	Lime	607
23	Shale (Bkn. 318-323) (Lime 323-324)	341	6	Shale	613
25	Lime 30' (Shale Brk. 351-352)	366	9	Lime	622
8	Shale (Bkn.) (Slate 371-372)	374	12	Shale	634
25	Lime 20' (Slight oil show 391-392)	399	3	Lime (Hard)	637
2	Shale (Slate 400-401)	401	8	Shale	645
			7	Lime (Bkn. w/white shale)	652
			22	Shale (Slate 665-666) (Slate 671-672)	674

CONTRACTOR

HUGHES DRILLING COMPANY
122 NORTH MAIN
WELLSVILLE, KANSAS 66092

OPERATOR

LOG
NORTH McMILLEN
WELL NO. 4

API #

cont.

STRATA THICKNESS	FORMATION DRILLED	T.D.	STRATA THICKNESS	FORMATION DRILLED	T.D.
4	Gray Sand (Bkn. w/some lime)	678			
1.5	White Shale (Limebreak 679.5)	679.5			
13.5	Sand #1 SQUIRREL	692			
36.5	Shale (Bkn. 726-728.5)	728.5			
9.5	Sand #2 SQUIRREL	738			
46	Shale	784T.D.			
6-2-87 to 6-8-87					
Drilled 784 ft. of 5 1/8" hole.					
6-2-87					
Set 20.25 ft. of used 6 1/2" surface pipe.					
Cemented in with 5 sacks cement.					
6-4-87 Cored #1 SQUIRREL 680'-695'.					
6-8-87 Cored #2 SQUIRREL 730'-742'.					
6-8-87 Set 780.5 ft. of 2 1/2" 10 rd. reg pipe.					
Seating nipple at 726 ft.					
Used 4 centralizers.					

HUGHES DRILLING CO.

Wellsville, Kansas 66092

Roger 913-883-2235
Darrel 913-883-4027

CORE TIME

Rod 913-883-4655
Clay 913-883-4383

LEASE NORTH MILLER #4

FORMATION 1st SQUIZZES

DATE: JUNE 4, 1987

(RPM)

FROM FEET	TO FEET	TIME	MINUTES	REMARKS
677.5	680	Chip Sample	Lamin	SAND 1/2 Shale
680	681	2:54:10 - 2:54:50	3:30	SAND Slightly lamin (Good description) Shale (680.5) 680.5
681	682	2:54:50 - 2:55:55	1:05	Lamin SAND 1/2 Shale
682	683	2:55:55 - 2:56:25	3:30	Solid Sand (Black Dip o. 1)
683	684	2:56:25 - 2:57:05	1:35	
684	685	2:57:00 - 2:57:45	1:45	Lamin SAND 1/2 Shale (685.5)
685	686	2:57:45 - 2:58:50	1:05	Slightly lamin SAND 1/2 Shale
686	687	2:58:50 - 3:00:05	1:15	(685.5 - 686.5) (Black Dip o. 1)
687	688	3:00:05 - 3:02:05	2:00	
688	689	3:02:05 - 3:03:45	1:40	Very lamin SAND 1/2 Shale
689	690	3:03:45 - 3:04:50	1:05	(Source bleeding oil)
690	691	3:04:50 - 3:06:45	1:55	
691	692	3:06:45 - 3:08:40	1:55	
692	693	3:08:40 - 3:11:25	2:45	Sly Shale
693	694	3:11:25 - 3:14:15	2:50	
694	695	3:14:15 - 3:17:50	3:35	
				BEST PERFS
				Zone
				677.5 686.5
				(?)

HUGHES DRILLING CO.

Wellsville, Kansas 66092

Roger 913-883-2235
Darrel 913-883-4027

CORE TIME

Ron 913-883-4655
Clay 913-883-4383

LEASE K. MICHELETTI NO. 4

FORMATION 2ND SQUARE

DATE: 6-8-87

(RPM)

FROM	TO	TIME	MINUTES	REMARKS
728.5	730	Clay/tear bit		
730	731	10:19:15-10:19:55	:40	SAND GOOD BLEEDING OIL
731	732	10:19:55-10:21:05	1:10	SAND SLIGHTLY LAMINATED WITH SHALE & MICA
732	733	10:21:05-10:22:05	1:00	GOOD BLEEDING OIL
733	734	10:22:05-10:23:35	1:30	SAND LAMINATED w/ SHALE
734	735	10:23:35-10:25:15	1:40	BLEEDING OIL MICA
735	736	10:25:15-10:27:05	1:50	SHALE SAND W/ LAMINATED WITH
736	737	10:27:05-10:29:30	2:25	SHALE SAME BLEEDING OIL
737	738	10:29:30-10:30:55	1:25	SAND LAMINATED WITH SAND BLEEDING OIL
738	739	10:30:55-10:33:05	2:10	
739	740	10:33:05-10:35:25	2:20	SAND SLIGHT SHALE AT 741-241.1
740	741	10:35:25-10:38:10	2:45	
741	742	10:38:10-10:39:45	1:35	SHALE
				BEST PERM ZONE
				729-738
				DATA

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. Box 884
 Chanute, Kansas 66720
 Phone (316) 431-9210

Date	Customer's Acct No	Sec	Typ	Range	Well No & Farm	Place of Destination
Charge To	Owner		Country		State	
Mailing Address	Contractor		Well Owner Operator Contractor			
City & State						

CEMENTING SERVICE DATA														
TYPE OF JOB	CASING			HOLE DATA			PLUGS AND HEAD			PRESSURE		CEMENT LEFT IN CASING		
	New	Used	Type	Base Size	Total Depth	Bottom	Top	Head	Circulating	Minimum	Maximum	Requested	Necessity	Measured
Surface														
Production														
Squeeze														
Pumping														
Other														

FRACTURING - ACIDIZING SERVICE DATA									
Type of Job	Breakdown Pressure from	psi	Avg Pump Rate	psi	Open Hole Diameter	psi	At Intervals of	psi	Weight
Rib Fracturing Fluid									
Treating Pressure Maximum									
Sand									
Well Treating Through Tubing									
Remains									
No. Perforations									
Pay Formation Name									
Depth of Job									

INVOICE SECTION									
CEMENTING					FRACTURING - ACIDIZING				
Pumping Charge	Office Use	\$	Pumping Charge	Office Use	\$	Pumping Charge	Office Use	\$	Total \$
Sacks Bulk Cement	@		12x30 Sand	@					
Ton Mileage on Bulk Cement	@		10x20 Sand	@					
Premium Gel	@		x Sand	@					
Flo-Seal	@		Ton Mileage	@					
Calcium Chloride	@		Gals., Acid	@					
Plug	@		Chemicals	@					
Equipment	@			@					
	@		Potassium Chloride	@					
	@		Rock Salt	@					
	@		Water Gel	@					
Granulated Salt	@		Transport Truck (Hrs.)	@					
Transport Truck (Hrs.)	@		Vac Truck (Hrs.)	@					
Vac Truck (Hrs.)	@		Fuel Surcharge	@					
Fuel Surcharge	@		Tax						
			Total						

A Finance Charge computed at 1 1/4% per month (annual percentage rate of 21%) will be added to balance over 30 days.