

Confidentiality Requested:

Yes No

## Kansas Corporation Commission Oil & Gas Conservation Division

1262457

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 #		API No. 15				
Name:		Spot Description:				
Address 1:		SecTwpS. R				
Address 2:		Feet from North / South Line of Section				
City: State: Zip: _	+	Feet from _ East / _ West Line of Section				
Contact Person:		Footages Calculated from Nearest Outside Section Corner:				
Phone: ()		□NE □NW □SE □SW				
CONTRACTOR: License #		GPS Location: Lat:, Long:				
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxxx)				
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84				
Purchaser:		County:				
Designate Type of Completion:		Lease Name: Well #:				
New Well Re-Entry	Workover	Field Name:				
□ Oil □ WSW □ SWD	SIOW	Producing Formation:				
☐ Gas ☐ D&A ☐ ENHR	SIGW	Elevation: Ground: Kelly Bushing:				
☐ OG ☐ GSW	Temp. Abd.	Total Vertical Depth: Plug Back Total Depth: Feet  Amount of Surface Pipe Set and Cemented at: Feet				
CM (Coal Bed Methane)						
Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used? Yes No				
If Workover/Re-entry: Old Well Info as follows:		If yes, show depth set: Feet				
Operator:		If Alternate II completion, cement circulated from:				
Well Name:		feet depth to:w/sx cmt.				
Original Comp. Date: Original Total	Depth:					
☐ Deepening ☐ Re-perf. ☐ Conv. to ENH	R Conv. to SWD	Drilling Fluid Management Plan				
☐ Plug Back ☐ Conv. to GSW	Conv. to Producer	(Data must be collected from the Reserve Pit)				
Commingled Permit #:		Chloride content: ppm Fluid volume: bbls				
		Dewatering method used:				
SWD Permit #:		Location of fluid disposal if hauled offsite:				
☐ ENHR Permit #:		Operator Name:				
GSW Permit #:		Lease Name: License #:				
		Quarter Sec TwpS. R East West				
•	Completion Date or					
Recompletion Date F	Recompletion Date	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:	l					
Confidential Release Date:	l					
Wireline Log Received	l					
Geologist Report Received	l					
UIC Distribution						
ALT I II Approved by: Date:						

Page Two



Operator Name:				_ Lease I	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whe	ther shut-in pre chart(s). Attach	ssure reac extra shee	hed stati	c level, hydrosta space is neede	tic pressures, b	ottom hole temp	erature, fluid recov	
Final Radioactivity Lo files must be submitted						ogs must be ema	liled to kcc-well-	logs@kcc.ks.go	v. Digital electronic	
Drill Stem Tests Taker (Attach Additional		Y	es No			J	on (Top), Depth		Sample	
Samples Sent to Geo	logical Survey	Y	es No		Nam	е		Тор	Datum	
Cores Taken Electric Log Run			es  No							
List All E. Logs Run:										
				RECORD	Ne					
	0: 11.1					ermediate, product		" 0 1	T 15	
Purpose of String	Size Hole Drilled		ze Casing t (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Percer Additives	
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives		
Perforate Protect Casing	Top Dottern								ercent Additives	
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment	on this well	?			Yes	No (If No, s	skip questions 2 a	nd 3)	
Does the volume of the t			-		-		_ ` `	skip question 3)		
Was the hydraulic fractur	ing treatment informatio	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, 1	ill out Page Three	of the ACO-1)	
Shots Per Foot			RD - Bridge Plug Each Interval Perl				cture, Shot, Ceme	nt Squeeze Recor	rd Depth	
						(* *			200	
TUBING RECORD:	Size:	Set At:		Packer A	t·	Liner Run:				
		0017111				[	Yes N	o		
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gravity	
DIODOCITI	01.05.040			4ETUOD 05	. 00145/	TION:		DDOD! ICT!		
DISPOSITION Solo	ON OF GAS:  Used on Lease		N Open Hole	∥ETHOD OF Perf.	_		nmingled	PRODUCTION	ON INTERVAL:	
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)			

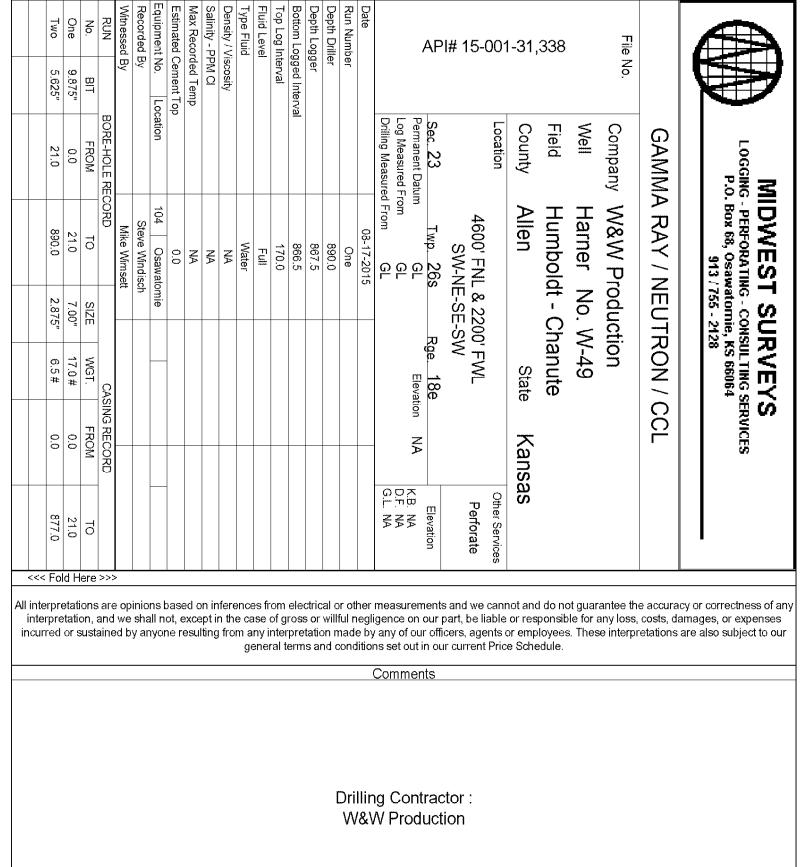
## W & W Production Company 1150 Highway 39 Chanute, Kansas 66720

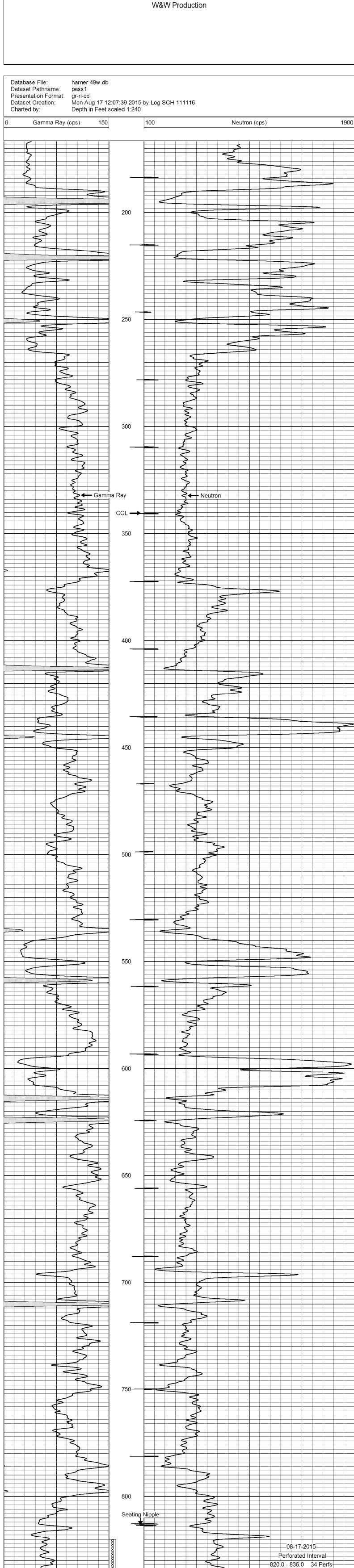
Office # 620-431-4137 Cell# 620-431-5970

August 26, 2015

CEMENT TICKET Harner W-49 Sec. 23, Twp. 26, Rge. 18E Allen County, Kansas

- 07-27-15 Circulate 4 sacks Portland Cement up backside of 7" Surface 21' to 0'.
- 07-30-15 Circulate Portland Cement through 2.5' casing from 890' to 0'. Pump rubber plug behind cement from 0' to 814' & close in 750# using 109 sacks Portland Cement.





-2" DML RTG-

Neutron (cps)

Gamma Ray (cps)