

Kansas Corporation Commission Oil & Gas Conservation Division

1265111

Form ACO-1
November 2016
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.:					
Name:	Spot Description:					
Address 1:	SecTwpS. R 🗌 East 🗌 West					
Address 2:	Feet from North / South Line of Section Feet from East / West Line of Section					
City: State: Zip: +						
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.xxxxx)					
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84					
Purchaser:	County:					
Designate Type of Completion:	Lease Name: Well #:					
New Well Re-Entry Workover	Field Name:					
	Producing Formation:					
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth:					
Gas DH EOR						
☐ OG ☐ GSW ☐ CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet					
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:	W/ SX SING					
Deepening Re-perf. Conv. to EOR Conv. to SWD Plug Back Liner Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)					
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls					
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:					
SWD Permit #:	Location of fluid disposal if hauled offsite:					
EOR Permit #:	·					
GSW Permit #:	Operator Name:					
	Lease Name: License #:					
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West					
Recompletion Date 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:
Confidential Release Date:
Wireline Log Received Drill Stem Tests Received
Geologist Report / Mud Logs Received
UIC Distribution
ALT I II Approved by: Date:

Page Two



Operator Name: _				Lease Name:			Well #:	
SecTwp	oS. R.	Eas	t West	County:				
	flowing and shu	t-in pressures, wh	ether shut-in pre	ssure reached sta	itic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subr						iled to kcc-well-lo	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests To			Yes No		0	on (Top), Depth ar		Sample
Samples Sent to	Geological Surv	ey	Yes No	Na	ne		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / List All E. Logs Ru	_		Yes □ No Yes □ No Yes □ No					
List All L. Logs III	un.							
		Rep		RECORD [] I	New Used	on, etc.		
Purpose of Stri			ize Casing	Weight	Setting	Type of	# Sacks	Type and Percent
	Ori	lled S	et (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
		l l	ADDITIONAL	. CEMENTING / SC	LIFEZE BECORD	l		
Purpose:		epth Typ	e of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate		Bottom				71		
Protect Cas	ГD							
Plug Off Zo	ne							
2. Does the volume	of the total base fl	ng treatment on this uid of the hydraulic f ent information subm	racturing treatment	_		No (If No, sk	ip questions 2 an ip question 3) out Page Three c	
Date of first Produc	tion/Injection or Re	esumed Production/	Producing Meth	nod:				
Injection:				Pumping	Pumping Gas Lift Other (Explain)			
Estimated Product Per 24 Hours	ion	Oil Bbls.	Gas	Mcf W	ater B	bls. (Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:			METHOD OF COMP	_ETION:		PRODUCTIO		
☐ Vented ☐ Sold ☐ Used on Lease ☐ Open Hole ☐ (If vented, Submit ACO-18.)				omp. Commingled		Bottom		
Shots Per Perforation Perforation Bridge Plug Foot Top Bottom Type		Bridge Plug Type	Bridge Plug Set At	Acid,	Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)			
	100		.,,,,,			(,		
TUBING RECORD	: Size:	Set At	:	Packer At:				

Form	ACO1 - Well Completion
Operator	Haas Petroleum, LLC
Well Name	Coughenour 3-HP
Doc ID	1265111

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9.875	7.000	17.0	20	Cement	5	N/A
Production	5.625	2.875	6.5	730	IA Cement	110	Poz Blend

BH Drilling, LLC 11551 Ash Street, Suite # 205 Leawood, Kansas 66211 Office (913) 499-8373 Fax (913) 766-1310

September 1, 2015

Company: Haas Petroleum, LLC

11551 Ash Street, # 205 Leawood, Kansas 66211

Lease:

Coughenhour - Well # 3 HP

County:

Franklin

Spot:

NE SW NE SW of Sec 3, Twp 16, R 21 E

API:

15-059-27006-00-00

Spud:

August 6, 2015

TD:

740'

8/26/15:

Set 20' of 7" – Cemented with 5 sacks

8/31/15:

Drilled from 20' to 740' TD. Ran 730' of 2 7/8 casing

8/31/15:

Cemented with 110 sacks



FIELD TICKET & TREATMENT REPORT

	anute, KS 66720	CEME	NT	INO	以并为	5233
DATE	CUSTOMER# WEL	L NAME & NUMBER		VSHIP	RANGE	COUNTY
-31-15	3451 Coughe	LOUP# 3-HP	Sw 3 /	4	2(FR
STOMER	A 3 ()					
Hoa.	s Pertualeum 1	<u>lc</u>		VER	TRUCK#	DRIVER
	A .		712 Fiet		6	
// <i>55</i> TY	STATE	ZIP CODE	495 Hork			
1			675 Keid		<i></i>	
<u> </u>		6621 ≤78 HOLE DEP	548 7 7 1 CASING		EIGHT_276	EUE
OB TYPE LOW	HOLE SIZE DRILL PIPE	HOLE DEP کی کے ال	IM 740 CASING		OTHER	
.URRY WEIGHT		VOBING WATER gal	A-L CEMENT	 LEFT in (Plug
SPLACEMENT				4891		4
SPLACEMENT_ EMARKS: 人。	11 - 51			MY		100#
C 0	flush Min x	1	n., 3. 524 /	T.A	Coment	2%
			· · · · · · · · · · · · · · · · · · ·		5.4.7	
<u> </u>			1	CICAL	* PSI.	<u>ce</u>
3/3		a cashe (D	-talia ?	1. 1	- <u> </u>	
Relea	se pressure	40 26 X 10	ax Value. S	Nu y	in casing	
				 .		
······································						
A 1	\$./ ₄		70	54.4	·	
SKyy D	tilling.		-fuct	Wad		
ACCOUNT	OHANITO UNITO	BECODISTION	- 6 CEDWATE DDODUCT	····	IIIIT BEIGE	70741
CODE	QUANITY or UNITS	DESCRIPTION	of SERVICES or PRODUCT		UNIT PRICE	TOTAL
E0450		PUMP CHARGE		195	15000	
E0002	20 mi	MILEAGE		495	14350	
EO711	Minimum	Ton Miles De		548	66000	_
1E0853	12hr	80 BBL Vac		675	15000	
			Sub Total		2453 **	
			Less 39%		- 95767	149533
CC5840	110 5145	Poz Bland I	A Consuit		1485-00	
C5965	285#	Bentonite Co			82.20	
P 8176	, 	278 Rubbe		***************************************	45.65	
		W	506 TOVA		161550	
			Less 39%		- 63005	98545
			A-C-3-2 - 5 1 1 4		- 6.50	7.00 ==
			- 			
				8%	SALES TAX	78 -
rin 9797					ESTIMATED	
`	IK III	- Co			TOTAL	25694
UTHORIZTION_	4.2~ 4-2	TITLE			DATE(4197,74,