

## Kansas Corporation Commission Oil & Gas Conservation Division

1267557

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
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.xxxxxx) (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		Producing Formation:
Gas DH EOR		Elevation: Ground: Kelly Bushing:
		Total Vertical Depth: Plug Back Total Depth:
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 Tota	al Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOF	R Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GS	W Conv. to Producer	(Data must be collected from the Reserve Pit)
		Chloride content:ppm Fluid volume: bbls
		Dewatering method used:
		Location of fluid disposal if hauled offsite:
		Location of fluid disposal if fladied offsite.
		Operator Name:
		Lease Name: License #:
Spud Date or Date Reached TD	Completion Date or	Quarter Sec Twp S. R
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 III Approved by: Date:

Page Two



Operator Name:				Lease Name:			Well #:	
SecTwp	oS. R.	Eas	t West	County:				
open and closed,	flowing and shu		ether shut-in pre	ssure reached sta	itic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
		s run to obtain Ge ersion 2.0 or newer				iled to kcc-well-lo	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests T			Yes No		0	on (Top), Depth ar		Sample
Samples Sent to	Geological Surv	ey	Yes No	Nai	ne		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / List All E. Logs Ri	_		Yes No Yes No Yes No					
LIST All L. LUGS IN	uii.							
		Rep		RECORD Nonductor, surface, in	New Used	on, etc.		
Purpose of Str		Hole S	ize Casing	Weight	Setting	Type of	# Sacks	Type and Percent
	Dri	illed S	et (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
			ADDITIONAL	CEMENTING / SC	NIEEZE DECODO			
Purpose:	De	epth Tur	e of Cement	# Sacks Used	OLLZETIEGOND	Type and F	Percent Additives	
Perforate		Bottom	e or cement	# Jacks Useu		Type and t	ercent Additives	
Protect Cas								
Plug Off Zo	one							
2. Does the volume	e of the total base f	ing treatment on this luid of the hydraulic t ent information subm	racturing treatmen	=		No (If No, sk	ip questions 2 an ip question 3) out Page Three o	
	ction/Injection or Re	esumed Production/	Producing Meth					
Injection:			Flowing	Pumping _	Gas Lift C	Other (Explain)		
Estimated Product Per 24 Hours	tion	Oil Bbls.	Gas	Mcf Wa	ater B	bls. (	Gas-Oil Ratio	Gravity
DISPC	SITION OF GAS:		N	METHOD OF COMPI	_ETION:		PRODUCTIO	
	Sold Used	on Lease	Open Hole			nmingled mit ACO-4)	Тор	Bottom
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind		Record
TUBING RECORD	D: Size:	Set At	:	Packer At:				

Form	ACO1 - Well Completion
Operator	Haas Petroleum, LLC
Well Name	Coughenour 1i-HP
Doc ID	1267557

## 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	755	IA Cement	105	Poz Blend

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

September 30, 2015

Company: Haas Petroleum, LLC

11551 Ash Street, # 205 Leawood, Kansas 66211

Lease:

Coughenhour – Well # 1 I HP

County:

Franklin

Spot:

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

API:

15-059-27017-00-00

Spud:

September 15, 2015

TD:

765'

9/15/15:

Set 20' of 7" - Cemented with 5 sacks

9/17/15:

Drilled from 20' to 765' TD. Ran 755' of 2 7/8 casing

9/17/15:

Cemented with 104 sacks



MVOICE #25768

4255/1

LOCATION Offama KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT

31-9210 o	anute, KS 6672 r 800-467-8676	3	NAME & NUMBE	CEMEN	SECTION	TOWNSHIP	RANGE	COUNTY
DATE	CUSTOMER#		# ,	- I HP	5w3	16	21	FR
17.15	3451	Cougheno	OV T	<u>,                                    </u>				DRIVER
STOMER Haas	Petrol	eum hhc			TRUCK#	DRIVER	TRUCK#	DRIVER
LING ADDRE					712	FreMad		
2155	, Ash 5	4 Ste a	205		495	HorBeck	,	
Υ		STATE	ZIP CODE		675	Kei Det	<u> </u>	
Leaw	ood	K.S.	46211		604	CASING SIZE & WE	IGHT 27/8	EUE
B TYPE LO	ngstring	HOLE SIZE		HOLE DEPTI	1_765		THER	
SING DEPTH	755 5	DRILL PIPE		TUBING		CEMENT LEFT In C	ASING 2/2"	Plug
URRY WEIGH	IT	SLURRY VOL		NATER gal/s MIX PSI	sk	RATE 4BP	71	
SPLACEMEN		L DISPLACEMENT		s ta b 1:	- L Aireu	lation.	Mix & Pun	×/
MARKS:	Hold Sa	tery nee	· 20		5 5 KS	Por Blend	I A Cel	nest_
/00 <del>4</del>	al fl	<u>usk /11</u>	Sur Face			* lines (1	loan Di	splace
2%	Cel Ce	ment to		<u>こ、 /</u> て \	Prossure	to 800th	PSI. Moni	Hov
2/2	Rubber	0	Cashie Min	Reli	<del></del>	equie to s	ex float	
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<u>"Vadu</u>	e. Shu	x.m (asn	<del>}</del>					
	5 211	\				Ful M	olun_	
SICY	y Dvill	·ve						
ACCOUNT	OLIANI	TY or UNITS	DESCRIPTION of SERVICES or PRODUCT			UNIT PRICE	TOTAL	
CODE	- COAIN					49.5	150000	
E0450			PUMP CHARG			495	14300	
<u> </u>		<u>domi</u>	MILEAGE	liles Da	Busen	804	66000	
Y E 0711	mond	non_	80 B		Trock.	675	1000	
<u>wE0853</u>		/hr	80 01	se vac	Sub Tota		240300	
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			D // 1	,	100	′	141750	
CC-5840		105sks	For DI.	end t	A Cement		83 10	
CC 5965		277#	B-ente	mite a	<u>U.                                    </u>		44.50	
			125 K	ubber .	505 To	4.0	1545	
CP8176					202 10	39%	- 602 78	9428
C # 8176					ess			
(48176			Water Care TX					1
(48176			Marin San A					<del></del>
(48116			Carlo Carlo					
(78116			Name to the total					
(78116			Section Section					
(78176			Qui tari			8%	SALES TAX	
		A	<b>Q</b>			8%	ESTIMATED	
Ravin 8737		<u> </u>				8%		