

Kansas Corporation Commission Oil & Gas Conservation Division

1267910

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 _ W	∕est
Address 2:		Feet from North / South Line of Sec	tion
City: State:	Zip:+	Feet from	tion
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		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?	
If Workover/Re-entry: Old Well Info as follows:		If yes, show depth set:	=eet
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	EOR Conv. to SWD	Drilling Fluid Management Plan	
Plug Back Liner Conv. to	GSW Conv. to Producer	(Data must be collected from the Reserve Pit)	
Committed Boundary		Chloride content: ppm Fluid volume:	bbls
_		Dewatering method used:	
		Location of fluid disposal if hauled offsite:	
		·	
		Operator Name:	
		Lease Name: License #:	
Spud Date or Date Reached TD	Completion Date or	Quarter Sec TwpS. R	Vest
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	e:			_ Well #:	
Sec Twp	S. R.	Eas	t West	County:					
and flow rates if gas	wing and shu to surface te	t-in pressures, wh st, along with final	ether shut-in pre chart(s). Attach	essure reached s extra sheet if m	static I nore sp	evel, hydrosta bace is needed	tic pressures, bot d.	tom hole tempe	val tested, time tool rature, fluid recovery, Digital electronic log
files must be submit								0	0 0
Drill Stem Tests Take			Yes No		_ Log	g Formatic	on (Top), Depth a		Sample
Samples Sent to Ge	ological Surv	ey	Yes No	N	Name			Тор	Datum
Cores Taken Electric Log Run Geolgist Report / Mu List All E. Logs Run:	_		Yes No Yes No Yes No						
		Rep	CASING port all strings set-c	RECORD	New , interm	Used	on, etc.		
Purpose of String			ize Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
	5.1		ot (III 0.5.)	200.711.		Борит	Comont	0000	/ Iddilivos
			ADDITIONAL	CEMENTING /	SQUE	EZE RECORD			
Purpose: Perforate		epth Typ Bottom	e of Cement # Sacks Used Type and Percent Additive					Percent Additives	
Protect Casing	9								
Plug Off Zone									
. 5:1									(0)
 Did you perform a h Does the volume of 	-	-		t exceed 350,000	gallons	Yes Yes		ip questions 2 an ip question 3)	d 3)
3. Was the hydraulic fra		-	=		-	Yes	= '	out Page Three o	of the ACO-1)
Date of first Production	n/Injection or Re	esumed Production/	Producing Meth	nod:					
Injection:			Flowing	Pumping	Ga	as Lift C	other (Explain)		
Estimated Production Per 24 Hours	1	Oil Bbls.	Gas	Mcf	Water	BI	bls. (Gas-Oil Ratio	Gravity
DISPOSIT	TION OF GAS:		N	METHOD OF COM	//PLETI	ON:			N INTERVAL: Bottom
Vented So		on Lease	Open Hole		ually C		nmingled mit ACO-4)	Тор	Bottom
(If vented, S	Submit ACO-18.)			(00		(Cubi	7111.7100 1)		
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At		Acid,	Fracture, Shot, Cei (Amount and Kind	menting Squeeze d of Material Used)	Record
TUBING RECORD:	Size:	Set At		Packer At:					
	J.20.	OU! A!	-	. 20.0171					

Form	ACO1 - Well Completion
Operator	Black Star 231 Corp.
Well Name	Snyder 1-15
Doc ID	1267910

All Electric Logs Run

Micro-Log
Compensated Neutron
PEL Density
Phased Induction

Form	ACO1 - Well Completion
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Well Name	Snyder 1-15
Doc ID	1267910

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	3	262	owc	135	2%gel
Production	7.875	5.5	17	3616	owc	575	6%gel

810 E 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement of Acid Field Report									
	2455								
Foreman 57.	Foreman STOUR NARAS								
Camp <u>Eurek</u>	271 0								

Date	Cust. ID#	Leas	e & Well Number		Section	Townsh	р	Range	County	S	tate
8-26-15	1069	Soyder	1-15		1	15		14€	Nemaha	Ks	j
Customer	<u> </u>			Safety	Unit#		Driv	er	Unit#	Drive	er
01- 6 5-		C-00		Meeting	JOH	A	lan	n			
Black ST Mailing Address	01 21	COLP		1	112			13			
•	()	Dine									
<u>City</u> City	ZXChan	State	Zip Code	1							
-		1	-						<u> </u>		
Konsas (<u> </u>	Mo	64162	1						1	
حدک Job Type	rsacc	Hole Dep	th;		Slurry Vol			Т	ubing		
• •			e _/2 '5/		Slurry Wt				rill Pipe		
			eft in Casing <u>15</u>		Water Gal/SK				ther		
_			-								
_spiacement	16 4	Displace	ement PSI		Bump Plug to			В	PM		
Remarks: 5	afiv Mo	Jine R	18 UP TO 83	& Casi	08. Bro	KCirc	uli	Tion W	of Fresh	WaTer	
ANIX 13	35× (6)	as A Cem	nT 1/ 3%	codz	29.601	1 1/4 2	1/10	-5201	001151	121501	1008
1.11 16 30	best 6	ach water	r. Shutter	60 // i s	Caso	Co. 200	2 3	2 - 7	4005 70 5	06606	· c
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11261516	<i>j21</i> f		2 Camplet x	- 18							
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			Thon	K20	1				<u> </u>		
									*** **********************************		
								_			441-4114

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C/01	1	Pump Charge	840.00	840.00
C107	130	Mileage •	3.95	513.50
C260	1355kc	ClossA Cement	15.00	2025.00
C205	3807	35, cac/z	.60	228.00
C206	255 T	2%601	.20	51.00
C209	35	4 * 51 Sen 201/5/19	2.25	78.75
CIUSB	6.34	Jan Milege Bulkirusk	1.35	4
ν,				
				+
	71			
	f,			
	4.		Subjoja	4736,25
		80%	Sales Tax	190.62
Authoriz	zation Call	by Dave Farthing Title Tool pusher	Total	4926.87

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

810 E 7[™] PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report
Ticket No. 2471
Foreman Rick Lestard
Camp Every

		<u> </u>		VIV.						
Date	Cust. iD #	Lease & V	Vell Number	Section	Township	Range	County	State		
9-6-1	5 1069	Snyder 1-1		1	15	IYE	Nemaha	, Rs		
Customer	9 1 .	A A A A	Safety Meetin			river	Una#	Driver		
	Slack star	23) Comp	MigGan	105	Russ	non F.				
Mailing Addre I		.1 4.4		1/2	Alle					
	HOSTACE CX	State Zin	0.4.	113	Set					
	nes City	1	Code 41/2	140 7-147	Ch	1 s . S.				
ob Type	LIS		3614 G.L.	Slurry Vol. 6	2 34 5/97-	2				
asing Dept	th 3617.49	Hole Size		Slurry Wt	3 44 - 0	<u> </u>	bing ill Pipe	***************************************		
asing Size	& W. <u>5 1/9"</u>	/2# Cement Left in	<u> </u>	Water Gal/SK			•			
isplacement	her									
•		Displacemen		Bump Plug to		BF				
lemarks: 、	defely mosti	5- Outel set e 2	352.97 Jely G.L.	Brok Cral	otion u /	o Phy fook	water Do	md 200 sv		
hidst C	mat 4/54	Kettel + 3 phones	141 @ 13 m/gg).	last and	hus celes	e letch de	mache. D	notone w/		
54 BL	ntcl. fuol	And pressure 750	BIT. Dong alve to	RSO (SI.	leiour pro	ens Short.	ا ماملًا حكم ا	Oma tria		
Sept. Or	m RV feel	C 1400 BILLYOU	ole come count	all ha at a	رمداأ والممارة	10 A = M	AL COLLEGE	4 0.06		
recepte	212 1234	I reed here . Stope	*2 Km 10 BN	water ahead.	Mrsod 3	25 sus los	140 leenis	remak ed		
64 3614	# Phenosel /	ST & 12. 1901.	Maskeut and + Ive	es le bose	closure al	10 . (.) 14a)d	es L1544	By wet.		
MI Amo	arssure 74	COS. CHARA tool &	120 PI. Bussin	to AND BI.	Refere a	CHUR DA	fbuback. To	d closed		
15 BN CE	nat best.	The complete lig	den.							
atolices	enjt 1,230	1,17,22,24,29								
		12' 136 below P.	v. do. 1	· 7h	ank Ku"					
D.V. tool	en jt 30									
Code	Qty or Units	Description of Pro	oduct or Services			Unit I	Price	Total		
702		Pump Charge				/05	0.00	1050.00		
C107	130	Mileage					3.95	51350		
C102		Stape # 2					50.00	750.00		
C201	200 505	Chickset Comest	\		· · · · · · · · · · · · · · · · · · ·			\$900.00		
6207	/ 800 th	5 4 Kel-sai 14	Stone # /	•			45	450.00		
C 208	6000	3th phonesal /su						750.00		
203	375 ses	bolyo Poreix ce	mark \					78).23		
206	1935*	62 gs1	Stage	+7	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		_			
(208	750#	2+ phones 1/sx	7 319				25	387.00 937.00		
C108B	27.12	ten milage bux	trus x 3			1.000				
504	9	51/277/3" Contr	olizes				00	MO . 00		
CLOY	3	51/2" basets						<u>432.00</u>		
611	1	5'b" Oville Sho	,			225		675.4		
208	1	Sh" ATV Flyge	who cand					167.00		
681	j	52" Part coller	had the					145.00		
276	,	5" Dy Li	Liney coly				-	285.00		
CHY	Brz	512" P.V. Gol 9	TOSC COLLECT 1 / play	is.				2200.00		
•				· · · · · · · · · · · · · · · · · · ·		_	.00	880.00		
	<i>⊶, >40 %''</i> >	city water				10.00		55.00		
						Substat		1898.30		
			_		8%	Sale	s Tax	206.38		
Authoriza	tion Without	by Pour Forting	Title Diag	3 Ruca		<u>-</u>	Total A	315463		

l agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to have payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's offic to 2100 (2.30)