



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1271023
OIL & GAS CONSERVATION DIVISION

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 # _____

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

Gas DH EOR

OG GSW

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 EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

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 Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

1271023

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Geologist Report / Mud Logs	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____							
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>			PRODUCTION INTERVAL: Top _____ Bottom _____	

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:
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HUGHES DRILLING REPORT

Well No. JS
 Farm N. Miller
 SURFACE CASING Size 7"
 Feet 31'
 Circulated 12 ex cement

PERMANENT CSG. Size 2 1/8 8' EUE (New)
 Feet 194' of pipe Baffle at 165.60
 Float shoe on Bottom

T. D. at Completion 308
 Contractor HUGHES DRILLING CO.

FEL 2395 FEL
 API # 13-09-27060

OPERATOR Hughes Drilling

STRATA THICKNESS	FORMATION DRILLED	T.D.
2	Soil	3
23	Clay	26
14	Shale	40
20	LIME	60
8	Shale	71
10	LIME	81
6	Shale	87
13	LIME	100
35	Shale	112
33	LIME	145
64	Shale	209
2	LIME	211
19	Shale	230
6	LIME	236
27	Shale	263
11	LIME	274
22	Shale	296
24	LIME	320
4	Shale	324
20	LIME	344
4	Shale	348
4	LIME	352
3	Shale	355
2	LIME	357
16	LIME	373
20	Shale	393
4	LIME	397
20	Shale	417
3	LIME	420
9	Shale	429
8	LIME	437
13	Shale	450
3	LIME	453
4	Shale	457
10	LIME	467
3	LIME	470
9	Shale	479
10	LIME	489
10	Shale	499

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
10/10/15	0	3	Soil	(1) 21.5 - 21.5
3/11	3	26	Clay	(2) 22.5 - 44.0
10/14/15	26	40	Shale	(3) 22.5 - 40.0
5/18	40	63	LIME	(4) 22.5 - 63.0
PDC BIT	63	71	Shale	(5) 22.5 - 111.5
	71	81	LIME	(6) 22.5 - 131.0
	81	87	Shale	(7) 22.5 - 150.5
	87	105	LIME	(8) 22.5 - 179.0
	105	142	Shale	(9) 22.5 - 201.5
	142	175	LIME	(10) 22.5 - 224.0
	175	239	Shale (Sdy LIME 185-190)	(11) 22.5 - 246.0
	239	261	LIME	(12) 22.5 - 268.0
	261	280	Shale	(13) 22.5 - 271.0
	280	280	LIME	(14) 22.5 - 314.0
	280	315	Shale (LIME 308-310)	(15) 22.5 - 336.0
	315	326	LIME	(16) 22.5 - 359.0
	326	348	Shale (LIME 331-332)	(17) 22.5 - 381.0
3/2	348	372	LIME	(18) 22.5 - 404.0
	372	381	Shale (Shale 380-381)	(19) 22.5 - 426.0
2/4	381	405	LIME	(20) 22.5 - 449.0
	405	409	Shale (Shale 408-409)	(21) 22.5 - 471.0
	409	413	LIME	(22) 22.5 - 494.0
	413	413	Shale	(23) 22.5 - 516.0
"Acorn"	413	421	LIME	(24) 22.5 - 539.0
	421	541	Shale (BIRM 424-427, 441, 443)	(25) 22.5 - 561.0
'Peru'	541	545	LIME (Sdy)	(26) 22.5 - 584.0
	545	589	Shale	(27) 22.5 - 606.0

Sec. 2, Twp. 14, Rng. 20
 Fel. Co., Kansas
 345 FSL 2595 FEL
 API # 15-089-27060

HUGHES DRILLING REPORT

Well No. I-5
 Farm L. McMillen
 SURFACE CASING
 Size.....
 Feet.....
 Circulated _____ ex cement

PERMANENT CSG.
 Size 2 7/8 grad EUE (New)
 Feet 794' of pipe Baffle at 765.60
 Float shoe on Bottom

OPERATOR Hughes Drilling

T. D. at Completion 808
 Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
5	Lime	674
6	shale	680
15	oil sand	695
28	shale	723
1	Lime	724
3	shale	733
1	Lime	733
9	oil sand	742
66	shale	808
		T.D.

DATE	DRILLED		REMARKS -- TYPE WORK -- BILLING REF.	PIPE TALLY
	FROM	TO		
	581	572	LIME	(28) 22.5-671.5
	572	576	SHALE	(29) 22.5-671.5
01-01-16	576	580	SPUD (drilling oil)	(30) 22.5-674.0
	580	589	SHALE	(31) 22.5-676.5
	589	599	LIME	(32) 22.5-719.0
	599	619	SHALE	(33) 22.5-741.5
	619	621	LIME	(34) 22.5-764.0
	621	627	SHALE	(35) 22.5-766.5
	627	629	LIME	
	629	642	SHALE	
	642	649	LIME (oil sand)	
	649	649	shale (slate 645-646)	
	649	659	LIME	
	659	669	shale	
	669	674	Lime (bleeding oil 669-671)	
H	674	680	shale	
1 squirrel	680	695	oil sand (remarks pg 3)	
	695	723	shale	
	723	724	Lime	
	724	732	shale (lime 731.5, 732)	
	732	733	lime (gray sdy)	
2 squirrel	733	742	oil sand	
762'	742	808	shale	
10-15-15			T.D.	

10-15-15
 Set 794' of 2 7/8 grad EUE (New)
 Baffle at 765.60 Floatshoe on Bottom
 used 3 centralizers

HUGHES DRILLING CO.

Wellsville, Kansas 66092

Handwritten: 11/10
Pg. 3

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

CORE TIME

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

LEASE 1. Monitor 27

FORMATION #1

DATE: 10/14/17

(EDM - 207 207 211)

FROM	FEEET TO	TIME	MINUTES	REMARKS
680	681	}		sand very lamin w/shale (some bleed) 680-682
681	682			
682	683	}		solid sand (good bleed) 682-684
683	684			
684	685	-		sand slightly lamin w/shale (bleed)
685	686	}		solid sand 685-690 (good bleed)
686	687			
687	688			
688	689	}		
689	690			
690	691	}		sand very lamin w/shale 690-695 (some bleed)
691	692			
692	693			
693	694			
694	695	}		
695	696			
696	697	}		shale
697	698			
698	699			
				(Best Perf Zone) 682-689 cont)

HUGHES DRILLING CO.

Pg. 4 

Wellsville, Kansas 66092

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

CORE TIME

Bon 913-883-4656
Clay 913-883-4383

LEASE NO. 100147-5

FORMATION #2 sandstone

DATE: 10/14/15

(RPM 200-300)

FROM	FEET TO	TIME	MINUTES	REMARKS
① 732	733	Gray Sdy lime		
② 733	734	Solid sand (good bleed) 733-738		
③ 734	735			
④ 735	736			
⑤ 736	737			
⑥ 737	738			
⑦ 738	739	Sand lamina w/shale (bleeding)		
⑧ 739	740	Sand very lamina w/shale (bleeding)		
⑨ 740	741			
⑩ 741	742	shale		
⑪ 742	743			
⑫ 743	744			
				(Best part zone 733-738 core)



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

45416
4453
Invoice #86109

TICKET NUMBER 49838

LOCATION Chanute, KS

FOREMAN Casper Kennedy

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/15/15	3425	N. McMillan # I-5	SE 2	16	20	DG
CUSTOMER <u>Hughes Drilling</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>122 Main</u>			<u>729 / Casper</u> ✓ <u>Safety</u> <u>Manning</u>			
CITY STATE ZIP CODE <u>Wellsville KS 66092</u>			<u>467 / Kei Car</u> ✓			
			<u>558 / Act McD</u> ✓			

JOB TYPE lengthening HOLE SIZE 5 7/8" HOLE DEPTH 808' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 794' DRILL PIPE TUBING - baffle - 765' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 29'
 DISPLACEMENT 4.43 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: held safety, making, established circulation, mixed + pumped 100 # Gel followed by 5 bbls fresh water, mixed + pumped 113 sks Pozblend IA cement w/ 2% gel + 1/4 # Flaseal per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to baffle w/ 4.43 bbls fresh water, pressured to 800 PSI, well held pressure for 30 min MIT, released pressure, shut in casing.

[Handwritten signature]

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE00450	1	PUMP CHARGE	1500.00	
CE0002	15 mi	MILEAGE	107.25	
CE0711	min	town mileage	100.00	
		trucks	2267.25	
		- 46%	1042.94	
		subtotal		1224.31
CC5840	113 sks	Pozblend IA	1525.50	
CC5965	296 #	Gel	87.00	
CC6075	28 #	Flaseal	56.00	
CF81710	1	2 1/2" rubber plug	45.00	
		materials	1713.50	
		- 46%	788.21	
		subtotal		925.29
		7.5%		69.39
		SALES TAX		74.00
		ESTIMATED TOTAL		2223.62

Revin 3737

AUTHORIZATION D.A.R. Hughes

TITLE _____

DATE (4/17/83)

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

\$ 2219.00 ✓