

### Kansas Corporation Commission Oil & Gas Conservation Division

1271564

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				
Address 2:		Feet from North / South I	Line of Section			
City: State: 2	Zip:+	Feet from   East /   West L	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.g.	xxx.xxxxx)			
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	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)				
Dameit #		Chloride content:ppm Fluid volume:	bbls			
_		Dewatering method used:				
		Location of fluid disposal if hauled offsite:				
		· ·				
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 III Approved by: Date:						

Page Two



Operator Name:					Lease Na	ıme: _			Well #:	
SecTwp	oS. F	R	East	West	County: _					
	flowing and sh	ut-in pressure	s, whe	ther shut-in pre	essure reache	ed stati	c level, hydrosta	tic pressures, t		val tested, time tool erature, fluid recovery,
Final Radioactivit files must be sub							gs must be ema	iled to kcc-wel	l-logs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests T			Ye	es No		L		on (Top), Depth		Sample
Samples Sent to	Geological Sur	vey	Ye	es No		Nam	е		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / List All E. Logs R	_		<ul><li> Y€</li><li> Y€</li></ul>	es No						
			Repo		RECORD conductor, surfa	Ne	w Used	on, etc.		
Purpose of Str	ing Siz	e Hole		e Casing	Weight		Setting	Type of	# Sacks	Type and Percent
Fulpose of Sti	"' <sup>g</sup> D	rilled	Set	(In O.D.)	Lbs. / F	t.	Depth	Cement	Used	Additives
				ADDITIONAL	CEMENTING	i / SQL	JEEZE RECORD			
Purpose:		Depth Bottom	Type	of Cement	# Sacks U	sed		Type an	d Percent Additives	
Perforate Protect Cas	sing									
Plug Back Plug Off Zo										
1 lug Oli 20	JIIC .									
Did you perform	a hydraulic fractu	ring treatment o	n this w	ell?			Yes	No (If No,	skip questions 2 ar	nd 3)
2. Does the volume	e of the total base	fluid of the hydr	aulic fra	cturing treatmen	t exceed 350,00	00 gallo	ns? Yes	No (If No,	skip question 3)	·
3. Was the hydrauli	ic fracturing treatr	nent information	submit	ted to the chemic	cal disclosure re	egistry?	Yes	No (If No,	fill out Page Three	of the ACO-1)
Date of first Produc	ction/Injection or F	Resumed Produc	ction/	Producing Met	hod:					
Injection:				Flowing	Pumping		Gas Lift C	other (Explain)		
Estimated Produc Per 24 Hours	tion	Oil Bbls	S.	Gas	Mcf	Wat	er Bl	ols.	Gas-Oil Ratio	Gravity
DISPO	OSITION OF GAS	:		N	METHOD OF C	OMPLE	TION:			N INTERVAL:
Vented	Sold Use	d on Lease		Open Hole	Perf.			nmingled	Тор	Bottom
(If vente	d, Submit ACO-18.	)				(Submit	ACO-5) (Subi	mit ACO-4)		
Shots Per	Perforation	Perforation	1	Bridge Plug	Bridge Plug		Acid,	Fracture, Shot, (	Cementing Squeeze	Record
Foot	Тор	Bottom		Туре	Set At			(Amount and k	Kind of Material Used)	
						-				
TUBING RECORE	): Size:		Set At:	<u> </u>	Packer At:					

Form	ACO1 - Well Completion
Operator	Elmore, John A. or Patricia R.
Well Name	BRB 52
Doc ID	1271564

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9.25	7	20	40	portland	9	none
Production	5.625	2.5	4	1128	portland	120	2% gel

# New Well BRB52

#### STATEMENT

11889

### ELMORE'S INC.

Box 87 - 776 HWY99 Sedan, KS 67361 9-15-15

Cell: (620) 249-2519 Eve: (620) 725-5538

Address	S		
City	State	Zip	
2		•	
Qty.	Description	Price	Amount
3	hr Pulling Unit	120,00	360,00
2	hr Vac Truck	85,00	170,00
2	In Coment Pump	110,00	220,00
]	hr Pump Truck	10000	100,00
120	SKS Coment	12,00	1440,00
	Plue Container	50,00	50,00
1	Rubber Plug	25,00	25,00
1	3k Cel	1600	16,00
		19	2381,00
ADDRESS OF THE PARTY OF THE PAR	Cemented longstring		
Married State of the Contract	1128' of 21/2 1140 of	Hole	
	Computed To Surface W	ith	
***************************************	120 SKS Coment Topy	200/	in the state of th
	off 1 Sk Next Days		

Thank You - We appreciate your business!

Rec'd. by	
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TERMS: Account due upon receipt of services. A 11/2% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.

# New Well BRB 52

#### STATEMENT

11885

## ELMORE'S INC.

Box 87 - 776 HWY99 Sedan, KS 67361

Date 9 - 9 - 15

Cell: (620) 249-2519 Eve: (620) 725-5538

Custon	ner John Elmone	age a nation from the last of galaxies are sept from and security	nagytunga kalabanga dalah kalaban ya 1978-	
Addres	s			
	State_	Zip		
Qty.	Description	Price	Amou	nt
9	SKS Comeat	12.00	108,	00
)	he hung Coment	110,00	110.	
_/_	hr Paup Coment hr Vac Truck	86,00	£85;	00
,		8	303	00
		,		
	BRB 52			
	Computed 40' of "			
	Casino IN Well With 9		-	
	BRB 52 Comented 40' of 3" Casing IN Well With 9 SKS Coment.			
And the second s				
Secretary section of the section of			alla formita i portirenti di antigra contro più sono dell'esta di a	
			and the facility and an experience of the control o	
William course of the Common Acceptance			načenski zaki otrač kiri i di izvinačen rotro	
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Thank You - We appreciate your business!

Rec'd. by

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