KOLAR Document ID: 1271575

Confidentiality Requested:

Yes No

Kansas Corporation Commission 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 #	API No.:			
Name:	Spot Description:			
Address 1:	SecTwp S. R			
Address 2:	Feet from North / South Line of Section			
City: State: Zip:+	Feet from			
Contact Person:	Footages Calculated from Nearest Outside Section Corner:			
Phone: ()	□NE □NW □SE □SW			
CONTRACTOR: License #	GPS Location: Lat:, Long:, Long:			
Name:	Datum: NAD27 NAD83 WGS84			
Wellsite Geologist:				
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:			
☐ OG ☐ GSW	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: 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)			
	Chloride content: ppm Fluid volume: bbls			
Commingled Permit #:	Dewatering method used:			
Dual Completion Permit #:	Location of fluid disposal if bouled office.			
EOR Permit #:	Location of fluid disposal if hauled offsite:			
GSW Permit #:	Operator Name:			
Ε σοιν	Lease Name: License #:			
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R			
Recompletion Date 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:				

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Page Two

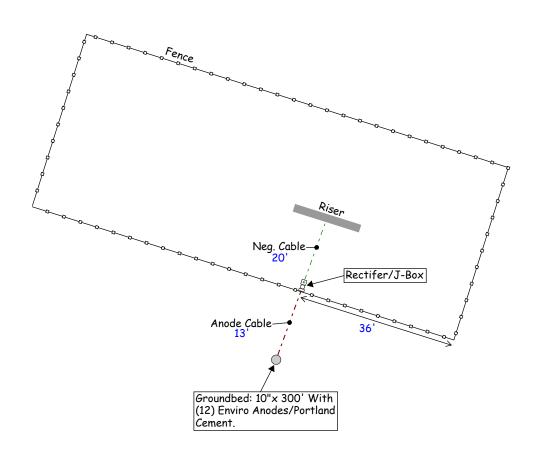
Operator Name: _				Lease Name:			Well #:	
Sec Twp	oS. R.	Eas	st West	County:				
	flowing and shu	ıt-in pressures, wh	ether shut-in pre	essure reached st	atic level, hydrosta	atic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subr						ailed to kcc-well-lo	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to	Geological Surv	ey	Yes No	Na	ıme		Тор	Datum
_	g Run Report / Mud Loo		Yes No Yes No Yes No					
List All E. Logs Ru	un:							
		Rej			New Used ntermediate, product	tion, etc.		
Purpose of Stri		Hole S	ize Casing	Weight	Setting	Type of	# Sacks	Type and Percent
T dipodo di cui	Dri	illed S	et (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
			ADDITIONAL	CEMENTING / SO	 QUEEZE RECORD			
Purpose:	De	epth Tyr	be of Cement	# Sacks Used			Percent Additives	
Perforate		Bottom	, o or comone	" Gagne Good		Typo and 1	ordenit / taditives	
Protect Cas								
Plug Off Zo	ne							
Did you perform a Does the volume Was the hydraulia	of the total base f	_	racturing treatment	_		No (If No, sk	ip questions 2 an ip question 3) out Page Three o	
Date of first Produc	ction/Injection or Re	esumed Production/	Producing Meth		7			
,			Flowing	Pumping		Other (Explain)		
Estimated Product Per 24 Hours	ion	Oil Bbls.	Gas	Mcf W	/ater E	Bbls. (Gas-Oil Ratio	Gravity
DISPO	SITION OF GAS:		N	METHOD OF COMP	PLETION:			N INTERVAL:
	Sold Used	on Lease	Open Hole	n Hole Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)			Bottom	
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid	, Fracture, Shot, Cer (Amount and Kind	menting Squeeze of Material Used)	Record
TUBING RECORD): Size:	Set A	:	Packer At:				

Form	ACO1 - Well Completion
Operator	Overland Pass Pipeline Company, LLC
Well Name	Colby Trap CP Well - MP561 1
Doc ID	1271575

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	16	10	7.966	20	Portland	8	0







CATHODIC PROTECTION INSTALLATON

MP 561

COLBY TRAP STATION

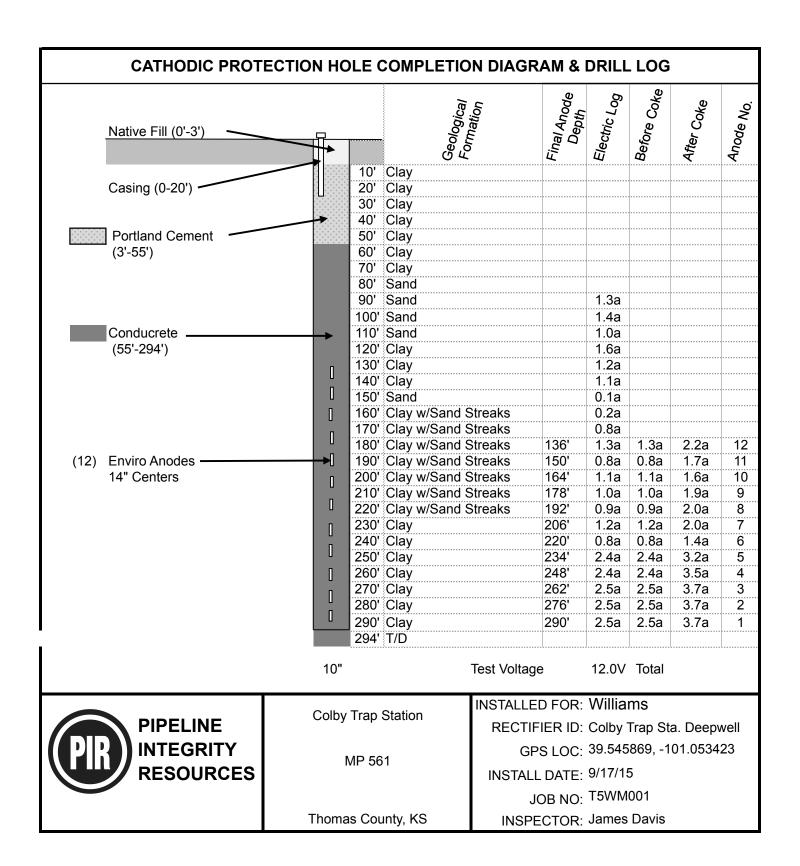
Installed for: WILLIAMS (T5WM001) Colby Station Deepwell

System:

Mile Post:

GPS Loc: 39.545869,-101.053423

Drawn by: D. Robertson **Install Date**: 9-17-2015



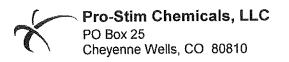
Finley Construction and Ready Mix

12915 Hwy. 25 • Atwood, KS 67730 • 785-626-3282

		-//		20_	2
The state of the s	Sold To:	R			
	19 J. (EIIII)	1.6/1		1	_
GC" 34	6	MON	- 1	olby I	140 "
	Deliver To:			P.O.	
QUANTITY	DESCRIPTION	UNIT PRI	ICE	TOTA	VI
QUARTITI			<u> </u>	1011	
4-2	79005				
7	Sack				
	3 6 - 1				
	SIV				
1	77.3.4				**************************************
Water Added	Air Ent Calc. Chl	Net 10th prox.			
Mileage <u>/ K</u>	Arrived Job 900 Left Job 250	charged on a due balances	II past		
Driver	Truck No. 24/3				
	IMPORTANT	TOTAL			
when delivering ma	ponsible for damage caused by our trucks aterial beyond the curb line. Not responsible trete if water is added by purchaser.				
The maximum allehour. Thereafter, a	owed time for unloading trucks is 1 (one) a charge of \$ per hour will be made	TAX			
for holding trucks CAUTION: Concre	longer. te may cause irritation or injury to eyes and	NET			
rated clothing, and concrete gets in e	ct with skin, either directly or through satu- wash affected areas properly with water. If yes, rinse immediately and thoroughly with mpt medical attention	1461			
	Received by	11/6			

Finley Construction and Ready Mix 12915 Hwy. 25 • Atwood, KS 67730 • 785-626-3282

	7	-//	20
	Sold To:	R	
6003		IMONE L	olb, Tryp
	Deliver To:		P.O.
QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
15	1/4405		
6	SOCK		
	A		
	AIV		
Water Added	Air Ent Calc. Chl Arrived Job Left Job	Net 10th prox. 11/2% per month will be charged on all past	
Mileage / K	Truck No. 243	due balances.	
	Overtime		
	IMPORTANT sponsible for damage caused by our trucks aterial beyond the curb line. Not responsible	TOTAL	
for quality of cond The maximum all hour. Thereafter, a	crete if water is added by purchaser. owed time for unloading trucks is 1 (one) a charge of \$ per hour will be made	TAX	
skin. Avoid contra rated clothing, and concrete gets in e	tonger. te may cause irritation or injury to eyes and ct with skin, either directly or through satu- d wash affected areas properly with water. If eyes, rinse immediately and thoroughly with mpt medical attention	NET	
	Received by	1/1	



Invoice

Invoice #: 115602 Invoice Date: 9/22/2015

Bill To:

PIPELINE INTEGRITY RESOURCES ATTN: DREW 5634 SOUTH 107TH AVE. TULSA, OK 74146

	[Requested By		Disposal
		DREW		DUNKER
Top Gauge	Bottom Ga	Bottom Gauge		Ship Via
			Net 30	T5 WM 001 COLBY

ltem	Description	Total Brls	Rate	Amount
DISPOSAL CHARGE WATER TRUCK	T5 WM 001 COLBY TRAP 9/16 BRL HOURS - SUCKED MUD UP AS DRILLING HOLES	30 6	0.30 95.00	9.00 570.00
	Sales Tax - THOMAS CO.		7.15%	0.00

Total	\$579.00
Payments/Credits	\$0.00
Balance Due	\$579.00