

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1272396  
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: \_\_\_\_\_



1272396

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](mailto: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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No TCores aken <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:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
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) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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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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Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Achenbach B 5
Doc ID	1272396

All Electric Logs Run

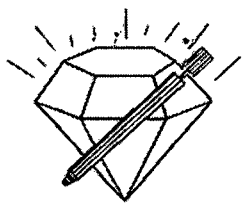
Geologist Log
Borehole Volume Caliper Log
Composite Log
Phased Induction Shallow Focus SP Log
Compensated Neutron PEL Density Micro Log

Form	ACO1 - Well Completion
Operator	Chieftain Oil Co., Inc.
Well Name	Achenbach B 5
Doc ID	1272396

Tops

Name	Top	Datum
Kansas City	4357	-2944
Mississippian	4779	-3364
Kinderhook SH	5030	-3617
Chattanooga SH	5109	-3696
Misener SD	5131	-3721
Viola	5195	-3782
Base of Viola	5290	-3877
Upper Simpson SD	5312	-3999
Lower Simpson SD	5468	-4055
Arbuckle	5499	-4086
Total Depth	5600	N/A





**DIAMOND TESTING, LLC**  
P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
(620) 653-7550 • (800) 542-7313  
achenbachb5dst1

Company Chieftain Oil Company, Inc. Lease & Well No. Achenbach "B" No. 5  
Elevation 1398 GL Formation Misener Effective Pay      Ft. Ticket No. K134  
Date 6-12-14 Sec. 1 Twp. 35S Range 12W County Barber State Kansas  
Test Approved By David Barker Diamond Representative Jason McLemore

Formation Test No. 1 Interval Tested from 5,121 ft. to 5,151 ft. Total Depth 5,151 ft.  
Packer Depth 5,116 ft. Size 6 3/4 in. Packer Depth      ft. Size      in.  
Packer Depth 5,121 ft. Size 6 3/4 in. Packer Depth      ft. Size      in.  
Depth of Selective Zone Set      ft.

Top Recorder Depth (Inside) 5,102 ft. Recorder Number 5513 Cap. 5,000 psi.  
Bottom Recorder Depth (Outside) 5,103 ft. Recorder Number 5588 Cap. 6,000 psi.  
Below Straddle Recorder Depth      ft. Recorder Number      Cap.      psi.

Drilling Contractor Fossil Drilling, Inc. - Rig 3 Drill Collar Length 234 ft I.D. 2 1/4 in.  
Mud Type Chemical Viscosity 54 Weight Pipe Length      ft I.D.      in.  
Weight 9.3 Water Loss 8.0 cc. Drill Pipe Length 4,854 ft I.D. 3 1/2 in.  
Chlorides 4,000 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.  
Jars: Make Sterling Serial Number 6 Anchor Length 30 ft. Size 4 1/2-FH in.  
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.  
Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2-XH in.

Blow: 1st Open: Strong blow increasing. Off bottom of bucket in 20 secs. Gas to surface in 15 mins. Gauged gas. No blow back during shut-in. (SEE GAS VOLUME REPORT)  
2nd Open: Strong blow increasing. Off bottom of bucket on open. Gauged gas. No blow back during shut-in. (SEE GAS VOLUME REPORT)

Recovered 240 ft. of gassy oil & water cut mud = 1.236660 bbls. (Grind out: 10%-gas; 10%-oil; 20%-water; 60%-mud) Chlorides: 100,000 Ppm PH: 7.0  
Recovered      ft. of       
Recovered      ft. of       
Recovered      ft. of       
Recovered      ft. of       
Recovered      ft. of     

Remarks     

Time Set Packer(s) 7:14 A.M. Time Started off Bottom 10:29 A.M. Maximum Temperature 129°  
Initial Hydrostatic Pressure.....(A) 2526 P.S.I.  
Initial Flow Period.....Minutes 30 (B) 54 P.S.I. to (C) 79 P.S.I.  
Initial Closed In Period.....Minutes 60 (D) 1939 P.S.I.  
Final Flow Period.....Minutes 45 (E) 74 P.S.I. to (F) 97 P.S.I.  
Final Closed In Period.....Minutes 60 (G) 1945 P.S.I.  
Final Hydrostatic Pressure.....(H) 2510 P.S.I.



**JASON MCLEMORE**

**CELL # 620-617-0527**

**General Information**

Company Name	Chieftain Oil Company, Inc	
Contact	Ron Molz	Job Number K134
Well Name	Achenbach B5	Representative Jason McLemore
Unique Well ID	DST #1 Misener 5121-5151	Well Operator Chieftain Oil Company, Inc
Surface Location	1-35s-12w-Barber	Prepared By Jason McLemore
Field	Stranathan	Qualified By Dave Barker
Well Type	Vertical Test Unit	#6

**Test Information**

Test Type	Drill Stem Test	Well Operator	Chieftain Oil Company, Inc	Representative	Jason McLemore
Formation	Misner	Report Date	2014/06/12		
Well Fluid Type	01 Oil	Prepared By	Jason McLemore		
Test Purpose (AEUB)	Initial Test				

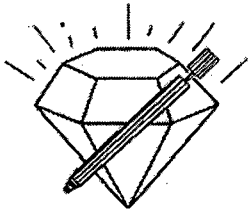
Start Test Date	2014/06/12	Start Test Time	03:36:00
Final Test Date	2014/06/12	Final Test Time	12:52:00

**Test Results**

**RECOVERED:**

240 Gassy Oil & Water Cut Mud, 10% Gas, 10% Oil, 20% Water, 60% Mud  
 240 TOTAL FLUID

CHLORIDES: 100,000  
 PH: 7



**DIAMOND TESTING, LLC**  
 P.O. Box 157  
**HOISINGTON, KANSAS 67544**  
 (620) 653-7550 • (800) 542-7313

Company Chieftain Oil Company, Inc. Lease & Well No. Achenbach "B" No. 5  
 Date 6-12-14 Sec 1 Twp 35 S Rge 12 W Location SE SE NW County Barber State Kansas  
 Drilling Contractor Fossil Drilling, Inc. - Rig 3 Formation Misener DST No. 1  
 Remarks: 1st Open: Gas to surface in 15 mins. Sample taken 25 mins. into initial flow.

Open Tool: 7:14 a.m. **INITIAL FLOW**

Time O' Clock	Orifice Size	Gauge	MCF/D
7:34 a.m.	1/2 in.	25 psi	205
* 7:39 a.m.	1/2 in.	20 psi	177
7:44 a.m.	1/2 in.	16 psi	153

Open Tool: 8:44 a.m. **FINAL FLOW**

Time O' Clock	Orifice Size	Gauge	MCF/D
8:54 a.m.	1/2 in.	17 psi	159
9:04 a.m.	1/2 in.	15 psi	147
9:14 a.m.	1/2 in.	15 psi	147
9:24 a.m.	1/2 in.	14 psi	141

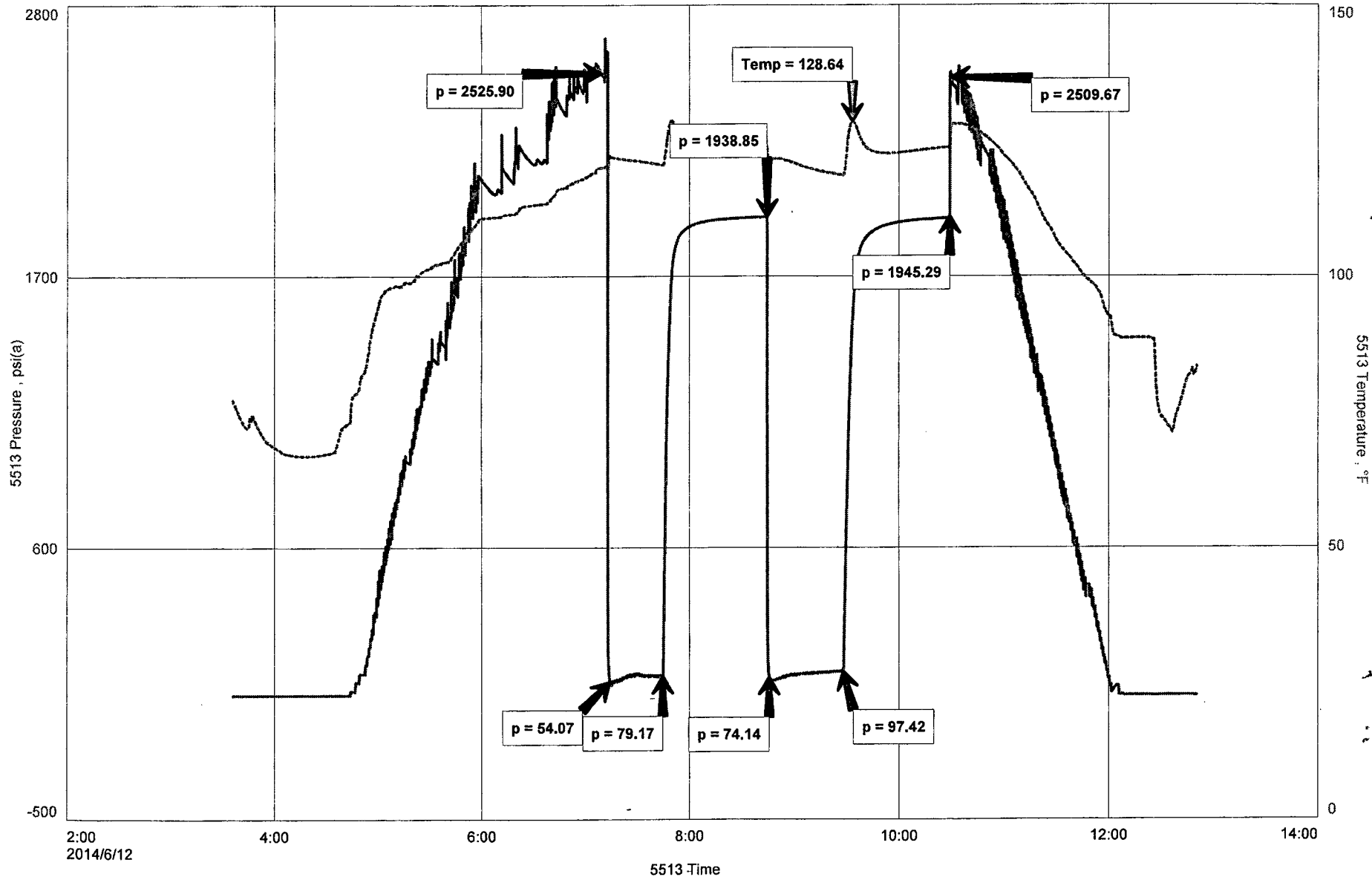
\* Sample taken.



Chieftain Oil Company, Inc  
DST #1 Misener 5121-5151  
Start Test Date: 2014/06/12  
Final Test Date: 2014/06/12

Achenbach B5  
Formation: Misener  
Pool: Wildcat  
Job Number: K134

# Achenbach B5



**POINT****PRESSURE**  
Electronic Reading

(A)	Initial Hydrostatic Mud .....	2526	PSI
(B)	First Initial Flow Pressure .....	54	PSI
(C)	First Final Flow Pressure .....	79	PSI
(D)	Initial Closed-in Pressure .....	1939	PSI
(E)	Second Initial Flow Pressure .....	74	PSI
(F)	Second Final Flow Pressure .....	97	PSI
(G)	Final Closed-in Pressure .....	1945	PSI
(H)	Final Hydrostatic Mud .....	2510	PSI