



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1275360
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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 SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- 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 ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

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
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1275360

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 <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 Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <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				

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)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

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> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

January 06, 2016

Matt Morris
Morris, Terry E. dba G L M Company
PO BOX 193
RUSSELL, KS 67665-0193

Re: ACO-1
API 15-065-24107-00-00
Ambrosier B 1
NW/4 Sec.19-08S-22W
Graham County, Kansas

Dear Matt Morris:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 08/06/2015 and the ACO-1 was received on January 06, 2016 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department



DRILL STEM TEST REPORT

Prepared For: **MORRIS TERRY E. dba GLM COMPANY**

P.O. BOX 193
RUSSELL, KANSAS 67665-0192

ATTN: HERB DEINES

19-8S-22W GRAHAM

Start Date: 2015.08.10 @ 19:24:00

End Date: 2015.08.10 @ 00:00:00

Job Ticket #: 01231 DST #: 1

Eagle Testers
1309 Patton Road Great Bend, Kansas 67530
620-791-7394

Printed: 2015.08.11 @ 01:29:57

MORRIS TERRY E. dba GLM COMPANY

19-8S-22W GRAHAM

DST # 1

KANSAS CITY

2015.08.10



DRILL STEM TEST REPORT

MORRIS TERRY E. dba GLM COMPANY

P.O. BOX 193
RUSSELL, KANSAS 67665-0192

19-8S-22W GRAHAM

Job Ticket: 01231 **DST#: 1**

Test Start: 2015.08.10 @ 19:24:00

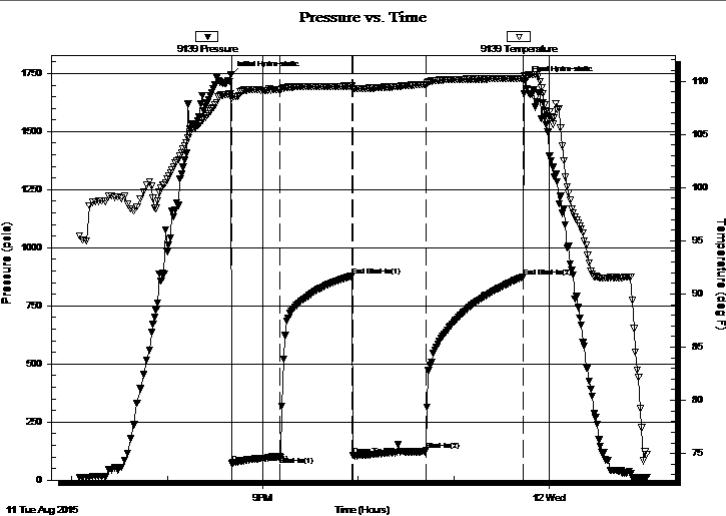
ATTN: HERB DEINES

GENERAL INFORMATION:

Formation: **KANSAS CITY**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 00:00:00
 Time Test Ended: 00:00:00
 Interval: **3420.00 ft (KB) To 3505.00 ft (KB) (TVD)**
 Total Depth: 3505.00 ft (KB) (TVD)
 Hole Diameter: inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole (Initial)
 Tester: GENE BUDIG
 Unit No: 1
 Reference Elevations: ft (KB)
 ft (CF)
 KB to GR/CF: ft

Serial #: 9139 Outside
 Press@RunDepth: 874.52 psia @ 3500.00 ft (KB) Capacity: 5000.00 psia
 Start Date: 2015.08.11 End Date: 2015.08.12 Last Calib.: 2015.08.11
 Start Time: 19:05:00 End Time: 01:01:30 Time On Btm: 2015.08.11 @ 20:40:00
 Time Off Btm: 2015.08.11 @ 23:45:00

TEST COMMENT: 1ST OPENING 30 MINUTES VERY WEAK BUILDING BLOW BUILT TO 7 INCHES INTO THE WATER
 1ST SHUT-IN 45 MINUTES-NO BLOW BACK
 2ND OPENING 45 MINUTES VERY WEAK BUILDING BLOW BUILT TO 4 INCHES INTO THE WATER
 2ND SHUT-IN 60 MINUTES-NO BLOW BACK



PRESSURE SUMMARY

Time (Min.)	Pressure (psia)	Temp (deg F)	Annotation
0	1742.41	108.81	Initial Hydro-static
1	73.78	108.36	Open To Flow (1)
31	101.52	109.22	Shut-In(1)
76	877.82	109.54	End Shut-In(1)
77	105.73	109.28	Open To Flow (2)
123	128.50	109.70	Shut-In(2)
184	874.52	110.26	End Shut-In(2)
185	1718.86	110.53	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	DRILLING MUD	1.68

Gas Rates

	Choke (inches)	Pressure (psia)	Gas Rate (Mcf/d)



DRILL STEM TEST REPORT

MORRIS TERRY E. dba GLM COMPANY

P.O. BOX 193
RUSSELL, KANSAS 67665-0192

ATTN: HERB DEINES

19-8S-22W GRAHAM

Job Ticket: 01231

DST#: 1

Test Start: 2015.08.10 @ 19:24:00

GENERAL INFORMATION:

Formation: **KANSAS CITY**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 00:00:00

Time Test Ended: 00:00:00

Test Type: Conventional Bottom Hole (Initial)

Tester: GENE BUDIG

Unit No: 1

Interval: **3420.00 ft (KB) To 3505.00 ft (KB) (TVD)**

Reference Elevations: ft (KB)

Total Depth: 3505.00 ft (KB) (TVD)

ft (CF)

Hole Diameter: inches Hole Condition: Fair

KB to GR/CF: ft

Serial #: 9119

Inside

Press@RunDepth: 875.47 psia @ 3500.00 ft (KB)

Capacity: 5000.00 psia

Start Date: 2015.08.11

End Date:

2015.08.12

Last Calib.:

2015.08.11

Start Time: 19:05:00

End Time:

01:01:30

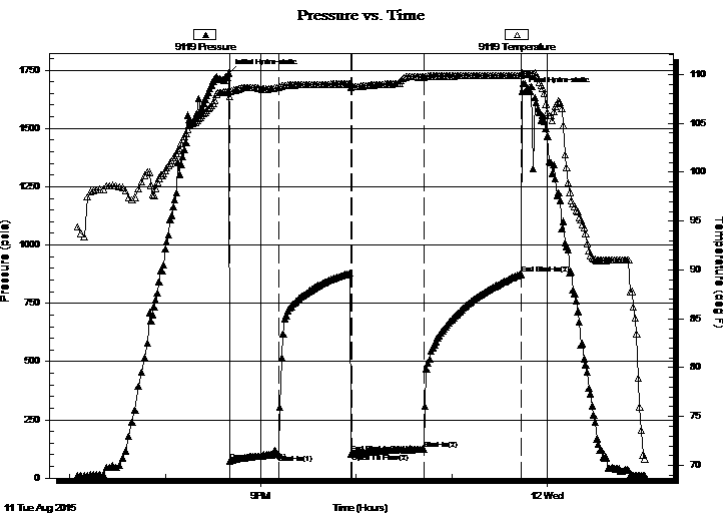
Time On Btm:

2015.08.11 @ 20:40:00

Time Off Btm:

2015.08.11 @ 23:44:00

TEST COMMENT: 1ST OPENING 30 MINUTES VERY WEAK BUILDING BLOW BUILT TO 7 INCHES INTO THE WATER
 1ST SHUT-IN 45 MINUTES-NO BLOW BACK
 2ND OPENING 45 MINUTES VERY WEAK BUILDING BLOW BUILT TO 4 INCHES INTO THE WATER
 2ND SHUT-IN 60 MINUTES-NO BLOW BACK



PRESSURE SUMMARY

Time (Min.)	Pressure (psia)	Temp (deg F)	Annotation
0	1736.88	108.26	Initial Hydro-static
1	74.51	107.78	Open To Flow (1)
31	101.15	108.68	Shut-In(1)
77	104.82	108.71	End Shut-In(1)
77	105.23	108.83	Open To Flow (2)
123	125.15	109.72	Shut-In(2)
184	875.47	109.88	End Shut-In(2)
184	1659.10	110.15	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	DRILLING MUD	1.68

Gas Rates

	Choke (inches)	Pressure (psia)	Gas Rate (Mcf/d)



DRILL STEM TEST REPORT

TOOL DIAGRAM

MORRIS TERRY E. dba GLM COMPANY

P.O. BOX 193
RUSSELL, KANSAS 67665-0192

ATTN: HERB DEINES

19-8S-22W GRAHAM

Job Ticket: 01231

DST#: 1

Test Start: 2015.08.10 @ 19:24:00

Tool Information

Drill Pipe:	Length: 3430.00 ft	Diameter: 3.80 inches	Volume: 48.11 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 20000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight to Pull Loose: 95000.00 lb
			Total Volume: 48.11 bbl	Tool Chased 2.00 ft
Drill Pipe Above KB:	30.00 ft			String Weight: Initial 44000.00 lb
Depth to Top Packer:	3420.00 ft			Final 44000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	85.00 ft			
Tool Length:	105.00 ft			
Number of Packers:	2	Diameter:	6.75 inches	

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
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Shut In Tool	5.00			3405.00	
Hydraulic tool	5.00			3410.00	
Top Packer	5.00			3415.00	
Packer	5.00			3420.00	20.00 Bottom Of Top Packer
Anchor	5.00			3425.00	
Change Over Sub	0.75			3425.75	
Drill Pipe	63.50			3489.25	
Change Over Sub	0.75			3490.00	
Anchor	10.00			3500.00	
Recorder	0.00	9119	Inside	3500.00	
Recorder	0.00	9139	Outside	3500.00	
Bullnose	5.00			3505.00	85.00 Anchor Tool

Total Tool Length: 105.00



DRILL STEM TEST REPORT

FLUID SUMMARY

MORRIS TERRY E. dba GLM COMPANY

P.O. BOX 193
RUSSELL, KANSAS 67665-0192

19-8S-22W GRAHAM

Job Ticket: 01231 **DST#: 1**

Test Start: 2015.08.10 @ 19:24:00

ATTN: HERB DEINES

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 50.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.99 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psia		
Salinity: 800.00 ppm			
Filter Cake: 1.00 inches			

Recovery Information

Recovery Table

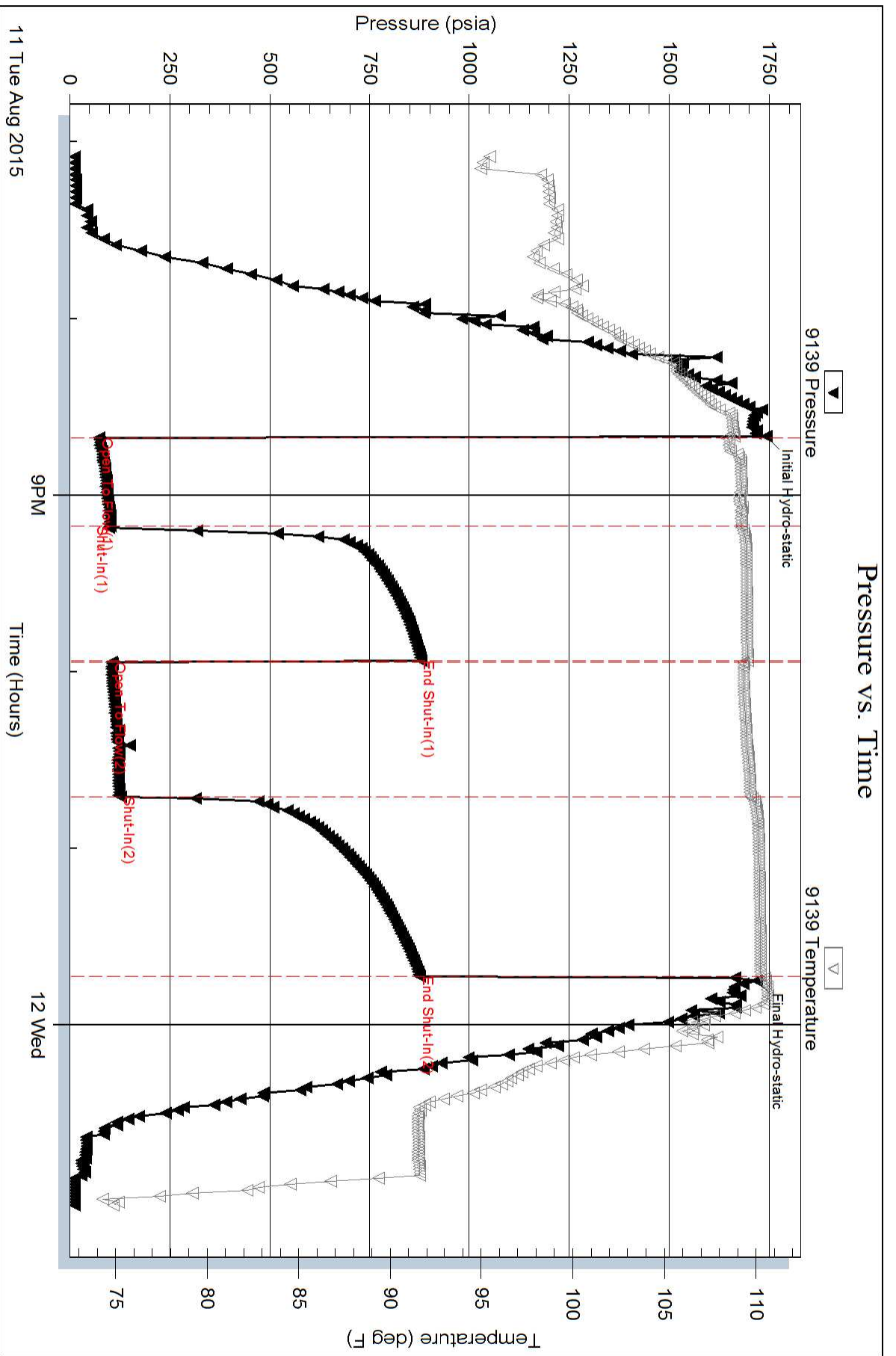
Length ft	Description	Volume bbl
120.00	DRILLING MUD	1.683

Total Length: 120.00 ft Total Volume: 1.683 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:



Pressure vs. Time

