



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1275911
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: _____

1275911

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			
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)*

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1172

Date	7-31-15	Sec.	6	Twp.	14	Range	25	County	Trego	State	KS	On Location		Finish	7:30 PM
Location Collyer S8.7 2W to 110rd 35 E into															

Lease	Purinton - west unit	Well No.	1-6	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	Murfin		16	Charge To	Phillips Exploration
Type Job	Surface			Street	
Hole Size	12 1/4	T.D.	216	City	
Csg.	8 5/8	Depth		State	
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Tool		Depth		Cement Amount Ordered	150 sk com 3% CC 2% gel
Cement Left in Csg.	15'	Shoe Joint	15'		
Meas Line		Displace	12 3/4		

EQUIPMENT

Pumptrk	18	No.		Cementer	Rick	Common	130
				Helper		Poz. Mix	
Bulktrk	9	No.		Driver	Nick	Gel.	3
				Driver		Calcium	5
Bulktrk	PH	No.		Driver	Billy		
				Driver			

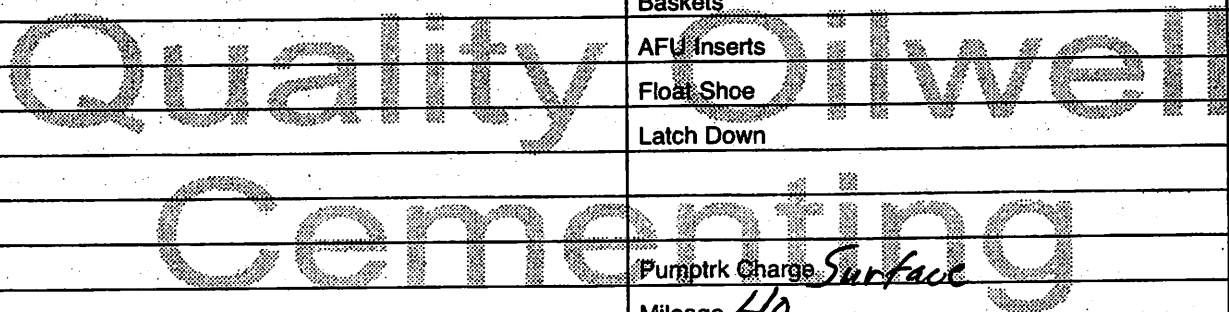
JOB SERVICES & REMARKS

Remarks:		Hulls	
Rat Hole		Salt	
Mouse Hole		Flowseal	
Centralizers		Kol-Seal	
Baskets		Mud CLR 48	
D/V or Port Collar		CFL-117 or CD110 CAF 38	
		Sand	
		Handling	158

Cement did circulate

FLOAT EQUIPMENT

Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	



Pumptrk Charge	Surface
Mileage	40

Signature	<i>Ray Label</i>	Tax	
		Discount	
		Total Charge	

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Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1019

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-8-15	6	14	25	Trego	KS		12:00 PM
Lea Puritan Werth				Location Collyer 89 2W 3S E into			
Well No. 1-6				Owner			
Contractor Murfin 16				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Type Job Bottom Stage				Charge To Phillips Exploration			
Hole Size 7 7/8		T.D. 4400'		Street			
Csg. 5 1/2		Depth 4399'		City			
Tbg. Size		Depth		State			
Tool DV		Depth 1912'		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg.		Shoe Joint 15'		Cement Amount Ordered 175 com 10% Salt			
Meas Line		Displace 107 bbl		5% Gilsonite			
EQUIPMENT				Common 175			
Pumptrk 18 No.		Cement Helper Craig		Poz. Mix			
Bulktrk 14 No.		Driver Heath		Gel.			
Bulktrk P4 No.		Driver Brett		Calcium			
JOB SERVICES & REMARKS				Hulls			
Remarks:				Salt 16			
Rat Hole				Flowseal			
Mouse Hole				Kol-Seal 825#			
Centralizers - 3, 6, 8, 10, 12, 13, 15, 18, 21 + 58				Mud CLR 48 - 500 Gal			
Baskets - 4, 22 + 59				CFL-117 or CD110 CAF 38 - 20 KCL			
DV on Port Collar Jt # 59 @ 1912				Sand			
Ran 4399' of 5 1/2 + Est circulation				Handling 199			
Mix 500 gal Mud Flush + 10 bbl KO				Mileage 5 1/2			
Mix 175 gx				FLOAT EQUIPMENT			
Displaced 54 bbl H2O, 45 Mud + 8 bbl H2O				Guide Shoe			
Lift Pressure @ 1000 lbs				Centralizer - 10			
Landed @ 1500 lbs				Baskets - 3			
Plug held + OPENED DV				AFU Inserts			
				Float Shoe - 1			
				Latch Down - 1			
				DV Tool - 1			
				Schatlers - 40			
				Pumptrk Charge prod string Bottom Stage			
				Mileage 40			
X Signature <i>Ray [unclear]</i>				Tax			
				Discount			
				Total Charge			

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1020

Date	Sec.	Twp.	Range	County	State	On Location	Finish
8-8-15	6	14	25	Trego	KS		4:06 PM

Location *Callyer 8S 2W 35 E int*

Lease	Well No.	Owner	
<i>Purinton Worth</i>	<i>16</i>	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Contractor		Charge To	
<i>Murfin 16</i>		<i>Phillips Exploration</i>	
Type Job	T.D.	Street	
<i>Tap Stage</i>	<i>4400'</i>		
Hole Size	Depth	City	
<i>7 7/8</i>	<i>4399'</i>	State	
Csg.	Depth	The above was done to satisfaction and supervision of owner agent or contractor.	
<i>5 1/2</i>	<i>1912</i>	Cement Amount Ordered <i>350 80/20 QMDC 1/4 CB</i>	
Tbg. Size	Shoe Joint		
Tool	Displace		
<i>DV</i>	<i>46 3/4 bbl</i>		
Cement Left in Csg.			
Meas Line			

EQUIPMENT

Pumptrk	No.	Cementer
<i>18</i>		<i>Craig</i>
Bulktrk	No.	Driver
<i>29</i>		<i>Heath</i>
Bulktrk	No.	Driver
<i>PU</i>		<i>Brett</i>

Common	<i>350 80/20 QMDC</i>
Poz. Mix	
Gel.	
Calcium	

JOB SERVICES & REMARKS

Remarks:
 Rat Hole - *30 gx*
 Mouse Hole - *20 gx*
 Centralizers
 Baskets
 DV or Port Collar
 Ran *500 gal Mud Flush*
 Plugged Rat + Mouse hole
 Mixed *300 gx QMDC* down *5 1/2*
 Displaced *46 3/4 bbl H₂O*

Hulls
 Salt
 Flowseal *87#*
 Kol-Seal
 Mud CLR 48 *500 gal*
 CFL-117 or CD110 CAF 38
 Sand
 Handling *350*
 Mileage

FLOAT EQUIPMENT

Lift pressure @ *900 lbs*
 Landed @ *1500 lbs*

Guide Shoe
 Centralizer
 Baskets
 AFU Inserts
 Float Shoe
 Latch Down

Plug held + cement circulated

Pumptrk Charge *prod string (Tap stage)*
 Mileage *NC*

X Signature *[Signature]*

Tax
Discount
Total Charge