



Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1276686  
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: \_\_\_\_\_

1276686

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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Castle Resources, Inc.
Well Name	Wessler 5
Doc ID	1276686

Tops

Name	Top	Datum
Severy Sh	2480	-706
Topeka	2490	-716
Heebner	2756	-982
Toronto	2776	-1002
Brown LMS	2867	-1093
L-KC	2889	-1115
B-KC	3168	-1394
Arbuckle	3210	-1436
RTD	3698	-1924



# GLOBAL CEMENTING, L.L.C.

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>1-9-16</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>1:00 PM</u>
LEASE <u>WESSler</u>	WELL #. <u>5</u>		LOCATION	COUNTY <u>Ellsworth</u>		STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)							

CONTRACTOR <u>White Knight</u>	OWNER
TYPE OF JOB <u>Long string</u>	
HOLE SIZE <u>7 7/8"</u>	T.D.
CASING SIZE <u>5 1/2"</u>	DEPTH <u>3700</u>
TUBING SIZE	DEPTH <u>3322.44</u>
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX. <u>1500psi</u>	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>10ft</u>	
PERFS	
DISPLACEMENT <u>78-74 bbl</u>	
EQUIPMENT	
PUMP TRUCK	CEMENTER <u>Heath</u>
# <u>P#2</u>	HELPER <u>Rocky</u>
BULK TRUCK	
# <u>R#5</u>	DRIVER <u>Jason</u>
BULK TRUCK	
#	DRIVER

CEMENT		
AMOUNT ORDERED	<u>150 SKS com @ 2% gel 2% plaster</u>	
	<u>10% salt</u>	
	<u>200 SKS multi - dens</u>	
COMMON	@	
POZMIX	@	
GEL	@	
CHLORIDE	@	
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	@	
MILEAGE		
		TOTAL

### REMARKS:

Ran 105 Hs of 5 1/2 casing and landing it with packer shoe - est circulation with mud pump - hook up and mix 200 SKS multi - dens and tail in with 150 SKS com @ 2% gel 2% plaster 10% salt - knock loose and plug @ 305 SKS - Release plug - wash pump and bits (ream - hook up) @ 78-74 bbl of 1120 - 1.5 slurry pressure @ 700 PSI - plug landed @ 1500 PSI - Released and dryship

CHARGE TO: Castle Resources  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

### SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		
EXTRA FOOTAGE	@	
MILEAGE	@	
MANIFOLD	@	
	@	
	@	
	@	
	@	
		TOTAL

### PLUG & FLOAT EQUIPMENT

<u>1 - Packer shoe</u>	@	
<u>5 - CAT</u>	@	
<u>2 - baskets</u>	@	
<u>1 - CO 2 Plug</u>	@	
	@	
		TOTAL

Global Cementing, L.L.C.,  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side. Thank You!

PRINTED NAME Robert Gelbany  
SIGNATURE \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

# GLOBAL CEMENTING, L.L.C.

2531

REMIT TO 18048 170RD  
RUSSELL, KS 67665

SERVICE POINT: Russell, KS

DATE <u>1-4-16</u>	SEC. <u>19</u>	TWP. <u>17</u>	RANGE <u>9</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Wessler</u> WELL # <u>5</u> LOCATION						COUNTY <u>Ellsworth</u>	STATE <u>KS</u>
JOB FINISH <u>2:30 P.M.</u>							
OLD OR NEW (CIRCLE ONE)							

CONTRACTOR <u>White Knight</u>	
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D. <u>263</u>
CASING SIZE <u>8 5/8</u>	DEPTH <u>261.61</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS	
DISPLACEMENT <u>15 3/4 bbl</u>	EQUIPMENT
PUMP TRUCK # <u>P#2</u>	CEMENTER <u>Mark</u>
	HELPER
BULK TRUCK # <u>B#5</u>	DRIVER <u>Jason</u>
BULK TRUCK #	DRIVER

OWNER	
CEMENT AMOUNT ORDERED <u>200SKS com 3% CC</u>	
<u>2% gel</u>	
COMMON	@
POZMIX	@
GEL	@
CHLORIDE	@
ASC	@
	@
	@
	@
	@
	@
	@
HANDLING	@
MILEAGE	@
TOTAL	

REMARKS:  
Ran 6 hrs of 8 5/8 casing and landing ft  
on circulation with mud pump  
with 200SKS and also 15 3/4 bbl of  
H2O - shut in @ 200PS.  
Cement did circulate to surface

CHARGE TO: Castle Resources  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE	
DEPTH OF JOB	
PUMP TRUCK CHARGE	
EXTRA FOOTAGE	@
MILEAGE	@
MANIFOLD	@
	@
	@
TOTAL	

PLUG & FLOAT EQUIPMENT	
	@
	@
	@
	@
	@
TOTAL	

Global Cementing, L.L.C.,  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME \_\_\_\_\_  
SIGNATURE Terry Crismon

SALES TAX (If Any) \_\_\_\_\_  
TOTAL CHARGES \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS