

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

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: _____

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 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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W & W Production Company

1150 Highway 39
 Chanute, Kansas 66720-5215
 Mobile: 620-431-5970
 Phone: Office/Home 620-431-4137

Invoice

DATE	INVOICE NO.
2/1/2016	47799

BILL TO
Colt Energy C/O Rex Ashlock PO Box 388 1112 Rhode Island Rd. Iola, Kansas 66749

Plug Well Ashley-Stienforth 10 Woodson County, Kansas

15-207-29321

SERVICED	ITEM	DESCRIPTION	QTY	RATE	AMOUNT
1/27/2016	Pump Truck Cement	Pump Charge For plugging Ran drill pipe to T. D. pump 9 sacks gel. Pump 50 sacks of Portland Cement on bottom. Pull pipe to 1170' spot 14 sacks of Portland Cement. Pull pipe to 500' & spot 14 sacks of Portland Cement. Pull pipe to 250' & pump 80 sacks of Portland Cement to Surface. Pull out pipe.	1 158	500.00 12.00	500.00T 1,896.00T
APPROVED JA 2/4/2016					
FEB 4 2016					
<i>*Approval needed*</i>					
				Sales Tax (7.5%)	\$179.70
				Total	\$2,575.70

100100
 D/K 001267

Fax #	Fed. I.D. 48-0843238
620-431-3183	carolwimsett4@yahoo.com

Bar Drilling, LLC

INVOICE

1317 105th Rd
 Yates Center, KS 66783
 (719) 210-8806 ,(620) 625-3679

DATE: January 29, 2016
INVOICE #

BILL TO:
 Colt Energy Inc.
 P.O. Box 388
 Iola, KS 66749

FOR: Ashley #10
 15-207-29321

DESCRIPTION	Quantity	RATE	AMOUNT
set 40.5' of 8 5/8" surface casing with 14 sacks of cement		included	
Drilled 1566' 6 3/4" hole.	1.00	10125.00	10,125.00
2nd core	1.00	1500.00	1,500.00
3rd core	1.00	1500.00	1,500.00
Drill into Miss 60+', 1 used 6 3/4' pdc bitt	1.00	1500.00	1,500.00
Plugging, 2hrs rig time	2.00	250.00	500.00
discounted 20%			(3,025.00)

SUBTOTAL	\$	12,100.00
TAX RATE		
SALES TAX		
OTHER		
TOTAL	\$	12,100.00

100100

D16001109

APPROVED JA 1/29/2016

THANK YOU FOR YOUR BUSINESS!

COLT ENERGY, INC.

Plugging Report

1/29/2016

Well: **Ashley-Steinforth #10**

4785 FSL, 3465 FEL

Section 13-T26S-R14E

Woodson County, KS

API #15-207-29321

Total Depth (TD): 1566'

Casing: 8 5/8" surface casing at 40.50', no other casing ran

BAR Drilling Co. run in open ended drill pipe to within 1 foot of TD, had to circulate down the last 2 joints. W & W Production Co. (the cementers) plumbed up to same and "gelled the well bore up" (pumped in a mixture of bentonite and water) after which, pumped in a 200' cement plug 1565', then the drill pipe was pulled up to 1170' and a 50' cement plug was pumped in, this was to cover over the "Squirrel Sand" Zone, the drill pipe was pulled up to 500' and a 50' cement plug was pumped in, after which the drill pipe was pulled up to 250' and cement was circulated from this depth to the surface. Mr. Mike Heffner, KCC representative, approve the plugging procedure and results.

Summary:

Used:

158 sacks of Portland "common" cement with no additives (apx. 3.48 ft. / sx)

8 sack of bentonite ("gel")

Cement from 1565' to 1365' (57.47 +/- sx)

Gel spacer from 1365' to 1170'

Cement from 1170' to 1120' (14.36 +/- sx)

Gel spacer from 1120' to 500'

Cement from 500' to 450' (14.36 +/- sx)

Gel spacer from 450' to 250'

Cement from 250' to surface (71.81 +/- sx)

End Report

Rex. R. Ashlock

For: Colt Energy, Inc.