

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1304510

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

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: _____

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:					

<div style="text-align: center;"> CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used Report all strings set-conductor, surface, intermediate, production, etc. </div>							
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 (Amount and Kind of Material Used)	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease</p> <p><i>(If vented, Submit ACO-18.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled</p> <p><i>(Submit ACO-5)</i></p> <p><input type="checkbox"/> Other (Specify) _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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Form	ACO1 - Well Completion
Operator	PetroSantander (USA) Inc.
Well Name	SHERMAN 3
Doc ID	1304510

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	427	COMMON	275	CC 3%
Production	7.875	5.5	15.5	4857	LITE +CLASS H	300	NA
Liner	4.875	4.5	12.6	4848	COMMON	50	NA

PETROSANTANDER (USA) INC.

WELL NAME:	SHERMAN 3	AFE#: 0140
REPORTED BY:	GORDON A.	OPERATIONS DAY: OCTOBER 18, 19, 20 - 2011
OBJECTIVE:	INSTALL CL	REPORT DAY: 24, 25, 26
RTD:	4858'	CSG. SIZE: 5 1/2" 14#
PBTD:	4848'	TBG. SIZE: 2 7/8"
PERFS:	4774'-4810'	FORMATION: MORROW

24 HOUR SUMMARY:

10/18/2011 TIH W/ TBG, MIRU HEATWAVES AND STARTED TO HUNT FOR HOLE, HOLE BETWEEN 2798' - 3688'

WITH PKR SET @ 2862', PUMPED DN ANNULUS AND PRESSURED TO 1,000# - LOST 100# IN 30 SECONDS

HOOKEED UP TO TBG AND LOADED, WAS ABLE TO PUMP INTO .15 BPM @ 900# RDMO HEATWAVES

TOH W/ TBG AND PKR, SD AND WAITED ON LOG - TECH

MIRU LOG - TECH TIH AND PULLED 598' GAMA RAY CORRELATION LOG AND SHOT PERFS 4774'-4810' @ 4 SPF - RDMO LOG - TECH

PACKED OFF WELL AND SDON

10/19/2011 WELL ON SLIGHT VAC. - TIH W/ 4 1/2" X 2 3/8" AS II PKR AND 148 JTS 2 3/8" TBG AND SET PKR @ 4716'

MIRU HEATWAVES - PUMPED 2,000 GL 15% HCL W/ SF, FE, CLAY STAY AND DBL INHIB, AND 60 BBL 2% KCL FLUSH

MAX 840# @ 3 BPM, MIN 440# @ 3 BPM, AVG 660# @ 3 BPM - ISIP 400# - 15 MINS TO VAC - RDMO HEATWAVES

RELEASED PKR AND TOH W/ 2 3/8" WORK STRING, SINGLING ONTO GROUND, AND PKR MOVED WORK STRING OFF LOCATION

MOVED 155 JTS 2 3/8" TK-15 TBG IN AND TIH W/ 4 1/2" X 2 3/8" NC AS I PKR AND 40 JTS TBG

PACKED OFF WELL AND SDON

10/19/2011 WELL ON SLIGHT VAC TIH W/ PKR AND 2 3/8" TK-15 TBG STRING AS FOLLOWS:

4 1/2" X 2 3/8" AS I NC PKR W/ 2' TAIL PIPE 9.97'

144 JTS 2 3/8" OD EUE 8RD TK-15 TBG 4670.15'

TOTAL LENGTH @ KB = 4680.12'

TBG SET 3' BELOW KB = 4683.12'

CLEANED UP LOCATION - RDMO PSI RIG 2

PSI & PAUDA ROUSTABOUTS HOOKED UP FLOW LINE AND CLOSED PIT

DAILY COST SUMMARY:

VENDOR	SERVICE	COST	
PSI RIG 2	SERVICE UNIT	\$8,000.00	
HEATWAVES	PUMP TRUCK	\$7,500.00	
PSI	ROUSTABOUTS	\$500.00	
PAUDA	ROUSTABOUTS	\$500.00	
SUNRISE	TK-15 TBG	\$32,000.00	
SUNRISE	MISC. FITTINGS	\$5,000.00	
LOG - TECH	LOG / PERFS	\$8,500.00	
			DAILY COST: \$62,000.00
			PREVIOUS COST: \$159,400.00
			COST TO DATE: \$221,400.00

[illegible]