Kansas Corporation Commission 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 #		API No. 15		
Name:		Spot Description:		
Address 1:		SecTwpS. R		
Address 2:		Feet from North / South Line of Section		
City: State: 2	Zip:+	Feet from East / West Line of Section		
Contact Person:		Footages Calculated from Nearest Outside Section Corner:		
Phone: ()		□NE □NW □SE □SW		
CONTRACTOR: License #		GPS Location: Lat:, Long:		
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxx)		
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84		
Purchaser:		County:		
Designate Type of Completion:		Lease Name: Well #: Field Name: Producing Formation: Elevation: Ground: Kelly Bushing:		
New Well Re-Entry	Workover			
Oil WSW SWD	SIOW			
☐ Gas ☐ D&A ☐ ENHR☐ OG ☐ GSW	☐ SIGW	Total Vertical Depth: Plug Back Total Depth:		
☐ OG ☐ GSW ☐ CM (Coal Bed Methane)	Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet		
Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used? Yes No		
If Workover/Re-entry: Old Well Info as follows:		If yes, show depth set: Feet		
Operator:		If Alternate II completion, cement circulated from:		
Well Name:		feet depth to:w/sx cmt.		
Original Comp. Date: Original				
Deepening Re-perf. Conv. to I	_	Drilling Fluid Management Plan		
	GSW Conv. to Producer	(Data must be collected from the Reserve Pit)		
	_	Chloride content:ppm Fluid volume:bbls		
		Dewatering method used:		
		Dewatering method dood.		
		Location of fluid disposal if hauled offsite:		
		Operator Name:		
GSW Permit #:		Lease Name: License #:		
Canad Data as Data Data LTD	Completion Data are	Quarter Sec TwpS. R		
Spud Date or Date Reached TD Recompletion Date	Completion Date or Recompletion Date	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

Confidentiality Requested:

Yes No

KCC Office Use ONLY					
Confidentiality Requested					
Date:					
Confidential Release Date:					
Wireline Log Received					
Geologist Report Received					
UIC Distribution					
ALT					



1310848 CORRECTION #1

Operator Name:			Lease Name: _			Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow	ring and shut-in pressu	ormations penetrated. Cures, whether shut-in prediction of the pre	essure reached stat	ic level, hydrosta	tic pressures, bot		
		otain Geophysical Data a or newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth ar		Sample
Samples Sent to Geol	logical Survey	Yes No	Nam	ie		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING	RECORD N	ew Used			
		Report all strings set-			ion, 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 / SQI	JEEZE RECORD	I	1	
Purpose: Depth Type of Cement Top Bottom		Type of Cement	# Sacks Used	# Sacks Used Type and Percent Additives			
Protect Casing Plug Back TD Plug Off Zone							
	ulic fracturing treatment or	n this well? aulic fracturing treatment ex	roed 350 000 gallons	Yes		p questions 2 ar	nd 3)
		submitted to the chemical of	=	Yes	= ' '	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:			
TODING RECORD.	OILG.	Jet At.	i aunei Al.		Yes No		
Date of First, Resumed	Production, SWD or ENF	HR. Producing Meth	nod:	Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bbls. Gas	Mcf Wat	er B	bls. C	as-Oil Ratio	Gravity
DISPOSITION Vented Sold	ON OF GAS:	N Open Hole	METHOD OF COMPL		mmingled	PRODUCTIO	DN INTERVAL:
	bmit ACO-18.)	Other (Specify)	(Submit		mit ACO-4)		

Form	ACO1 - Well Completion
Operator	Dvorachek, Harold A. dba Quest Development Co.
Well Name	Mannschreck 13
Doc ID	1310848

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	10	7	17	40	Portland	8	none
Production	5.875	2.875	7.6	700	OWC	90	none

Summary of Changes

Lease Name and Number: Mannschreck 13

API/Permit #: 15-031-23438-00-00

Doc ID: 1310848

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	Deanna Garrison	Karen Ritter

Approved Date 07/31/2013 07/05/2016

CasingAdd_Type_PctP none DF 1

CasingAdd_Type_PctP none DF_2

CasingPurposeOfString **Surface Casing** Surface PDF 1

CasingPurposeOfString **Production Casing** Production PDF_2

No Yes Electric Log Run?

Elogs_PDF Gamma Neutron

Fluid Mngmt - Fluid 1 100 Volume

Fracturing Question 1 No

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value	
If Alternate II Completion - Cement		700	
Circulated From If Alternate II Completion - Cement Circulated To		0	
If Alternate II Completion - Sacks of Cement		90	
LocationInfoLink	https://solar.kgs.ku.edu/ kcc/detail/locationInform ation.cfm?section=32&t	https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=32&t	
Perf_Depth_1	ation.cim?section=32&t	499-507 and 532-538	
Perf_Material_1		425 gal 15% HCL	
Perf_Record_1		499-507 and 532-538	
Perf_Shots_1		2	
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=11	//kcc/detail/operatorE ditDetail.cfm?docID=13	
Well Type	49370 WSW	10848 SWD	