

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1315781

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: \_\_\_\_\_

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto: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;"> <b>CASING RECORD</b> <input type="checkbox"/> New    <input type="checkbox"/> Used         </div> <div style="text-align: center;">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) _____					
Estimated Production Per 24 Hours	Oil	Bbbs.	Gas	Mcf	Water	Bbbs.	Gas-Oil Ratio	Gravity

<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 <i>(Specify)</i> _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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Form	ACO1 - Well Completion
Operator	Lakeshore Operating, LLC
Well Name	STURDIVAN 3 LO-46
Doc ID	1315781

#### 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	9.875	7	17	40	Portland	10	
Production	5.875	2.875	6.5	1085	Poz Blend	133	



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

6183  
6084

TICKET NUMBER 50147  
LOCATION Oxtawa Ks  
FOREMAN Fred Maden

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

Invoice # 808071

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-13-16	4807	Stuydivan # LQ. 46	NW 34	23	16	WO
CUSTOMER <u>Lakeshore Operating LLC</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>340 So. Laura</u>			712 Fred Mad			
CITY <u>Wichita</u>			467 Kai Cor			
STATE <u>KS</u>			FF539 Kai Det			
ZIP CODE <u>67211</u>			804 Mick Haa			

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1092 CASING SIZE & WEIGHT 27 1/2 EUE  
CASING DEPTH 10850 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/vsk \_\_\_\_\_ CEMENT LEFT IN CASING 2 1/2' Plug  
DISPLACEMENT 6.3 BBL DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4.3 PM

REMARKS: Hold Safety mixing. Establish Circulation. Mix & Pump  
100' Gel Flush. Mix & Pump 133 SKS Poz Blend II A Cement  
2 1/2" Gel 5" Kal Seal 1" Phenol Seal / SK. Cement to Surface. Flush  
pump & lines clean. Displace 2 1/2" Rubber Plug to casing TO.  
Pressure to 800# PSI. Release pressure to set float  
Value. Shut in Casing.

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	467	
CE0002	40	MILEAGE	467	
CE0711	M. minimum	Ten Miles Delivery	804	
WB0658	4 hrs	80 BBL Vac. Truck	369	
		Sub Total		
		less 47%		
1137 CC5965	133 SKS	Poz Blend II A Cement		
CC 6077	329 #	Bentonite Gel		
CC 6077	165 #	Kal Seal		
CC 6079	133 #	Phenol Seal		
CP5176	1	2 1/2" Rubber plug		
		Sub Total		
		less 47%		
				7.5%

Rev'd 3/73

CEMENT  
TOTAL

AUTHORIZATION \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

Jackman Oilfield Services  
1 West Mulberry St.  
Colony, KS 66015  
620-852-3350

WELL LOG  
Lakeshore Operating, LLC  
Sturdivan 3 LO-46

July 8, 2016

<u>Thickness</u> <u>of Strata</u>	<u>Formation</u>	<u>Total</u>	
3.00	Soil	3.00	
6.00	Clay	9.00	
6.00	Lime	15.00	
7.00	Sand stone	22.00	
15.00	Shale	37.00	
5.00	Lime	42.00	
134.00	Shale	176.00	
23.00	Lime	199.00	
24.00	Sand stone	223.00	
51.00	Lime	274.00	
24.00	Sand stone	298.00	
186.00	Lime	484.00	
15.00	Shale	499.00	
149.00	Lime	648.00	
207.00	Shale	855.00	
4.00	Lime	859.00	
66.00	Shale	925.00	
8.00	Lime	933.00	
19.00	Shale	952.00	
2.00	Lime	954.00	
24.00	Shale	978.00	
20.00	Lime	998.00	
5.00	Shale	1,003.00	
1.00	Lime	1,004.00	
4.00	Oil sand	1,008.00	
35.00	Shale	1,043.00	
3.00	Broken sand	1,046.00	
6.00	Oil sand	1,052.00	
1.00	Gray shale	1,053.00	
6.00	Oil sand	1,059.00	
33.00	Shale	1,092.00	TD

Drilled a 9 7/8" hole to 39'7"

Drilled a 5 7/8" hole to 1092'

Set 40' of 7" surface casing cemented with 10 sacks of portland cement

Ran 1085' of 2 7/8"

No cores

No seating nipple

Cemented on 7/13/16

Sturdivan 3 LO-46