

Confidentiality Requested:

Yes No

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1316420

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:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □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:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West
Recompletion Date		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** 

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



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:  Perforate  Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used		Type and P	ercent Additives	
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		N RECORD - Bridge Plug ootage of Each Interval Per			cture, Shot, Cement		d 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	SM Oil & Gas, Inc.
Well Name	FULSOM B 3 INJ
Doc ID	1316420

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	12	8.625	20	49	Portland	14	0
Production	6.75	4.5	11.6	2103	POZ/OWC		6% GEL, 175# Phenoseal

## SM Oil & Gas, Inc. P. O. Box 189 Skiatook, Oklahoma 74070

620-725-3200

September 15, 2016

Kansas Corporation Commission Conservation Division 266 N. Main Street – Suite #220 Wichita, Kansas 67202-1513

Re: Fulsom "B" #3 INJ 15-019-27540-00-00 Cement Usage ACO-1

To Whom It May Concern:

SM Oil & Gas, Inc. buys quantities of Portland Type I cement, which comes on pallets of 35 sacks per pallet, for the companies usage. In this case, the required 14 sacks of cement is mixed by our own drilling rig personnel and is used to properly install the surface casing.

An invoice showing the bulk quantity of cement is available if needed.

- r Cal

Thank you,

Thomas H. Oast Area Manager 810 E 7<sup>™</sup> PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report

Ticket No. 2793

Foreman Russell macky

Camp EUTEKA

Date Cust. ID	Lease & Well Number	or	Section	Township	Range	County	State
	Lease & Well Number	51	000000			10	
3-16 1180	Folsom B3		J.			Unit#	K≤   Driver
stomer		Safety Meeting	Unit #	Dri		Offit #	DINCI
S m Dil +	GAS INC.	em	110	R			
illing Address		AIMM	113	Sie			
P.O. Box 189		AB	140	AE	3		
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5Kiatook_			L	0 - 21		•	
b Type LIS	Hole Depth 2106	7	Slurry Vol	80 001	Tut	oing	
	Holo Sizo 6 3/4	1	Slurry Wt1	3.2 14	Dri	Il Pipe	
-in- Cino 0 1AH 4 1/2	Cement Left in Casing	30	Water Gal/Sk			ner	
nlacement 3000	Displacement PSI	7	Bump Plug to			M 4 BP	
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Code Qty or Unit	Description of Product of	or Services C	.allel In by	2061	Offic	11100	
5-102 1	Pump Charge					50.00	1050.00
-107 30	Mileage	por equalication (Calabida Mariana Mar			2	.95	118.50
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C-204 175 s	& 50/50 Pozmix	ComenT			11.	and have	
			F.		- I The second s	25	1968.75
49	(-e) = 6%				. 2	0	180.00
-20b 900 F	Gel = 6%  Phenosent 1 # pe				. 2	.5	180.00
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-20b 900 # -20B 175 # -202 100 5	Phenosent 1# Pe	MsK			1.2	.5	180.00
-20b 900 # -20B 175 # -20B 100 5 -20B 100 #	Phenosent 1# pr	MsK			. 2 1-3 19.	.5 .5 .25	180.00 218.15 1915.00 125.00
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