



1319055

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  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				

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 <i>(Amount and Kind of Material Used)</i>	Depth

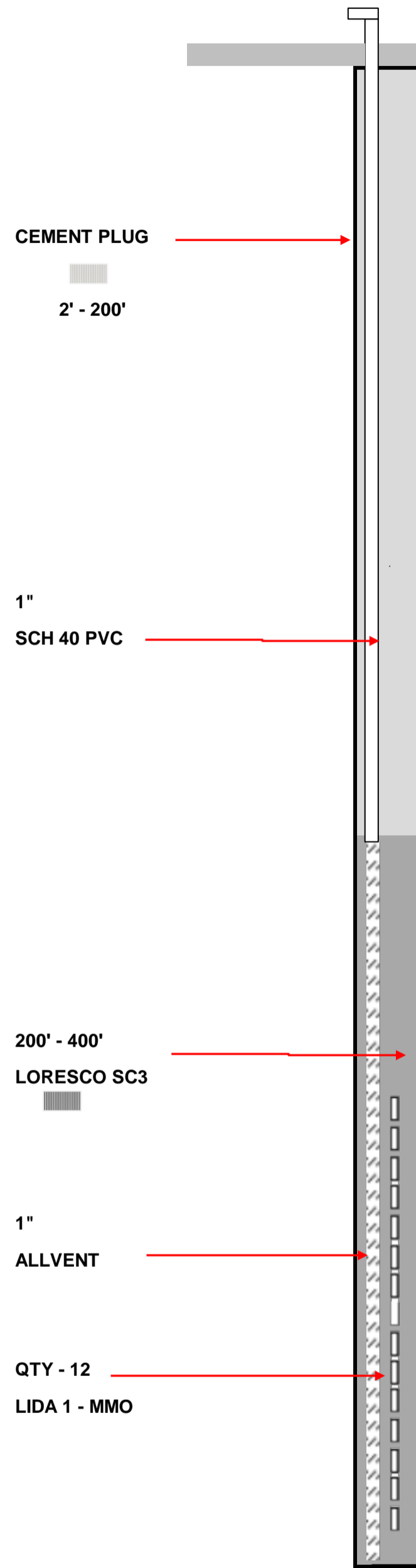
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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DEPTH	DRILLING LOG - SOIL COMPOSITION
0	CALICHE
10	CALICHE
20	CALICHE
30	CALICHE
40	SAND
50	SAND
60	CALICHE
70	CALICHE
80	SAND
90	SAND
100	CALICHE
110	SHALE/GREY CLAY
120	SHALE/GREY CLAY
130	SHALE/GREY CLAY
140	SHALE/GREY CLAY
150	SHALE/GREY CLAY
160	SHALE/GREY CLAY
170	SHALE/GREY CLAY
180	SHALE/GREY CLAY
190	SHALE/GREY CLAY
200	SHALE/GREY CLAY
210	SHALE/GREY CLAY
220	SHALE/GREY CLAY
230	SHALE/GREY CLAY
240	SHALE/GREY CLAY
250	SHALE/GREY CLAY
260	SHALE/GREY CLAY
270	SHALE/GREY CLAY
280	SHALE/GREY CLAY
290	SHALE/GREY CLAY
300	SHALE/GREY CLAY
310	SHALE/GREY CLAY
320	SHALE/GREY CLAY
330	SHALE/GREY CLAY
340	SHALE/GREY CLAY
350	SHALE/GREY CLAY
360	SHALE/GREY CLAY
370	SHALE/GREY CLAY
380	SHALE/GREY CLAY
390	SHALE/GREY CLAY
400	SHALE/GREY CLAY

**CATHODIC PROTECTION WELL LOG/COMPLETION REPORT**



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CLIENT: MAGELLAN MIDSTREAM  
DATE: 05/14/2016  
PIPELINE: SADDLEHORN 20" CRUDE PIPELINE  
LOCATION: CP 10 - LANE STATION  
COUNTY: LANE  
GPS COORDINATES: 38.481800° -100.507024°  
CORROSION TECH:  
API FILE# 15-101-22571-00-00