

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1323939

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 East West				
Address 2:			Feet 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 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:	W	ell #:		
New Well Re-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 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: Depth Top Bottom		Type of Cement # Sacks Used		Type and Percent 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	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)			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	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	J-V Oil, LLC			
Well Name	WIGGANS 3-H			
Doc ID	1323939			

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	12	8.625	18	20	portland	5	0
Production	5.875	2.875	7	1044	portland	135	0

\$1.60.00 10 10 mm \$1,580.51 77 0000 N PLANTITRANSAETHON # Carrier to the defended by the interest, consistely settle from typicable took, incidentary own power, the 16 delety of sentiation of themsource in allebands and a sential of the interest in the sential of the interest of allebands reaching, of the wing, buildings in the sential of the vice and a sential reaching of the interest of the order and interest of delety the interest of the interest of the interest of the interest of delety the interest of the interest of the interest of the interest of delety the interest of the interest of the interest of the interest of delety of the interest of +1553 MOTOE NY BIGNAUGE BELOW INDICATES THAT HAVE PEST THE LIGHT WARRING WITCH A SESPENDIAL FOR THE FIGURE CHIEF OF THE PERIOD WITCH A SESPENDIAL FOR THE FIGURE CHIEF OF TH TICKET WINGER Excessive Water is Detrimental to Concrete Performance Hat Added By Request/Authorized By AUDITIONAL CHARGE 1 ADDITIONAL CHARGE? GRAND TOTAL 4.55.00 UNITERIDE \$ 7 th , O/O #30°00 100 m TEME ALLOWED 0,00 DELAY TONE ទី (1) (2) (3) DELAY EXPLANATION CYLNDER JEST TAKEN CACHELO COSTROLO STATING AND HAUDING L STORTOUR DRIEMENT TRECOLLABOROUSE CLAMBATCH BROKEDBAN LADOD WATEN 13,50 SPCKS LEST STATE CHECKED CATANTAR CHARACT · 真的 齊 H ASSESSED TO SERVICE OF THE PERSON NAMED IN COLUMN TO SERVICE OF THE PERSON N FINISH UNIDADING START UNLOADING No Pasconado de Reinhe Agração e Cadi Canh. De Cam Mendo utana Mistr et The Materia e Cadrista. UNECACAGE TIME The rectorship (portion is pay in mass, include, recoverable abouts) that include in massed in mission of some most. A \$30 Service Chargo and Liver of the Case Chronic and by sufficient on the reliesed Chiefe. Messentian to a state of the st 西京日本の大学社会 MIN SOUTH DO WENNER ARPIVED JOS OIALAT KOB Phone. (620) 365-5588 write 10 control of co 802 N. Industrial Rd. lola, Kansas 66749 P.O. Box 664 11.40 OF REPUBLICATION OF PARTY しる。 TOTAL-ROLING TRIP LEFT PLANT CHANG

3H Wiggans

20 ft - 8-5/8 pipe, set 5 sacks portland

1044 ft – 2-7/8 pipe, set 135 sacks portland