

Confidentiality Requested:

Yes  No

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION**

Form ACO-1

January 2018

**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

Gas  DH  EOR

OG  GSW

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 EOR  Conv. to SWD

Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: \_\_\_\_\_

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  Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

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](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 <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 Geologist Report / Mud Logs <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				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
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)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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# CEMENTING LOG

STAGE NO. \_\_\_\_\_

Date 12-5-16 District Oakley Ticket No. 68228  
 Company Boreyco Rig Boredcot  
 Lease Love Well No. 1-18  
 County Sfeator State KS  
 Location 18 30 40 Field \_\_\_\_\_  
Johnson 85 2E 365 winto

CASING DATA: Conductor  PTA  Squeeze  Misc   
 Surface  Intermediate  Production  Liner   
 Size 8 5/8 Type New Weight \_\_\_\_\_ Collar \_\_\_\_\_

Casing Depths: Top 100 Bottom 1588'

Drill Pipe: Size \_\_\_\_\_ Weight \_\_\_\_\_ Collars \_\_\_\_\_  
 Open Hole: Size 12 1/4 T.D. 1715 ft. P.B. to \_\_\_\_\_ ft.

CAPACITY FACTORS:  
 Casing: Bbbls/Lin. ft. 0.0637 Lin. ft./Bbl. \_\_\_\_\_  
 Open Holes: Bbbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_  
 Drill Pipe: Bbbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_  
 Annulus: Bbbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_  
 Perforations: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Amt. \_\_\_\_\_

CEMENT DATA:  
 Spacer Type: \_\_\_\_\_  
 Amt. \_\_\_\_\_ Skys Yield \_\_\_\_\_ ft<sup>3</sup>/sk Density \_\_\_\_\_ PPG

LEAD: Pump Time \_\_\_\_\_ hrs. Type W/35 680gal  
3500 1400000 Excess \_\_\_\_\_  
 Amt. 580 Skys Yield 2.30 ft<sup>3</sup>/sk Density 14.00 PPG

TAIL: Pump Time \_\_\_\_\_ hrs. Type Com 3%cc  
 Excess \_\_\_\_\_  
 Amt. 150 Skys Yield 1.33 ft<sup>3</sup>/sk Density 14.00 PPG

WATER: Lead \_\_\_\_\_ gals/sk Tail \_\_\_\_\_ gals/sk Total \_\_\_\_\_ Bbbls.

Pump Trucks Used SLL-281  
 Bulk Equip. 818  
891

Float Equip: Manufacturer Weatherford  
 Shoe: Type Guide shoe Depth 1907  
 Float: Type AFu Insert Depth 1121.80  
 Centralizers: Quantity 3 Plugs Top \_\_\_\_\_ Btm. \_\_\_\_\_  
 Stage Collars \_\_\_\_\_  
 Special Equip. 98102  
 Disp. Fluid Type Water Amt. 1000 Bbbls. Weight \_\_\_\_\_ PPG  
 Mud Type \_\_\_\_\_ Weight \_\_\_\_\_ PPG

COMPANY REPRESENTATIVE \_\_\_\_\_

CEMENTER Andrew

TIME AM/PM	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbbls Min.	
<u>5:30</u>						<u>start mixing cement</u> <u>Cement mixed</u> <u>Release plug</u> <u>start Displacement</u>
				<u>10</u>		
				<u>10</u>		
				<u>10</u>		
				<u>10</u>		
				<u>10</u>		
	<u>500</u>			<u>10</u>		
	<u>500</u>			<u>10</u>		
	<u>800</u>			<u>9</u>		
<u>6:30</u>						<u>plug landed</u> <u>float held</u>



# CEMENTING LOG

STAGE NO. \_\_\_\_\_

Date 12/1/16 District Orkley Ticket No. 6898  
 Company Burx Co Rig Burx 1  
 Lease Love Well No. 1-8  
 County Stanley State WV  
 Location \_\_\_\_\_ Field \_\_\_\_\_

CEMENT DATA:  
 Spacer Type: \_\_\_\_\_  
 Amt. \_\_\_\_\_ Sks Yield \_\_\_\_\_ ft<sup>3</sup>/sk Density \_\_\_\_\_ PPG \_\_\_\_\_

LEAD: Pump Time \_\_\_\_\_ hrs. Type 60/40 400gal  
 Excess \_\_\_\_\_

Amt. 120 Sks Yield 142 ft<sup>3</sup>/sk Density 13.2 PPG \_\_\_\_\_

TAIL: Pump Time \_\_\_\_\_ hrs. Type \_\_\_\_\_  
 Excess \_\_\_\_\_

Amt. \_\_\_\_\_ Sks Yield \_\_\_\_\_ ft<sup>3</sup>/sk Density \_\_\_\_\_ PPG \_\_\_\_\_

WATER: Lead 69 gals/sk Tail \_\_\_\_\_ gals/sk Total \_\_\_\_\_ Bbls. \_\_\_\_\_

Pump Trucks Used 566 281  
 Bulk Equip. 891 281

Float Equip: Manufacturer \_\_\_\_\_

Shoe: Type \_\_\_\_\_ Depth \_\_\_\_\_

Float: Type \_\_\_\_\_ Depth \_\_\_\_\_

Centralizers: Quantity \_\_\_\_\_ Plugs Top \_\_\_\_\_ Btm. \_\_\_\_\_

Stage Collars \_\_\_\_\_

Special Equip. \_\_\_\_\_

Disp. Fluid Type 160 Amt. \_\_\_\_\_ Bbls. Weight \_\_\_\_\_ PPG \_\_\_\_\_

Mud Type \_\_\_\_\_ Weight \_\_\_\_\_ PPG \_\_\_\_\_

CASING DATA: Conductor  PTA  Squeeze  Misc   
 Surface  Intermediate  Production  Liner   
 Size 8.50 Type \_\_\_\_\_ Weight \_\_\_\_\_ Collar \_\_\_\_\_

Casing Depths: Top \_\_\_\_\_ Bottom \_\_\_\_\_

Drill Pipe: Size 4 1/2 Weight \_\_\_\_\_ Collars \_\_\_\_\_

Open Hole: Size 7 1/2 T.D. \_\_\_\_\_ ft. P.B. to \_\_\_\_\_ ft.

**CAPACITY FACTORS:**

Casing: Bbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_

Open Holes: Bbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_

Drill Pipe: Bbls/Lin. ft. 0.1422 Lin. ft./Bbl. \_\_\_\_\_

Annulus: Bbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_

Bbls/Lin. ft. \_\_\_\_\_ Lin. ft./Bbl. \_\_\_\_\_

Perforations: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Amt. \_\_\_\_\_

COMPANY REPRESENTATIVE \_\_\_\_\_ CEMENTER BJL

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
						in location, set plug, set up
						Pump spaces
					8.4	max 50 SK @ 1610'
					8.4	max 50 SK @ 650'
					7.0	max 20 SK @ 60'
					5.0	max 30 SK M.H.
					3.0	max 20 SK M.H.

FINAL DISP. PRESS: \_\_\_\_\_ PSI BUMP PLUG TO \_\_\_\_\_ PSI BLEEDBACK \_\_\_\_\_ BBLs. THANK YOU