KOLAR Document ID: 1358842

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 #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
Oil ☐ WSW ☐ SWD	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
☐ OG ☐ GSW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:  Dual Completion Permit #:	Dewatering method used:
Dual Completion Permit #:  SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of haid disposal if hadied offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
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 Drill Stem Tests Received								
Geologist Report / Mud Logs Received								
UIC Distribution								
ALT I III Approved by: Date:								

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#### Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	pS. F	R [	East	West	County:					
open and closed and flow rates if	, flowing and sh gas to surface t ty Log, Final Lo	nut-in pressurest, along wit	es, whe h final c ain Geo	ther shut-in pre hart(s). Attach physical Data a	essure reached extra sheet if r and Final Electr	station more : ric Loc	level, hydrosta space is needed	tic pressures, d.	bottom hole tempe	val tested, time tool rature, fluid recovery,  Digital electronic log
Drill Stem Tests (Attach Addit			Ye	es No		Lo	og Formatio	n (Top), Deptl	n and Datum	Sample
Samples Sent to	Geological Sur	vey	Ye	es 🗌 No		Name	)		Тор	Datum
Cores Taken Electric Log Run Geologist Repor List All E. Logs F	t / Mud Logs		Y€  Y€	es No						
			Repo		RECORD [	Nev	w Used rmediate, producti	on. etc.		
Purpose of St		ze Hole Orilled	Siz	e Casing (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	OF MENTING /					
Purpose:	[	Depth	Typo	of Cement	# Sacks Use		EEZE RECORD	Typo a	nd Percent Additives	
Perforate Protect Ca Plug Back	Top	Bottom	туре	or cement	# Sacks Use	,u		туре а	ia reicent Additives	
Plug Off Z										
Did you perform     Does the volum     Was the hydraul	e of the total base	fluid of the hyd	draulic fra	cturing treatmen		•	Yes ns? Yes	No (If No	, skip questions 2 an , skip question 3) , fill out Page Three o	,
Date of first Produ	ction/Injection or	Resumed Produ	uction/	Producing Meth			Coolift 0	thor (Fundain)		
Estimated Produc	otion	Oil Bb	le.	Flowing Gas	Pumping  Mcf	Wate		ther <i>(Explain)</i> bls.	Gas-Oil Ratio	Gravity
Per 24 Hours		Oli Bb	15.	Gas	IVICI	vvale	ı Di	JIS.	Gas-Oil Hallo	Gravity
DISPO	OSITION OF GAS	S:		N	METHOD OF CO	MPLE.	TION:		PRODUCTIO	N INTERVAL:
Vented	Sold Use	d on Lease		Open Hole				nmingled	Тор	Bottom
(If vente	ed, Submit ACO-18	.)			(5	SUDITIIL I	ACO-5) (Subi	mit ACO-4)		
Shots Per Foot	Perforation Top	Perforation Bottom	on	Bridge Plug Type	Bridge Plug Set At		Acid,		Cementing Squeeze Kind of Material Used)	Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Cherokee Wells LLC
Well Name	DART ET AL 5-21
Doc ID	1358842

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	11	8.625	26	44	Portland	10	N/A
Production	6.75	4.5	9.5	1203	ThixoBlen d II	150	N/A



M.O.K.A.T. DRILLING Office Phone: (620) 879-5377



P.O. Box 590 Caney, KS 67333

***************************************						e:(105/								
CHEBOKEE MELLS II C	Well No.		Lease		Loc.		1/4 1	4 .1		Sec.	Twp.	Rge, 1	16	
CHEROREE WELLS LLC	5-21		DAI	RT ET AL						21		/ 1	16	
	County	-	State		Type/Well		Depth	Ho	urs	Date Start	ed D	ate Complet	led	
	WILS	ON		KS			1212		1	5-22-1	17	5-24-17	,	
Casing Used			E	it Record	d				Cori	ng Recor	d			
44'	8 5/8"	Bit No.	Туре	size	From	То	Bit No.	type	Size	From	То	% Rec	٤.	
Cement Used														
				6 3/4"	1					1				
Rig No.														
Hammer No.														
-				ŀ						- 1	ļ		,	
	Cement Used Rig No.	CHEROKEE WELLS LLC  S-21  County  Wills  Casing Used 44' 8 5/8"  Cement Used  Rig No.	CHEROKEE WELLS LLC  S-21  County  WILSON  Casing Used 44' 8 5/8"  Bit No.  Rig No.	CHEROKEE WELLS LLC  Well No.  5-21  County  WILSON  Casing Used  44' 8 5/8"  Bit No.  Type  Cement Used  Rig No.	CHEROKEE WELLS LLC  Well No.  5-21  DART ET AL  County  WILSON  KS  Casing Used 44' 8 5/8"  Bit No.  Type size  6 3/4"  Rig No.	CHEROKEE WELLS LLC         Well No.         Lease         Loc.         1/4         1/4         1/4         1/4         1/4         Sec.         21           County         State         Type/Well         Depth         Hours         Date Start           WILSON         KS         Bit Record         Coring Record           44' 8 5/8"         Bit No.         Type         size         From         To         Bit No.         type         Size         From           Cement Used         Rig No.         Rig	CHEROKEE WELLS LLC	CHEROKEE WELLS LLC						

## **Formation Record**

From	То	Formation	From		Formation	From	То	Formation	From	To	Formation
0	6	OVERBURDEN	750	769	LIME		1122	SAND			
6	32	LIME	769	800	SHALE	1122	1137	SANDY SHALE		_	
32	155	SHALE	800	815	LIME (OIL ODOR)	1137		SAND			
155	173	LIME	815	824	SHALE		1200	SHALE			
173	206	SHALE	824	829	LIME	1200	1212	LIME MISS			
206	250	LIME	829	831	COAL						
250	267	SHALE	831	851	SAND (OIL ODOR)			T.D. 1212'			
267	280	SAND (WET)	851	905	SHALE						
280	306	SHALE	905	907	COAL						
306	315	LIME	907	920	SANDY SHALE						
315	350	SHALE	920	922	COAL						
350	415	LIME	922	928	SHALE						
415	418	SHALE	928	933	SAND (OIL ODOR)						
718	426	BLK SHALE	933	1958	SHALE						1
-426	434	LIME	958	959	COAL						
434	450	SANDY SHALE	959	976	SHALE						
450	465	LIME	976	978	COAL						
465	470	SHALE	978	1016	SHALE						
470	475	LIME (OIL ODOR)	1016	1018	COAL						
475	476	SHALE	1018		SHALE			· · · · · · · · · · · · · · · · · · ·			
476	495	LIME (OIL ODOR)	1027	1028	COAL						
495	631	SHALE	1028	1032	SHALE						
631	642	LIME	1032	1043	SANDY SHALE					· · · · · ·	
642	661	SANDY SHALE	1043		SAND LIGHT ODOR						
661	665	SHALE	1047	1057	SHALE						
665	671	SANDY SHALE	1057	1068	SAND						
671	690	SHALE	1068		SANDY SHALE						
	745	SAND (WATER)	1075		SAND						
745	747	SHALE		1096	SHALE						
747	749	COAL	1096	1107	SAND						
749	750	SHALE	1107	1117	SHALE						



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

XET NUMBER 54101 ECCATION OH awa KS FOREMAN Fred Mader

DATE\_

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

DATE	CUSTOMER#	WE	LL NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
5-24-17	⊋ ୫90	Dart	etal 5	31	21	27	16	WL
CUSTOMER		Α	1		F			-5-
Doine	stic Fu	evas Pa	rthers		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	_	04			7/2	Fremad		
P. O.	Box 29				495	HorBec		
CITY		STATE	ZIP CODE		503	Ke. Dex		
Fredon	i. a	KS	66736					
JOB TYPE <u> 🛦 🗠</u>	, g 5+ 17 mg	HOLE SIZE	63/4	HOLE DEPTH	1212	CASING SIZE & W	EIGHT 4/2	
CASING DEPTH	12025	DRILL PIPE_	<u></u>	TUBING			OTHER	
SLURRY WEIGH		SLURRY VOL		WATER gal/s	k	CEMENT LEFT in	CASING <u>4/2</u>	"Plug
DISPLACEMENT	r <u> 19,133</u> 0	DISPLACEME	NT PSI	MIX PSI		RATE 5 BPAN	<u>.                                    </u>	
REMARKS: /-/c	Id Safe	& mer!	ra, Esta	blish.	ound ra	De. Mix	700	Cerl
Flus	4. 63	ML. P.	NAD 5.6	3BC #	resh W	ato Mi	X 100°	¥
Caus	tic Sa	da Bos	da w/1	OBBL	<u> </u>	valor. F	lush ,	e 1
15 BB	BL Fres	h war	ler Mi	1 4 Dus	_	SKS Th	110 II (	ower t
W/5	# 1d & ( Se	al 4	12# Phe	10 Sal	JSK. FI	ush som	24 / Tuo 1	
مام	· L	7.51/lac	e 45"/	lug to	JA PAS	sure to	SOO# PS1	
		V		J		6		
('usyon	er Supplie	d wat	5 V			<i>P</i> a (		
	<i>r r</i>					Tud>	Moder	
		<u>رىقىنىمە</u> ۋىدىدا دىمىدە دە جىپ	الك <del>ف الد</del> اخين _الاباحة إلى <del>حيثيناها</del>	Company of the Company of the Company		1 1 -		

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUC	СТ	UNIT PRICE	TOTAL
E0450	<u> </u>	PUMP CHARGE	4195	150000	
Z0057	65mi	MILEAGE	495	46425	
EOTIL	Min. mora	Ton Miles Delivery	503	66000	
		<b>*</b> *			
C5861	150 sks	Thixo Bland II Coment		4050=	-
c 5965	2004	Bondon, te al		6000	
C 6077	750#	Kol Seal		3>5 <u>0</u> 0	
(6079	75#	Pheno Seal		10125	
C 6151	100 #	Caustic Soda		20000	
P 8178	1	Caustic Soda U'z" Rubber Plug		75€°	
1- 0707			6.50	SALES TAX	
vin 3737	1/1/1	•		ESTIMATED TOTAL	

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.

TITLE