

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1362259  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

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       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- 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 ENHR       Conv. to SWD
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - \_\_\_\_\_

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
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

1362259

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> _____				
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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# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

27 No. 1559

Date	3-25-17	Sec.	19	Twp.	9	Range	20	County	Ellis	State	KS	On Location		Finish	7:30 PM
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Location *Palco Ballpark 1 1/2 W S into*

Lease	<i>Balthazor</i>	Well No.	<i>3-19</i>	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	<i>Discovery 3</i>				
Type Job	<i>Surface</i>				
Hole Size	<i>12 1/4</i>	T.D.	<i>221'</i>	Charge To	<i>American Oil</i>
Csg.	<i>8 5/8</i>	Depth	<i>221'</i>	Street	
Tbg. Size		Depth		City	State
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.	<i>20'</i>	Shoe Joint		Cement Amount Ordered	<i>150 sks 80/20 3% cc 2% gel</i>

Meas Line Displace *12 3/4 bbl*

EQUIPMENT				Common	<i>120</i>
Pumptrk	<i>5</i>	No. Cementer Helper	<i>Brett</i>	Poz. Mix	<i>30</i>
Bulktrk	<i>14</i>	No. Driver	<i>Doug</i>	Gel.	<i>3</i>
Bulktrk		No. Driver		Calcium	<i>6</i>

JOB SERVICES & REMARKS		Hulls
Remarks:		Salt
Rat Hole		Flowseal
Mouse Hole		Kol-Seal
Centralizers		Mud CLR 48
Baskets		CFL-117 or CD110 CAF 38
D/V or Port Collar		Sand

*Ran 221' 8 5/8  
Est circulation*

Handling *159*  
Mileage

FLOAT EQUIPMENT	
Cement	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down

*Circulated*

Pumptrk Charge	<i>Surface</i>
Mileage	<i>30</i>

Signature <i>John J. Smith</i>	Tax
	Discount
	Total Charge

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Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 134

Date	3-30-17	Sec.	19	Twp.	9	Range	20	County	Rooks	State	KS	On Location		Finish	9:30 AM
								Location	Palo Ball Box 1/2w Sinto						

Lease	Balthazor	Well No.	3-19	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.										
Contractor	Discovery #3			Type Job	DU Job	Bottom	Charge To	American Oil							
Hole Size	7 7/8	T.D.	3875	Depth	3873	Street									
Csg.	5 1/2	Depth	3873	City	State										
Tbg. Size				Depth	1726	The above was done to satisfaction and supervision of owner agent or contractor.									
Tool	DU Tool #52	Shoe Joint	24.10	Cement Amount Ordered	175 lbm 10% Salt 1/4# F6										
Cement Left in Csg.	24.10	Displace	91 1/2 BBL	5 1/2 Gilsenite	500 gal mud	Flush									

**EQUIPMENT**

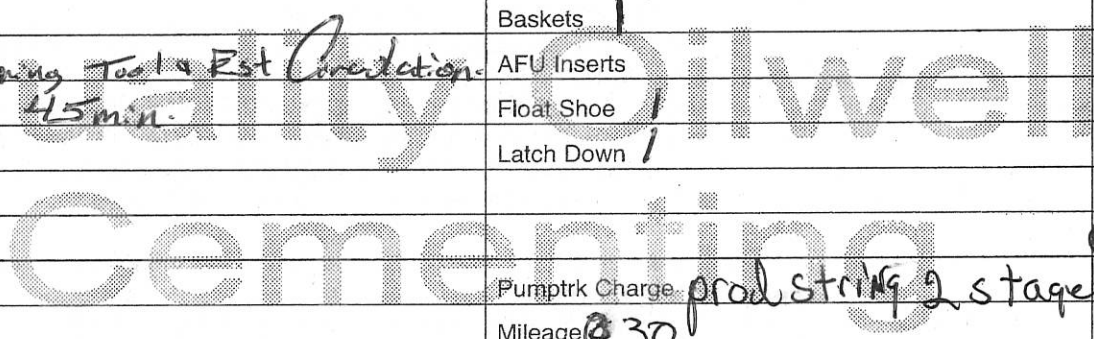
Pumptrk	5 No.	Cementer	Craig	Common	175
Bulktrk	15 No.	Helper	David	Poz. Mix	
Bulktrk	21 No.	Driver	David	Gel.	
Bulktrk	21 No.	Driver	David	Calcium	

**JOB SERVICES & REMARKS**

Remarks:	Hulls
Rat Hole	Salt 15
Mouse Hole	Flowseal 43#
Centralizers	Kol-Seal 825#
Baskets	Mud CLR 48 500 gal
DV or Port Collar	CFL-117 or CD110 CAF 38
5 1/2 gpx @ 3873 Ball Acc @ 3850	Sand
Est. Circulation Pump 500 gal mud clear	Handling 198
Cement 5 1/2 with 175 sk	Mileage
Clear lines & Displace Plug	
Plug land @ 1500#	
Drop opening Tool & Est Circulation	
Circulate 45 min.	

**FLOAT EQUIPMENT**

Guide Shoe	DU Tool
Centralizer	7
Baskets	1
AFU Inserts	
Float Shoe	1
Latch Down	1



Pumptrk Charge	prod string 2 stage	Tax	
Mileage	@ 30	Discount	
Signature	John D. Schler	Total Charge	

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Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 135

Date	3-30-17	Sec.	19	Twp.	9	Range	20	County	Rooks	State	KS	On Location		Finish	11:15 AM
								Location							
								Palco Ball Park 1/2 W Sinto							

Lease	Balthazor	Well No.	3-19	Owner	
Contractor	Discovery #3			To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Type Job	DV JOB	Top Stage		Charge To American Oil	
Hole Size	7 7/8	T.D.	3875		
Csg.	5 1/2 15.50	Depth	3873	Street	
Tbg. Size		Depth		City State	
Tool	DV Tool	Depth	1767	The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.		Shoe Joint		Cement Amount Ordered 350 80/20 QMDC 1/4 # FLO	
Meas Line		Displace	42 BCL		

EQUIPMENT				Common	350 80/20
Pumptrk	5	No.	Cement Helper Craig	Poz. Mix	
Bulktrk		No.	Driver Brett	Gel.	
Bulktrk	21	No.	Driver David	Calcium	

JOB SERVICES & REMARKS				Hulls	
Remarks:				Salt	
Rat Hole 30 SK				Flowseal	87#
Mouse Hole 15 SK				Kol-Seal	
Centralizers				Mud CLR 48	
Baskets				CFL-117 or CD110 CAF 38	
D/V or Port Collar				Sand	

Plug Rathole mouse hole.  
Cement 5 1/2 with 305 SK  
Displace Plug.  
Plug Jankold 1500 SK  
Cement Circulated!

FLOAT EQUIPMENT				Guide Shoe	
				Centralizer	
				Baskets	
				AFU Inserts	
				Float Shoe	
				Latch Down	

				Pumptrk Charge	Procl String
				Mileage	30

				Tax	
				Discount	
				Total Charge	
Signature					

Top Stage



305 SK to P.H