



Confidentiality Requested:  
 Yes  No

**KANSAS CORPORATION COMMISSION 1367357**  
**OIL & GAS CONSERVATION DIVISION**

Form ACO-1  
 November 2016  
**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         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: \_\_\_\_\_

1367357

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 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

<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> <i>(Submit ACO-4)</i>	<b>PRODUCTION INTERVAL:</b> 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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Dale Jackson Production Co.  
Box 266, Mound City, Ks 66056



Cell # 620-363-2683

Office # 913-795-2991

Surface: 20' of 6"	Cemented: 5 Sacks	Hole Size: 8 1/2"
Longstring: 714' of 2 7/8" 8 round pipe	Cemented: 85 sacks	Hole Size: 5 5/8"

SN: -	Packer: -
Plugged: -	Bottom Plug:-

TD: 721'

Well

Log

Well #: 17W-17
Location: NE NW NW SW S24-T16-R21E
County: Miami
FSL: 2574
FEL: 4689
API#: 15-121-31364-00-00
Started: 9-6-17
Completed: 9-8-17

Lease:	Alva Schendel
Owner:	Bobcat Oilfield Services Inc
OPR #:	3895
Contractor:	DALE JACKSON PRODUCTION CO.
OPR #:	4339

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	74	500	Shale
5	7	Clay	9	509	Light Shale (Limey)
18	25	Lime	12	527	Light Shale
6	31	Black Shale	17	538	Shale
11	42	Lime	20	558	Shale (Limey)
6	48	Lime (Shaley)	7	565	Lime
20	68	Lime	8	573	Shale
4	72	Shale	1	574	Lime
3	75	Red Bed	17	591	Shale
19	94	Shale	2	593	Coal
15	109	Lime	3	596	Shale
6	115	Shale	2	598	Lime
1	116	Sand (water)	3	601	Shale (Limey)
8	124	Shale	3	604	Shale (Limey) (Oil sand strks) (poor bleed)
20	144	Sandy Shale	13	617	Shale
56	200	Shale	4	621	Lime
19	219	Lime	2	623	Coal
7	226	Shale	23	646	Shale (Limey)
2	228	Sandy Shale	5	651	Lime
7	235	Sand (water) (Limey)	13	664	Shale
16	251	Shale	1	665	Lime
7	258	Lime	4	669	Shale
4	262	Shale	2	671	Light Shale
4	266	Sand (water)	1	672	Light Shale (Oil sand strks) (poor bleed)
12	278	Shale	2	674	Oil Sand (very shaley) (fair Bleed)
6	284	Sandy Shale	1	675	Oil Sand (Shaley) (good bleed)
2	286	Lime	1.5	676.5	Sandy Shale (Oil sand strks) (Limey) (Poor bleed)
3	289	Shale	1.5	678	Oil Sand (very shaley) (good bleed)
9	298	Lime	1	679	Sandy Shale (Oil sand strks) (poor bleed)
21	319	Shale	12	691	Sandy Shale
26	345	Lime	TD	721	Shale
4	349	Shale			
2	351	Black Shale			
3	354	Shale			
20	374	Lime			
5	379	Black Shale			
3	382	Lime			
4	386	Shale			
5	391	Lime			SET SURFACE - 1:00 PM - 9/6/17
6	397	Shale			CALLED IN 11:00 PM - TALKED TO BROOKE
5	402	Shale (Limey)			LONGSTRING - 714' of 2 7/8" 8' ROUND PIPE
12	414	Shale			SET TIME 11:30 AM - 9/8/17
12	426	Sandy Shale			CALLED IN 10:33 AM - TALKED TO BROOKE