

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1368174
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

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: _____

1368174

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

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)</i> <i>(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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Dale Jackson Production C6
Box 266, Mound City, Ks 66056



Cell # 620-363-2683

Office # 913-795-2991

Surface: 20' of 6"	Cemented: 5 Sacks	Hole Size: 8 3/4"
Longstring: 724' of 2 7/8" 8 round pipe	Cemented: 85 sacks	Hole Size: 5 5/8"
SN: -	Packer: -	TD: 731
Plugged: -	Bottom Plug:-	
Lease:	Nutt	
Owner:	Bobcat Oilfield Services	
OPR #:	3895	
Contractor:	DALE JACKSON PRODUCTION CO.	
OPR #:	4339	

Well #: AW-3-17
Location: SE,SE,SE,SW S13-T16-R21E
County: Miami
FSL: 6
FEL: 2958
API#: 15-121-31355-00-00
Started: 9-13-17
Completed: 9-15-17

Log Well

TKN	BTM Depth	Formation	TKN	BTM Depth	Formation
2	2	Top Soil	3	516	Coal
6	8	Clay	23	539	Shale
4	12	Lime	10	549	Shale (Limey)
3	15	Black Shale	7	556	Lime
17	32	Lime	15	571	Shale (Limey)
4	36	Sand (Limey)	10	581	Shale
20	56	Lime	3	584	Coal
4	60	Shale	4	588	Shale
5	65	Red Bed	6	594	Lime
2	67	Shale	2	596	Shale (Limey) (Oil Sand strks) (poor bleed)
15	82	Sandy Shale	2	598	Oil Sand (very shaley) (fair bleed)
18	100	Lime	1	599	Shale (Oil sand strks) (poor bleed)
34	134	Sandy Shale	11	610	Shale
57	191	Shale	4	614	Lime
20	211	Lime	4	618	Black Shale
5	216	Shale	13	631	Shale (Limey)
10	226	Sandy Shale	2	633	Lime
15	241	Shale	9	642	Shale (Limey)
10	251	Lime	5	647	Shale
15	266	Shale	2	649	Coal
10	276	Sand (Limey) (water)	2	651	Lime
5	281	Shale	6	657	Shale
6	287	Lime	1	658	Lime
23	310	Shale	5	663	Shale (Limey)
25	335	Lime	7	670	Light Shale
6	341	Black Shale	4	674	Light Shale (Oil sand strks) (poor bleed)
5	346	Shale	5	679	Oil Sand (very shaley) (good bleed)
20	366	Lime	7	686	Shale (Oil sand strks) (fair Bleed)
5	371	Black Shale	TD	731	Shale
3	374	Lime			
3	377	Shale			
6	383	Lime			
14	397	Shale (Limey)			
10	407	Shale			
17	424	Sandy Shale			
62	486	Shale			
5	491	Light Sandy Shale (Limey)			
2	493	Light Shale (Oil show)			
3	496	Oil Sand (very shaley) (fair bleed)			SET SURFACE - 4:00 PM - 9/13/17
2	498	Light Sandy Shale (oder)			CALLED IN 12:43 PM - TALKED TO BROOKE
7	505	Light Sandy Shale			LONGSTRING - 724' of 2 7/8" 8" ROUND PIPE
6	511	Shale (Limey)			SET TIME 11:00 AM - 9/15/17
2	513	Shale			CALLED IN 11:18 AM - TALKED TO BROOKE