

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. 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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Form	ACO1 - Well Completion
Operator	John C Ginther Oil, LLC
Well Name	SCHAEFER 7
Doc ID	1366642

All Electric Logs Run

Compenseated Density Neutron
Micro
Dual Induction
Sonic



# GLOBAL OIL FIELD SERVICES, LLC

3034

REMIT TO 24 S. Lincoln  
Russell, KS 67665

SERVICE POINT: Russell, KS

DATE <u>7-19-17</u>	SEC. <u>17</u>	TWP. <u>N17E</u>	RANGE <u>16W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>4:15 PM</u>
LEASE <u>Source</u>	WELL #. <u>7</u>	LOCATION			COUNTY <u>Edwin</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (CIRCLE ONE)							

CONTRACTOR White Knight Drillers

TYPE OF JOB Production casing

HOLE SIZE 7 7/8 T.D. 3750

CASING SIZE 9 5/8 DEPTH 3731.04

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL INSECT + 10 PLUG DEPTH 2693.79

PRES. MAX. MINIMUM

MEAS. LINE SHOE JOINT 40.25

CEMENT LEFT IN CSG. 40.25

PERFS

DISPLACEMENT 88-90 BBL

OWNER

CEMENT AMOUNT ORDERED 330 5x 60/10 to 90 600  
150 5x 60 10/10 20/40

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE @

TOTAL

EQUIPMENT

PUMP TRUCK CEMENTER Beas

# 409 HELPER Cozy

BULK TRUCK

# 481 DRIVER Tom

BULK TRUCK

# 412 DRIVER Kris

REMARKS:

Run in casing, cement and plug to 3648,  
and cement to 3750, mix 200 5x 60/10  
150 5x 60, washed + launch and pump plug  
in 88 BBL H2O, cement DO circulation

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD 5/8 1150 @

TOTAL

CHARGE TO: James G. Ginter, Jr.

STREET 2719 E 5th St

CITY Hays STATE KS ZIP 67601

PLUG & FLOAT EQUIPMENT

2 BASKET @

5 CENTRALIZER @

1 AFU @

1 LOT PLUG @

TOTAL

Global Oil Field Services, LLC

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME \_\_\_\_\_

SIGNATURE [Signature]

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

# GLOBAL OIL FIELD SERVICES, LLC

3013

ATTN TO 24 S. Lincoln  
Russell, KS 67665

SERVICE POINT: Russell

DATE <u>7-14-17</u>	SEC. <u>17</u>	TWP. <u>14</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>NOON 1:30 PM</u>
LEASE <u>Schaefer</u>	WELL # <u>#7</u>	LOCATION <u>Hays</u>	<u>old 183 2 S. 1/2 W</u>	COUNTY <u>Ellis</u>	STATE <u>Kansas</u>		
OLD OR <u>NEW</u> (CIRCLE ONE)		"VAN INTO"					

CONTRACTOR WHITE KNIGHT DRUG. Rig # "TERRY" OWNER

TYPE OF JOB \_\_\_\_\_

HOLE SIZE 12 1/4 T.D. 602

CASING SIZE 8 5/8 DEPTH 598

TUBING SIZE 2 3/8 DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX. \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 20'

PERFS \_\_\_\_\_

DISPLACEMENT 37 BBL

EQUIPMENT \_\_\_\_\_

PUMP TRUCK CEMENTER \_\_\_\_\_ HELPER Heath

# 409

BULK TRUCK DRIVER Cody H

# \_\_\_\_\_

BULK TRUCK DRIVER TOM W.

# \_\_\_\_\_

CEMENT AMOUNT ORDERED 300 SX 80/20 37cc 29gel

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

REMARKS:  
Set @ 598 Receive Circulation  
Cement w/ 300 SX Cement Release  
TAP & Displaced A TOTAL OF  
37 BBL / 1/2  
Cement DID CIRCULATE  
TO SURFACE  
THANK'S

CHARGE TO: JOHN C. GINTHER OIL LLC.

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Oil Field Services, LLC  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME \_\_\_\_\_

SIGNATURE Terry Austin

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

8 5/8 Solid Rubber Plug @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

# JERRY GREEN

CONSULTING GEOLOGIST

P.O. BOX 87  
SCHOENCHEN, KS 67667  
PHONE: 785-625-5155

## GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

COMPANY JOHN C. GINTHER OIL LLC

ELEVATIONS

LEASE SCHAEFER#7

K8 2038

FIELD EXPERIMENT SE

DF

LOCATION NE-NE-NW-SE

GL 2033

SEC 17 TWP 14S RGE 18W

Measurements Are All From

COUNTY ELLIS STATE KS

CASING SURFACE @ 598

CONTRACTOR WHITE KNIGHT DRLG

PRODUCTION ELECTRICAL SURVEYS

SPUD 7-13-17 COMP 7-18-17

RTD 3737 LTD 3738

MUD UP 2900 TYPE MUD CHEM

DIL/ND MI

SAMPLES SAVED FROM 2900

TO TO

DRILLING TIME KEPT FROM 2900

TO TO

SAMPLES EXAMINED FROM 2900

TO TO

GEOLOGICAL SUPERVISION FROM 2900

TO TO

GEOLOGIST ON WELL 2900

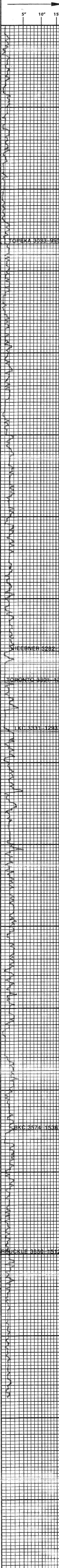
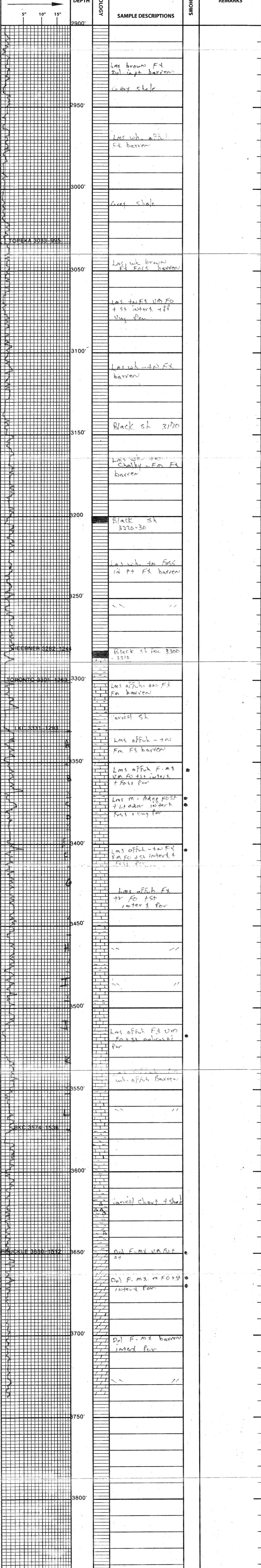
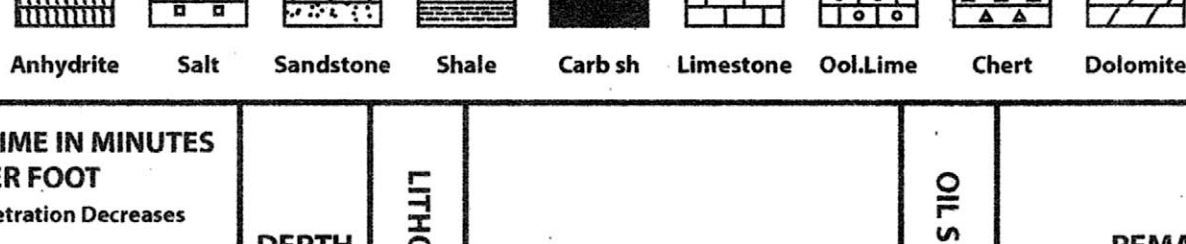
FORMATION TOPS

LOG SAMPLES

ANHY		
TOPEKA	3030-992	3033-995
HEEBNER	3280-1242	3282-1244
TORONTO	3300-1262	3301-1263
LKC	3330-1292	3331-1293
BKC	3574-1535	3574-1536
ARBUCKE	3650-1514	3650-1512

REMARKS: All parties involved recommended that pipe be set to test this well further. respectfully submitted

### LEGEND



TOPEKA 3033-995

HEEBNER 3282-1244

TORONTO 3301-1263

LKC 3331-1293

BKC 3574-1536

ARBUCKE 3650-1512