

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) (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	Mull Drilling Company, Inc.
Well Name	KSU-GOERING UNIT 1-8
Doc ID	1373895

All Electric Logs Run

CDL/CNL/PE
DIL
SONIC
MICRO

Form	ACO1 - Well Completion
Operator	Mull Drilling Company, Inc.
Well Name	KSU-GOERING UNIT 1-8
Doc ID	1373895

Tops

Name	Top	Datum
Anhydrite	2094	+ 804
B/Anhydrite	2153	+ 743
Topeka	3658	- 760
Heebner Shale	3936	- 1038
Lansing	3984	- 1086
Stark Shale	4345	- 1447
B/Kansas City	4428	- 1530
Marmaton	4451	- 1553
Cherokee Shale	4564	- 1666
Morrow Shale	4694	- 1794
Morrow Sand	4699	- 1801
Mississippian	4746	- 1848



CHARGE TO: Mull Drilling
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET 30656

PAGE 1 OF 1

1. SERVICE LOCATIONS: Area by RS WEL/PROJECT NO.: 1-8 LEASE: KSD-Coering Unit COUNTY/PARISH: Finney STATE: KS CITY: Scott City DATE: 17 AUG 17 OWNER:
 2. TICKET TYPE: SERVICE CONTRACTOR: Finney RIG NAME NO.: 10 SHIPPED: DELIVERED TO: location ORDER NO.:
 3. WELL TYPE: DEV WELL CATEGORY: Development JOB PURPOSE: Development WELL PERMIT NO.:
 4. REFERRAL LOCATION: Development INVOICE INSTRUCTIONS: Development cement surface pipe WELL LOCATION: 8-21-31

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT		AMOUNT	
		LOC	ACCT	DF		QTY.	UM	QTY.	UM		
525		1			MILEAGE	722	114			5.00	3570.00
5765		1			Primo Charge			7	ni	800.00	800.00
325		1			Standard cement	165	sk			18.25	2031.25
279		1			Bentonite gel	300	lb	3	sk	25.00	75.00
278		1			Calcium chloride	350	lb	7	sk	40.00	280.00
290		1			D-AIR	2	gal			42.00	84.00
581		1			Service charge	165	sk			1.50	247.50
583		1			D charge	1650	TM			325.25	423.94

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: _____ TIME SIGNED: A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY: CUSTOMER DID NOT WISH TO RESPOND

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? YES NO

WE UNDERSTOOD AND MET YOUR NEEDS? YES NO

OUR SERVICE WAS PERFORMED WITHOUT DELAY? YES NO

WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? YES NO

ARE YOU SATISFIED WITH OUR SERVICE? YES NO

PAGE TOTAL: 4281.69

TOTAL: 4469.90

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: Raynell APPROVAL: _____

Thank You!

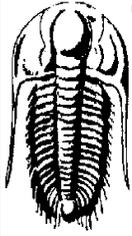
JOB LOG

SWIFT Services, Inc.

DATE 17 AUG 17 PAGE NO. 1
TICKET NO. 30656

CUSTOMER Mull Drilling WELL NO. 1-8 LEASE KSD - Goering JOB TYPE Cement surface pipe

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								165 sk standard cement 20 gal 3% cc 8 5/8" x 23# casing 6 jts 257.61' TD = 260'
	1605							on loc TRK 114
	1734							start 8 5/8" x 23# casing in well
	1821							circulate well
	1830	3 1/2	42			200		mix STD 20% 3% 165 sk @ 14.7 ppm
	1846	3 1/2				200		Displace w/ H ₂ O
	1853	3 1/2	15			100		→ cement to surface ←
	1854							kickout shut in 8 5/8" 165 sk mixed 20 sk top 1/2
	1859							wash truck
								Rock up
	1925							job complete
								Thubs Blaine Hart # 14000



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Mull Drilling Company
 1700 N Waterfront pkwy
 Wichita, Ks 67206
 ATTN: Kevin Kessler

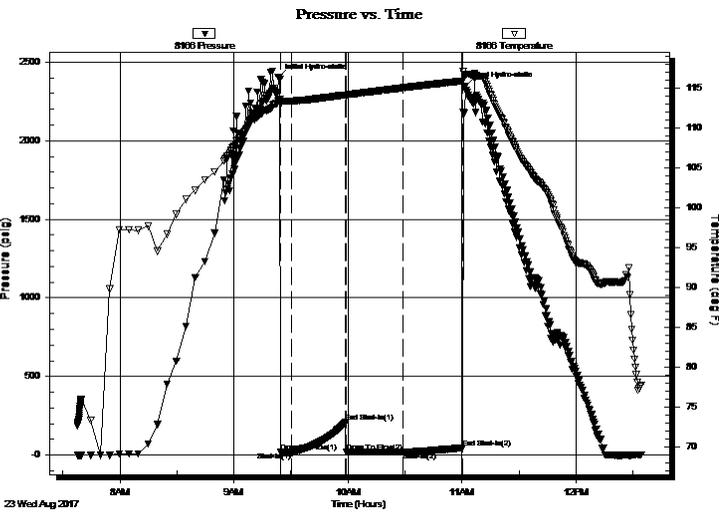
8-21s-31w Finney, Ks
KSU-Goering Unit 1-8
 Job Ticket: 63872 **DST#: 1**
 Test Start: 2017.08.23 @ 07:37:43

GENERAL INFORMATION:

Formation: **Morrow Sand**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 09:24:43
 Time Test Ended: 12:34:13
 Interval: **4685.00 ft (KB) To 4710.00 ft (KB) (TVD)**
 Total Depth: 4710.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Brandon Turley
 Unit No: 79
 Reference Elevations: 2898.00 ft (KB)
 2893.00 ft (CF)
 KB to GR/CF: 5.00 ft

Serial #: 8166 Outside
 Press@RunDepth: 20.63 psig @ 4686.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2017.08.23 End Date: 2017.08.23 Last Calib.: 2017.08.23
 Start Time: 07:37:48 End Time: 12:34:12 Time On Btm: 2017.08.23 @ 09:23:43
 Time Off Btm: 2017.08.23 @ 11:01:43

TEST COMMENT: IF: 1/4 blow died to surface.
 IS: No return.
 FF: No blow.
 FS: No return.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2401.12	113.57	Initial Hydro-static
1	17.76	113.10	Open To Flow (1)
7	18.04	113.41	Shut-In(1)
35	208.24	114.19	End Shut-In(1)
36	18.75	114.09	Open To Flow (2)
65	20.63	115.05	Shut-In(2)
97	46.77	115.92	End Shut-In(2)
98	2345.10	116.79	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
2.00	mud 100%m	0.01

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Mull Drilling Company

8-21s-31w Finney, Ks

1700 N Waterfront pkwy
Wichita, Ks 67206

KSU-Goering Unit 1-8

Job Ticket: 63872

DST#: 1

ATTN: Kevin Kessler

Test Start: 2017.08.23 @ 07:37:43

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 56.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 8.39 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 2750.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
2.00	mud 100%m	0.010

Total Length: 2.00 ft Total Volume: 0.010 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

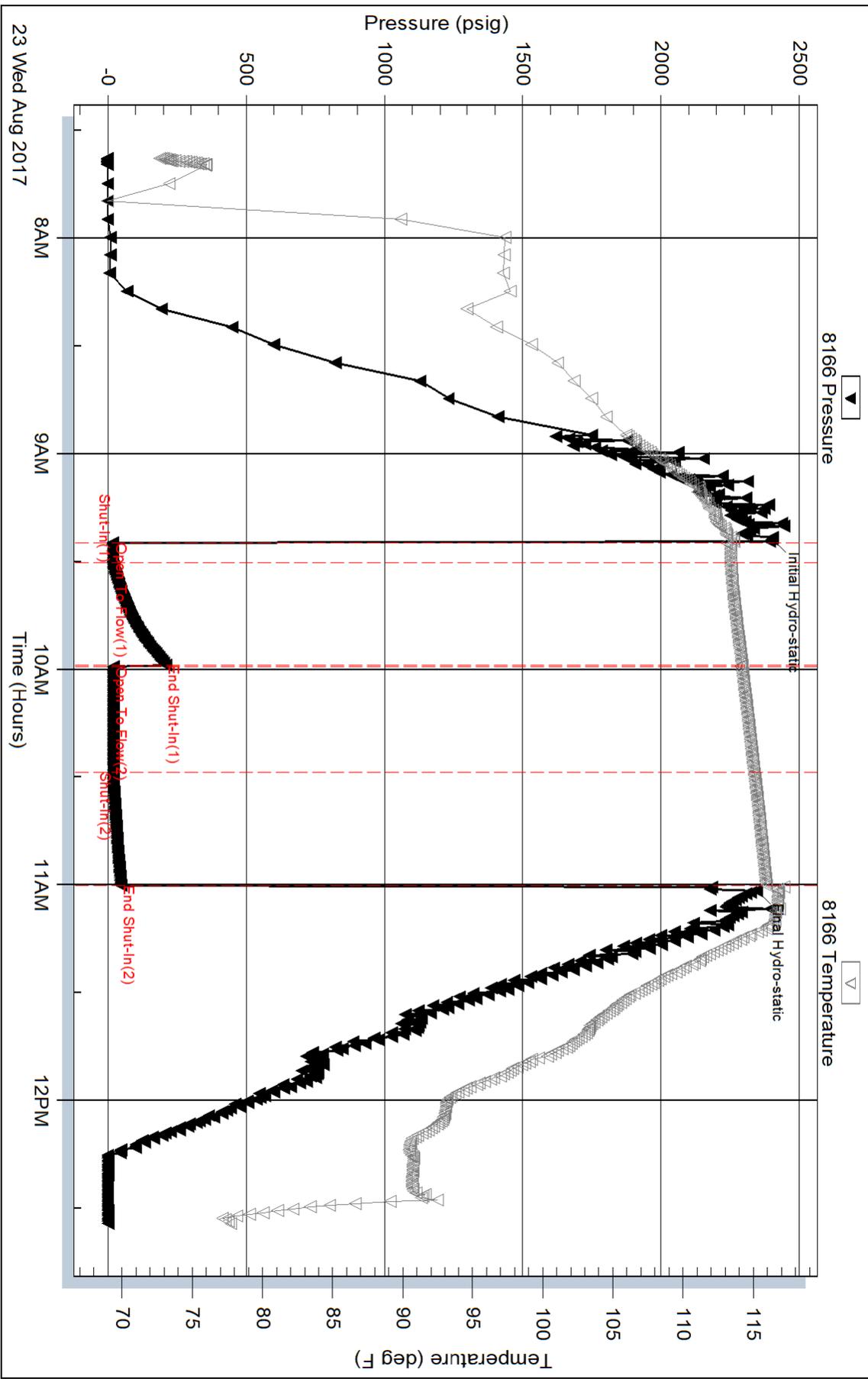
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time



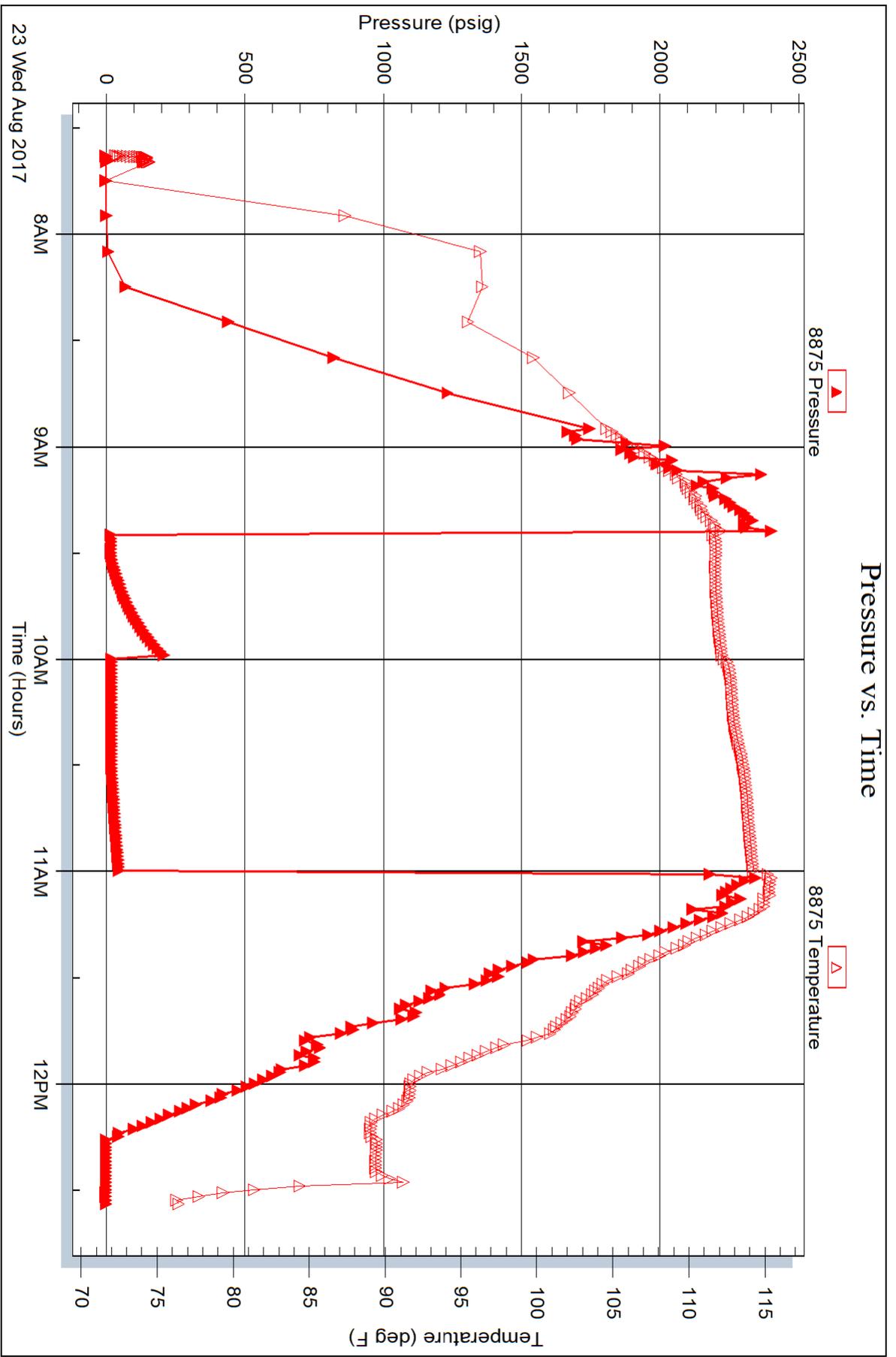
Serial #: 8875

Inside

Mull Drilling Company

KSU-Goering Unit 1-8

DST Test Number: 1



KEVIN L. KESSLER

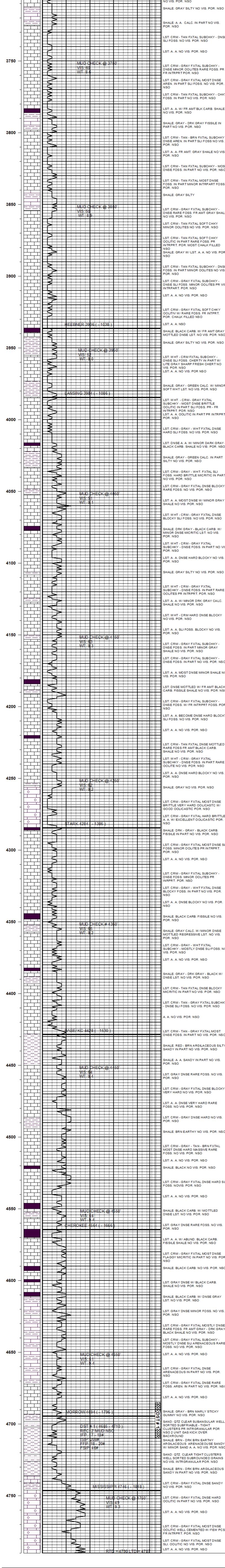
CONSULTING PETROLEUM GEOLOGIST

(316) 522 - 7338

OPERATOR : MULL DRILLING CO. INC.		ELEVATION	
LEASE : KSU-GOERING UNIT	WELL # : 1 - 8	KB: 2898'	
LOCATION : 777'FNL & 124'FWL		GL: 2893'	
SEC : 08	TWP : 21 S	RGE : 31 W	MEASUREMENTS FROM:
COUNTY : FINNEY		STATE : KANSAS	
CONTRACTOR: W W DRILLING RIG # 10		CASING RECORD:	
COMM: 08 - 17 - 2017		SURFACE:	
RTD: 4790'		8 5/8" @ 260'	
COMM: 08 - 17 - 2017		PRODUCTION:	
RTD: 4790'		NONE	
GEOLOGICAL SUPERVISION FROM: 3600'		TO: RTD	
SAMPLES SAVED FROM: 3600'		TO: RTD	

FORMATION:	TOP	LOG	DATUM	TOP	SAMPLE	DATUM	COMP.
TOPEKA	3659	-	- 761	3659	-	- 761	- 11
HEEBNER	3936	-	- 1038	3936	-	- 1038	- 07
LANSING	3984	-	- 1086	3984	-	- 1086	- 08
BASE/ KC	4428	-	- 1530	4428	-	- 1530	- 35
CHEROKEE	4564	-	- 1666	4564	-	- 1666	- 32
MORROW	4694	-	- 1796	4694	-	- 1796	- 49
MISSISSIPPI	4746	-	- 1848	4746	-	- 1848	- 93

REFERENCE WELL FOR STRUCTURAL COMPARISON:
PET-EX #1 BRETFOGLE 5-21S-31W FINNEY CO. KS.



COMMENTS:
 DUE TO NEGATIVE DST RESULTS THIS WELL WAS PLUGGED AND ABANDONED