

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](mailto: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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# 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

No. 655

Date	2-18-18	Sec.	32	Twp.	13	Range	19	County	Ellis	State	Ks	On Location		Finish	10:30 PM
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Lease Reidel Location Hays + Golf Course Rd, W to 170rd, IN,  
Well No. 1-32 Owner 1/2 E, N/1 into

Contractor Discovery #2 To Quality Oilwell Cementing, Inc.  
Type Job Production You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Hole Size 7 7/8" T.D. 3930' Charge To American oil

Csg. NAW 5 1/2" 15.504 Depth 3931' Street

Tbg. Size Depth City State

Tool Port Collar Depth 1515' #160 The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. 25' Shoe Joint 25' Cement Amount Ordered 150 Com 10% Salt 5% G. / 1/2 size

Meas Line Displace 93 BLS 500 gal mud Clear 48, 20 BLS KCL

EQUIPMENT			Common
Pumptrk	17 No.	Cementer Helper <u>Travis</u>	150
Bulktrk	15 No.	Driver <u>David</u>	Poz. Mix
Bulktrk	<u>P.K.</u> No.	Driver <u>Rick</u>	Gel.

JOB SERVICES & REMARKS

Remarks: KCL 2 gal

Rat Hole Salt 13

Mouse Hole Flowseal

Centralizers 1, 3, 5, 7, 9, 59 Kol-Seal 750#

Baskets #59 #160 1515' Mud CLR 48 500 gal

D/V or Port Collar pipe on bottom break Circulation CFL-117 or CD110 CAF 38

pump 500 gal mud Clear 48 plugged Handling 170

pump 10 BLS KCL, plug Rathole w/ 30sx Mileage

plug mousehole w/ 15sx Cement 5 1/2" casing

w/ 105sx. shut down wash pump

+ lines Released plug + Displaced w/

93 BLS. Released + held.

Lift pressure 500 #

Land plug to 1500 #

Rotating head

First 10 BLS of Displacement KCL Pumptrk Charge Prod String

Mileage 15 miles

X Signature Ann W. ... Tax Discount 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. 665

Date	3-1-18	Sec.	Twp.	Range	County	State	On Location	Finish
					Ellis	Ks		11:00 AM
Lease					Location			
Reickel					Golf Course Rd, W to 170 Rd, IN, 1/2 E			
Well No.			Owner					
1-32			M/S					
Contractor					To Quality Oilwell Cementing, Inc.			
Western Well Service					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					Charge To			
Port Collar					American oil			
Hole Size		T.D.		Street				
5 1/2"								
Csg.		Depth		City				State
2 7/8"								
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.				
2 7/8"								
Tool		Depth		Cement Amount Ordered				
Port Collar		1515'		250 80/20 QMDC 1/4 H.S.				
Cement Left in Csg.		Shoe Joint		Sgel used 240				
				Common 240 80/20 QMDC				
Meas Line		Displace		Poz. Mix				
		7 3/4 BIS						
<b>EQUIPMENT</b>								
Pumptrk	No.	Cementer			Gel.			
20		Helper	Travis					
Bulktrk	No.	Driver			Calcium			
21		Driver	Rick					
Bulktrk	No.	Driver			Hulls			
		Driver						
<b>JOB SERVICES &amp; REMARKS</b>								
Remarks:					Salt			
Spot 5 sy gel to tool								
Rat Hole					Flowseal			
test tool to 800 ft + held					60#			
Mouse Hole					Kol-Seal			
open tool to mix 240 sy								
Centralizers					Mud CLR 48			
Cement, + Displaced w/ 7 3/4								
Baskets					CFL-117 or CD110 CAF 38			
BIS H2O, closed tool to test								
DV or Port Collar					Sand			
to 900 ft + held. Run								
5 fts + wash clean.					Handling 250			
					Mileage			
wash up + rigged down								
					<b>FLOAT EQUIPMENT</b>			
					Guide Shoe			
					Centralizer			
Cement did Circulate					Baskets			
					AFU Inserts			
					Float Shoe			
					Latch Down			
					Pumptrk Charge			
					port collar Job			
					Mileage			
					15 (min)			
					Tax			
					Discount			
					Total Charge			
X Signature								

# 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

No. 706

Date	2/2-18	Sec.	32	Twp.	13	Range	19	County	Ellis	State	KS	On Location		Finish	11:15pm
Lease								Well No.		Location					
Reidel								1.32		Hayes Golf Course low 180 1/2 W. Vinto					
Contractor								Owner							
Discovery #2								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								Charge To							
Surface								American Oil							
Hole Size				T.D.				Street							
12 1/4				222											
Csg.				Depth				City							
8 5/8				221				State							
Tbg. Size				Depth				City							
								State							
Tool				Depth				The above was done to satisfaction and supervision of owner agent or contractor.							
Cement Left in Csg.				Shoe Joint				Cement Amount Ordered							
10'								150 8/20 31-LL 21-CEL							
Meas Line				Displace											
				13 1/2 BCL											
<b>EQUIPMENT</b>								<b>Common</b>							
Pumptrk 17 No.				Cementer				120							
				Helper				30							
Bulktrk No.				Driver				3							
				Driver				6							
Bulktrk 14 No.				Driver											
				Driver											
<b>JOB SERVICES &amp; REMARKS</b>								<b>Hulls</b>							
Remarks:								Salt							
Rat Hole								Flowseal							
Mouse Hole								Kol-Seal							
Centralizers								Mud CLR 48							
Baskets								CFL-117 or CD110 CAF 38							
DV or Port Collar								Sand							
8 5/8 on bottom. Est. Circulation								Handling 159							
Mix 150 SK + Displace								Mileage							
<u>Cement Circulated</u>								<b>FLOAT EQUIPMENT</b>							
								Guide Shoe							
								Centralizer							
								Baskets							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								Pumptrk Charge							
								Surface							
								Mileage							
								15 (M.M.)							
X Signature								Tax							
								Discount							
								Total Charge							