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 #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R East _ West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	Datum: NAD27 NAD83 WGS84
Wellsite Geologist:	County:
Purchaser:	·
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
☐ Oil ☐ WSW ☐ SWD ☐ Gas ☐ DH ☐ EOR ☐ OG ☐ GSW	Producing Formation: Kelly Bushing: Elevation: Ground: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? ☐ Yes ☐ No
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
□ Deepening □ Re-perf. □ Conv. to EOR □ Conv. to SWD □ Plug Back □ Liner □ Conv. to GSW □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content:ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	·
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	Quarter Sec. TwpS. 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:							

KOLAR Document ID: 1421713

Page Two

Operator Name:				Lease Name:			Well #:		
Sec Twp.	S. R.	Ea	st West	County:					
	lowing and shu	ıt-in pressures, w	hether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,	
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log	
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample	
Samples Sent to G	eological Surv	ey	Yes No	Na	me		Тор	Datum	
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No						
		Re			New Used	ion, etc.			
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	l			
Purpose:		epth Ty Bottom	pe of Cement	# Sacks Used	sed Type and Percent Additives				
Protect Casi									
Plug Off Zon									
 Did you perform a Does the volume o Was the hydraulic 	of the total base f	luid of the hydraulic	fracturing treatment	_	_	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,	
Date of first Producti Injection:	on/Injection or Re	esumed Production	/ Producing Meth	nod:	Gas Lift 0	Other <i>(Explain)</i>			
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity	
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			ON INTERVAL:	
	_	on Lease	Open Hole			mmingled mit ACO-4)	Тор	Bottom	
,	Submit ACO-18.)								
Shots Per Foot							Record		
TUBING RECORD:	Size:	Set /	At:	Packer At:					
. 5513 1200 10.	5120.		···	. 30.0.71					

Form	ACO1 - Well Completion
Operator	Phillips Exploration Company L.C.
Well Name	PURINTON 1-8 SHR
Doc ID	1421713

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	12.25	8.626	23	218	common	150	80/20 poz
Production	7.875	5.5	14	4046	common	180	common
Production	7.875	5.5	14	1836	common	180	60/40 poz

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. 809

and wants daj entro tras	Sec.	Twp.	Range		County		no est tempe a de	L BASTET -		
Date 4-26-18	8	14	25	-+	reac	State	On Location	Finish		
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Lease Perinten	SHR	Yday (Well No. /- §	Locat	Torry	12 I Zo 1	1/23 Winte	2		
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Type Job Surface					Tou are nere	by requested to ron	t nomenting .	nt and furnish		
Hole Size 12/4	same T	.D. 2	18		Charge	u neiper to assist ow	ner or contractor to c	lo work as listed.		
Csg. 35/8		epth	217	on set in	To Phillips Exploration					
Tbg. Size		epth	011		Street St					
Tool	Alberta Lander	epth	a to lepos sets	ter formal	City		State	E STORY		
Cement Left in Csg.	C 00 0	noe Joi	nt	JAUL 9	Comont Ama	done to satisfaction a	and supervision of owne	r agent or contractor		
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SWIFT Services. Inc. 5-10-18 JOB LOG TICKET NO. #31513 PRESSURE (PSI) CUSTOMER Phillips Exploration WELL NO. PUMPS DESCRIPTION OF OPERATION AND MATERIALS CHART NO. VOLUME TUBING CASING 23/4.51/2 Short Oping Port Coller Tool in Hole P.C. - 1837 0815 0820 1000 * Hold * 0945 200 Mix 175 sks SMD /4 Flo @ 11.2 pps circulate cement to surface 3/2 0955 95 400 31/2 61/2 600 1020 Close P.G - Prossure test *Hold* 1030 33 1040 * 175 sks SMD 14# Flo total * * 20 sks to Pit * Job Complete 1100

PAGE NO.

DATE

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. 814

Date 5 18 8 14 25 Trage KS Lease Printer Lease Printer Lease Printer Well No. 8 5HR Contractor Mustin #16 Type Job Profile No. 1 5/1/30 Type Job Profile No. 1 5/1/30 Hole Size 7/8 T.D. 40 49 Charge Printer To Quality Olivell Camenting, Inc. You are hereby requised to rent comenting equipment and furnish methods for the period seasist owner or contractor to do work as listed. Contractor Mustin #16 Type Job Profile No. 1 5/1/30 Type Job Profile No. 1 5/1/30 To Quality Olivell Camenting, Inc. You are hereby requised to rent comenting equipment and furnish methods owner and furnish methods of the period of the peri	nem tokuna doj esti mi s	Sec.	Twp.	Range		County	State	On Location	First			
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