

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	Fossil Energy, LLC
Well Name	LEE 1
Doc ID	1421858

Tops

Name	Top	Datum
Anh	836	+1066
Base	861	+1041
Topeka	2810	-908
Heeb. Sh.	3138	-1236
Toronto	3157	-1255
Brown Lm.	3228	-1326
Lansing	3239	-1337
BKc.	3457	-1557
Arbuckle	3541	-1639

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. 934

Date	8-26-18	Sec.	16	Twp.	19	Range	14	County	Barton	State	Ks	On Location		Finish	1:15 AM
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Lease Lee Location Heizer - 1 1/2 S, E/into

Well No. #1 Owner

Contractor Southwind #3 To Quality Oilwell Cementing, Inc.

Type Job Plug 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. 3600' Charge To Fossil Energy

4 1/2" D.P. Depth 3500' Street

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 190 60/40 4% Gel 1/4 # Flowseal

Meas Line Displace H2O/mud

EQUIPMENT

Pumptrk 16 No. Cementer David Common 114

Bulktrk 9 No. Driver Doug Poz. Mix 26

P.u. No. Driver Rick Gel. 7

Calcium

JOB SERVICES & REMARKS

Remarks: 3500' - 50 5x Halls

Rat Hole 890' - 50 5x Salt

Mouse Hole 250' - 50 5x Flowseal 50 #

Centralizers 40' - 10 5x w/ plug Kol-Seal

Baskets Rathole w/ 30 5x Mud CLR 48

D/V or Port Collar CFL-117 or CD110 CAF 38

Cement did circulate Sand

Handling 197

Mileage

FLOAT EQUIPMENT

Guide Shoe Dry hole plug

Centralizer

Baskets

AFU Inserts

Float Shoe

Latch Down

Pumptrk Charge plug

Mileage 15

Signature Jay Huen Tax

Discount

Total Charge



3851 Evinghollow Way
Castle Rock, CO 80104
Phone: 720-234-4200
Cell: 783-858-1848
Email: rkg0333@hotmail.com

GEOLOGISTS WELL REPORT

COMPANY: FOSSIL ENERGY, LLC. (34992)
WELL: Lee #1
FIELD: Heizer

LOCATION: N₂ SW SW NW
(Footages) 2016, FMI & 3301 FMI
Section 16 TWP 19S RGE 14W
(Map) 1 mi. So. of Heizer, Ka.

COUNTY: Barton STATE: Kansas
ELEVATION: 1902' K.B., 1894' G.L.
Depths measured from Kelly Bushing
A.P.L. NUMBER 15-009-26228
GEOLOGY BY: Randall Kilian

PERTINENT WELL DATA

CONTRACTOR: Southwind Drilling, Inc. (33350)
RIG #3 HYDRAULICS D-375 614x60
(Ray Kater PP)
DRILL PIPE 6 1/8" X-H COLLARS 14 (4151)
CASING: SURFACE 8 5/8" @ 840' w/ 350 ax 60/40 Poz
PRODUCTION: _____
DRILLING FLUID: COMPANY: Argita's Mud & Chemical Co.
TYPE: Chemical
REMARKS: Full service
DRILL STEM TESTS: COMPANY: _____

DAILY REPORT

DATE: 7 am. Depth
RIG ACTIVITY
8-18-2018 MFRU
8-21-2018 Spud
8-22-2018 WOC
8-23-2018 Drilling shale & sand
8-24-2018 Drilling Topoka lime
8-25-2018 Drilling Marmon lime
8-26-2018 3600' TD P&A

DRILL STEM TESTS

NO	INTERNAL	DEPTH	ISD/DEPTH	FF/DEPTH	FS/DEPTH	HW/DEPTH	RECOVERY
1							
2							
3							
4							
5							
6							
7							
8							

ELECTRIC LOGS: COMPANY Pioneer Well Services

DETAIL (S') 2750-FMD
TYPE DI, Comp N-D, Mono
DRILLING TIME FROM 2750' TO RTD
SAMPLE TIME FROM 2750' TO RTD
SUPERVISION FROM 2750' TO RTD
VERTICAL DEVIATION: ± @ 840', 1 1/2 @ 3600'
PLUGGING REPORT: 50 @ 2900', 50 @ 890', 50 @ 290',
10 @ 40' 50 @ 260' @ 60/40 Poz.
RESERVE PIT 100 BISE., 011, 69, 000 Ga., 1290

MUD RECORD

CHK	DEPTH	WT	VIS	FIL	CHL	YP
1	2678'					
2	2947'	8.7	60	8.0	4k	20
3	3380'	9.0	54			
4	3508'	9.3	53	9.2	4k	17
5						
6						
7						
8						
9						
10						
11						

BIT RECORD

NO	SIZE	MAKE	TYPE	DEPTHOUT	FEET	HOURS
1	12 1/2"	JZ	RR	840'	840'	10
2	7 7/8"	Varel	HE29	3600'	2740'	57 1/2
3						
4						
5						
6						
7						
8						

FORMATION TOPS & STRUCTURAL GEOLOGY

R 14 W

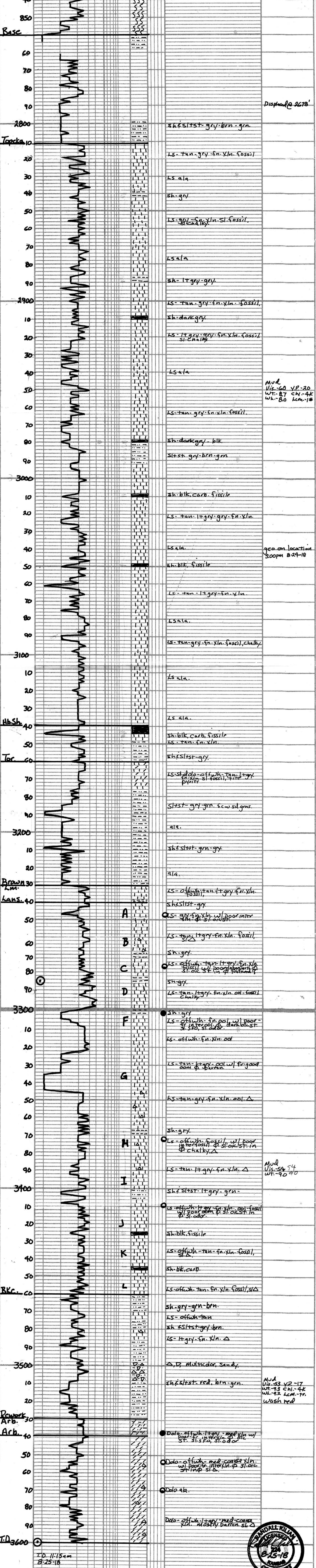
REFERRED TO:
A: GEORGE OPERATING, INC.
B: GeogLama #1 rd. NE. SE. T7
C: _____
D: _____
E: _____

MARKERS	SAMPLES	E. LOGS	DATE/TIM	A	B	C	D	E
Anthonyville	8341	8361	+1066	+1084				
Base	8601	8611	+1041					
Topoka	28111	28101	-908	-902				
Heeb. Sh.	31991	31981	-1296	-1292				
Toronto	31601	31571	-1255	-1220				
Edmore In.	32201	32281	-1326	-1320				
Edmore	32401	32291	-1337					
Edm.	34601	34571	-1555					
Re-Arb.	35201	35201	-1628					
Arbuckle	35291	35411	-1639	-1613				

The first two shows a Et. of 1897, however, the survey plat shows 1924 so use these as 1924.
*Structural position of subject well as compared to referred well.

SUMMARY

The Lee #1 well was drilled with Southwind Drilling tools rig #3 beginning 8-21-18 and drilling was completed 8-26-18.
The drill site was located via a 3-D seismic survey. The well was a seismic hunt and ran low structurally. Poor oil shows were noted in several zones but did not warrant a BSF. The electric log was also negative. Based upon all data, the well was plugged as a dry hole.
Respectfully,
Randall Kilian



QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 930

Cell 785-324-1041

Date	8-22-18	Sec.	16	Twp.	19	Range	14	County	Barton	State	KS	On Location		Finish	2:45 AM
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Lease Lee Location Heizer - 1 1/2 S, E 1 S

Well No. 1 Owner

Contractor Southwind #13 To Quality Oilwell Cementing, Inc.

Type Job Surface 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 12 1/4" T.D. 840' Charge To Fossil Energy

Csg. 8 5/8" Depth 840' Street

Tbg. Size Depth City State

Tool Depth The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. 20' Shoe Joint 20' Cement Amount Ordered 350 60/40 4% CC 2% Gel

Meas Line Displace 52 1/4 BU

EQUIPMENT

Pumptrk	16	No.	Cementer	David	Common	2:10
			Helper		Poz. Mix	140

Bulktrk	13	No.	Driver	Tony	Gel.	7
			Driver		Calcium	13

Bulktrk	p.u.	No.	Driver	Rick	Hulls	
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JOB SERVICES & REMARKS

Remarks: Cement did Circulate

Rat Hole Flowseal

Mouse Hole Kol-Seal

Centralizers Mud CLR 48

Baskets CFL-117 or CD110 CAF 38

D/V or Port Collar Sand

Handling 372

Mileage

FLOAT EQUIPMENT

Guide Shoe Rubber plug

Centralizer

Baskets

AFU Inserts

Float Shoe

Latch Down

Pumptrk Charge Long Surface

Mileage 15

Signature Jay Smith Tax

Discount

Total Charge