KOLAR Document ID: 1433681

Confidentiality Requested:

CONFIDENTIAL

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

OPERATOR: License #		API No.:
Name:		Spot Description:
Address 1:		
Address 2:		Feet from North / South Line of Section
City: State: Zip:+		Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		GPS Location: Lat:, Long:
Name:		(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entry Workover Oil WSW SWD Gas DH EOR OG GSW		Field Name:
		Producing Formation:
		Elevation: Ground: Kelly Bushing:
		Total Vertical Depth: Plug Back Total Depth:
		Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)		
Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used?
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: Origi	inal Total Depth:	
Deepening Re-perf. Conv. to EOR Conv. to SWD		Drilling Fluid Management Plan
Plug Back Liner Conv	v. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
		Chloride content: ppm Fluid volume: bbls
	t:	Dewatering method used:
	t:	Location of fluid disposal if hauled offsite:
	·	Location of huid disposal in hadied offsite.
	·	Operator Name:
		Lease Name: License #:
Spud Date or Date Reached TD Completion Date or		Quarter Sec TwpS. R East West
Recompletion Date	Recompletion Date	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:		