

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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Form	ACO1 - Well Completion
Operator	Castle Resources, Inc.
Well Name	HOLSTE 1
Doc ID	1437458

Tops

Name	Top	Datum
Anhysrite	2758	+14
Topeka	3778	-803
Oread	3876	-901
Heebner	3886	-911
LKC	3930	-955
BKC	4154	-1179
Pawnee	4292	-1317
Ft Scott	4358	-1383
Mississippi	4531	-1556





**Company: Castle Resources, Inc**  
**Lease: Holste #1**

Tester: Wil Steinbeck  
 On-Site Contact: Jerry Green

SEC: 23 TWN: 2S RNG: 33W  
 County: RAWLINS  
 State: Kansas  
 Drilling Contractor: White Knight Drilling, LLC - Rig 1  
 Elevation: 2967 EGL  
 Field Name: Wildcat  
 Pool: WILDCAT  
 Job Number: 299

**Operation:**  
 Uploading recovery & pressures

**DATE**  
 January  
**24**  
 2019

**DST #1**    **Formation: Lan D,E&F**    **Test Interval: 4042 - 4165'**    **Total Depth: 4202'**  
 Time On: 12:08 01/24    Time Off: 17:16 01/24  
 Time On Bottom: 13:45 01/24    Time Off Bottom: 15:25 01/24

**Mud Properties**

**Down Hole Makeup**

**Gas To Surface: NO**

**Well Flow: NO**

**Default View**

**Tester Communication**

Electronic Volume Estimate:  
 14'

**1st Open**  
 Minutes: 45  
 Current Reading:  
 .8" at 45 min  
 Max Reading: 1.3"

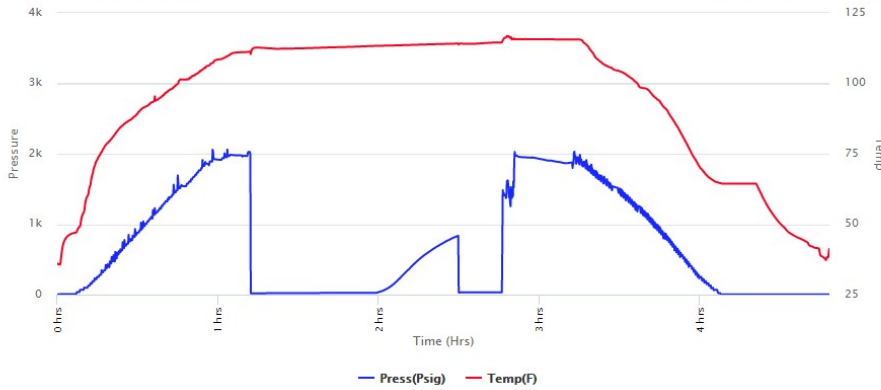
**1st Close**  
 Minutes: 30  
 Current Reading:  
 0" at 30 min  
 Max Reading: 0"

**2nd Open**  
 Minutes: 25  
 Current Reading:  
 0" at 25 min  
 Max Reading: 0"

**2nd Close**  
 N/A

Download Outside Recorder File

Download Inside Recorder File



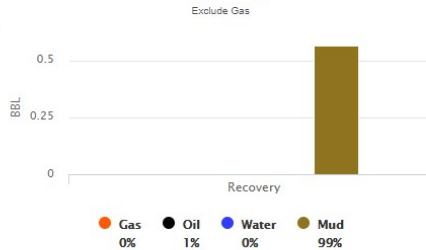
Click to View Outside Recorder File Chart

Recovered		Description of Fluid	Gas %	Oil %	Water %	Mud %
Foot	BBSL					
40	0.5692	SLOCM	0	1	0	99

Total Recovered: 40 ft  
 Total Barrels Recovered: 0.5692

**Reversed Out**  
 NO

**Recovery at a glance**



GIP cubic foot volume: 0

Estimated Daily Production

**BUCKET MEASUREMENT:**

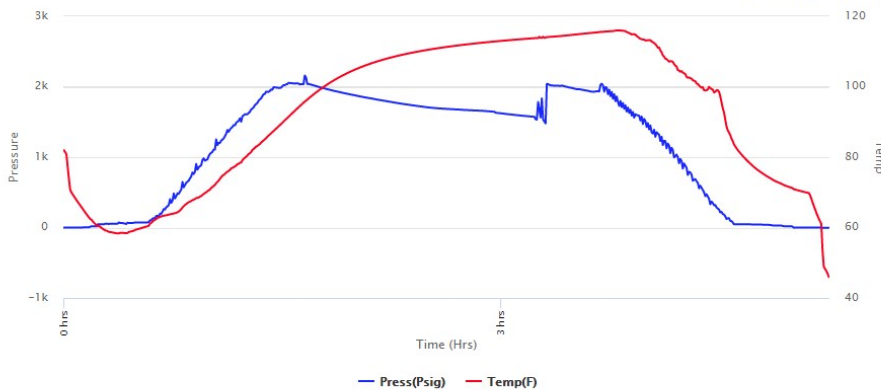
1st Open: Built to 1.4  
 1st Close: No Blow  
 2nd Open: No Blow

**REMARKS:**

Tool Sample: 0% Gas 5% Oil 0% Water 95% Mud

**Below Straddle Recorder**

Download Recorder File



Press(Psig)    Temp(F)



**Company: Castle Resources, Inc**  
**Lease: Holste #1**

Tester: Wil Steinbeck  
 On-Site Contact: Jerry Green

[Edit](#) [Print](#)

SEC: 23 TWN 2S RNG: 33W  
 County: RAWLINS  
 State: Kansas  
 Drilling Contractor: White Knight Drilling, LLC - Rig 1  
 Elevation: 2967 EGL  
 Field Name: Wildcat  
 Pool: WILDCAT  
 Job Number: 299

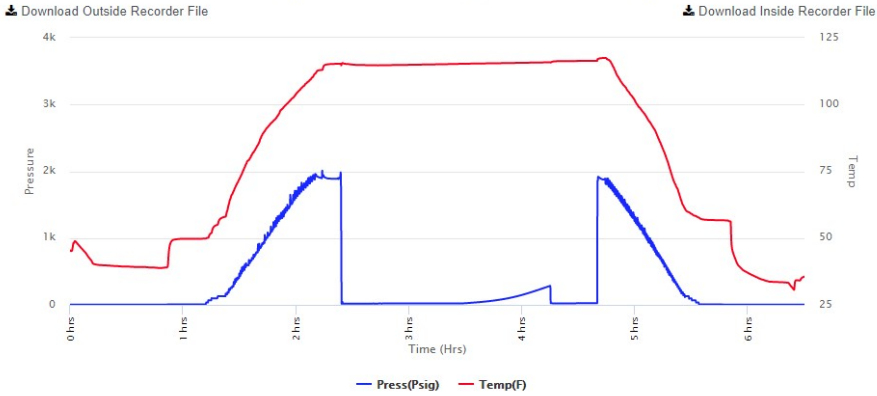
**Operation:**  
 Uploading recovery & pressures

**DATE**  
 January  
**24**  
 2019

**DST #2**      **Formation: Lan A**      **Test Interval: 3918 - 3980'**      **Total Depth: 4202'**  
 Time On: 17:34 01/24      Time Off: 23:53 01/24  
 Time On Bottom: 19:55 01/24      Time Off Bottom: 21:45 01/24

**Mud Properties**      **Down Hole Makeup**      **Gas To Surface: NO**      **Well Flow: NO**      **Tester Communication**      **Default View**

**Electronic Volume Estimate:**      **1st Open**      **1st Close**      **2nd Open**      **2nd Close**  
 26'      Minutes: 60      Minutes: 45      Minutes: 5      N/A  
 Current Reading:      Current Reading:      Current Reading:      Current Reading:  
 1.9" at 60 min      0" at 45 min      0" at 5 min      0" at 5 min  
 Max Reading: 2.4"      Max Reading: 0"      Max Reading: 0"      Max Reading: 0"



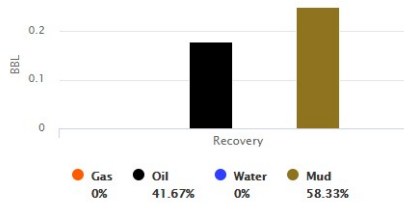
Click to View Outside Recorder File Chart

Recovered		Description of Fluid	Gas %	Oil %	Water %	Mud %
Foot	BBLS					
5	0.07115	O	0	100	0	0
25	0.35575	HOCM	0	30	0	70

Total Recovered: 30 ft  
 Total Barrels Recovered: 0.4269

**Reversed Out**  
 NO

**Recovery at a glance**  
 Exclude Gas



GIP cubic foot volume: 0

Estimated Daily Production

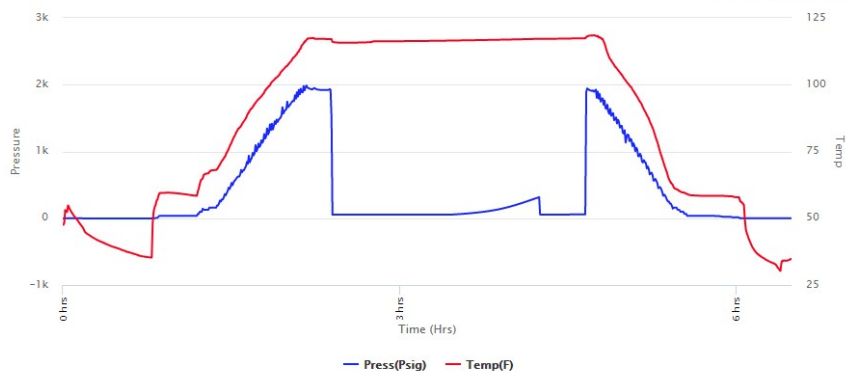
**BUCKET MEASUREMENT:**

1st Open: Built to 2.4"  
 1st Close: No Blow  
 2nd Open: No Blow

**REMARKS:**

Tool Sample: 0% Gas 45% Oil 0% Water 55% Mud  
 Gravity: 27.5 @ 60 °F

**Below Straddle Recorder**



**GEOLOGIST'S REPORT** DRILLING TIME AND SAMPLE LOG

COMPANY CASTLE RESOURCES INC.  
ELEVATIONS

LEASE HOLSTE #1  
KB 2975

FIELD WC  
DF

LOCATION NW-NW-NW  
GL 2970

SEC 23 TWP 2S RGE 33W  
Measurements Are All

COUNTY RAWLINS STATE KS  
From KB

CONTRACTOR WHITE KNIGHT DRILG.  
SURFACE CASING

SPUD 1-20-19 COMP 1-27-19  
PRODUCTION

RTD 4562 LTD 4562  
ELECTRICAL SURVEYS

MUD WP 3600 TYPE MUD CHEM.  
DIL/ND MICRO

SAMPLES SAVED FROM 3700'  
TO TD.

DRILLING TIME KEPT FROM 3600'  
TO TD.

SAMPLES EXAMINED FROM 3700'  
TO TD.

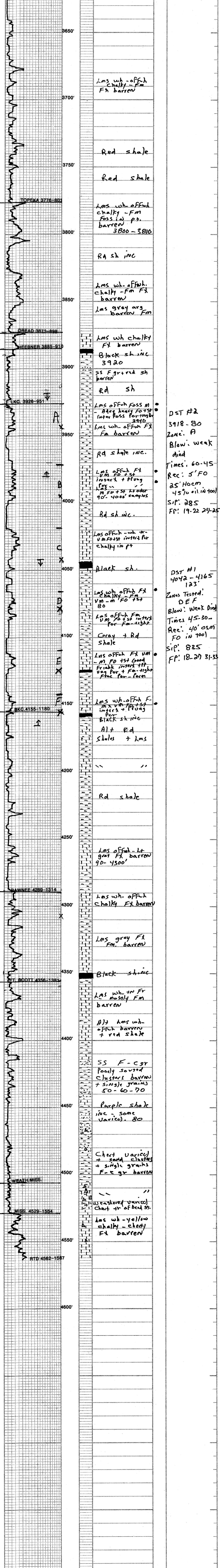
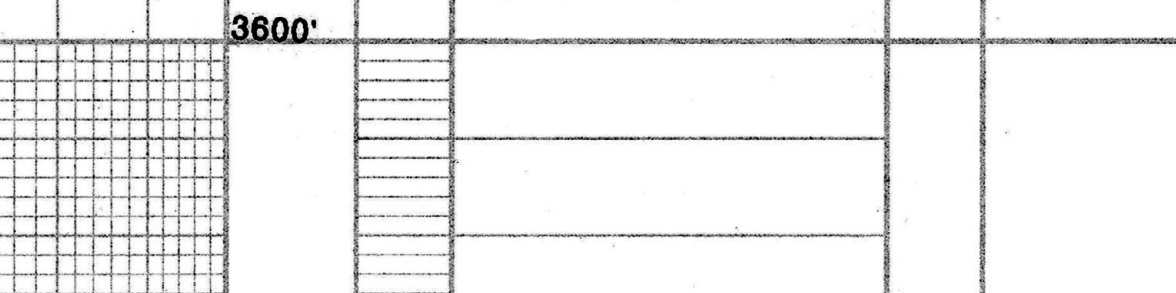
GEOLOGICAL SUPERVISION FROM 3700'  
TO TD.

GEOLOGIST ON WELL 24TH-27TH  
TO TD.

FORMATION TOPS	LOG	SAMPLES
ANHY	2758-217	2758-217
TOPEKA	3776-803	3776-801
OHEAD	3873-891	3873-898
HEBNER	3885-910	3885-910
LKC	3926-951	3926-951
BKC	4155-1180	4155-1180
LAWNEE	4289-1314	4289-1314
WEATH. MISS.	4529-1554	4529-1554
MISS	4529-1554	4529-1554
RTD	4562-1567	4562-1567

REMARKS

**LEGEND**



DST #2  
3918-80  
Zone: A  
Blow: weak  
died  
Times: 60-45  
Rec: 5' FO  
25' Hoem  
45% oil in tool  
SIP: 285  
FP: 19-22 24-25

DST #1  
4042-4165  
123'  
Zones Tested:  
DEF  
Blow: weak Died  
Times 45-30-  
Rec: 40' osm  
FO in tool  
SIP: 835  
FP: 18-27 31-33

CONTRACTOR \_\_\_\_\_ LOCATION \_\_\_\_\_  
LEASE \_\_\_\_\_ IP \_\_\_\_\_ SEC \_\_\_\_\_ TWP \_\_\_\_\_ RNG \_\_\_\_\_  
ELEVATION \_\_\_\_\_ RTD \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_

# GLOBAL OIL FIELD SERVICES, LLC

0013319

ATTN: 24 S. Lincoln  
Russell, KS 67665

SERVICE POINT: Russell KS

DATE <u>1-19-19</u>	SEC.	TWP. .	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>LS Holste</u>	WELL #. <u>#1 8</u>	LOCATION <u>2 N of Atwood 3 E 1 N East</u>			COUNTY <u>Rawlins</u>	STATE <u>KS</u>	<u>11:00pm</u>
OLD OR <input checked="" type="radio"/> NEW (CIRCLE ONE)		into					

CONTRACTOR <u>Whit Night Drilling Rig #1</u>	OWNER <u>Castle Resources</u>
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u>	T.D.
CASING SIZE <u>9 5/8</u>	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>25'</u>	
PERFS	
DISPLACEMENT	
EQUIPMENT	
PUMP TRUCK # <u>417</u>	CEMENTER <u>Cody</u>
	HELPER <u>Rason</u>
BULK TRUCK # <u>379</u>	DRIVER <u>Tom</u>
BULK TRUCK #	DRIVER

CEMENT AMOUNT ORDERED <u>150sx 60/40 Poz</u>	
<u>3% CC 2% Gel</u>	
COMMON	@
POZMIX	@
GEL	@
CHLORIDE	@
ASC	@
	@
	@
	@
	@
	@
	@
HANDLING	@
MILEAGE	@
	TOTAL

REMARKS:  
Ran 6,250 of 9 5/8 casing + Ljt. Acroked to Rig. Brindle circulation. Holed to track + plugged 150sx cement + displaced 19 3/4 bbls + shot DV.

Cement P.D. Circulate to Surface

CHARGE TO: Castle Resource

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Global Oil Field Services, LLC  
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME \_\_\_\_\_

SIGNATURE [Signature]

SERVICE	
DEPTH OF JOB	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE	@ _____
MANIFOLD	@ _____
	@ _____
	@ _____
	TOTAL _____

PLUG & FLOAT EQUIPMENT	
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
	TOTAL _____

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS



# GLOBAL OIL FIELD SERVICES, LLC 0013355

REMIT TO 24 S. Lincoln  
Russell, KS 67665

SERVICE POINT: Russell KS

DATE <u>Feb 19</u>	SEC <u>23</u>	TWP. <u>7S</u>	RANGE <u>33 W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Holsler</u>	WELL # <u>1</u>	LOCATION <u>2 N of Atwood 13 3E</u>			COUNTY <u>Rowles</u>	STATE <u>KS</u>	
OLD OR NEW (CIRCLE ONE)			<u>1 Wash F 22-718</u>				

CONTRACTOR Whelan Oil Drilling, Rig #

TYPE OF JOB Kodak Plug

HOLE SIZE 7 3/8 T.D. 4562

CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER Castle Resources

CEMENT AMOUNT ORDERED 2405X 60/80 Poz 1/2" Wiper Plug Seal

EQUIPMENT

PUMP TRUCK # 417 CEMENTER Cody

BULK TRUCK # 379 HELPER Tison

BULK TRUCK # \_\_\_\_\_ DRIVER Sean

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON _____	@ _____
POZMIX _____	@ _____
GEL _____	@ _____
CHLORIDE _____	@ _____
ASC _____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
HANDLING _____	@ _____
MILEAGE _____	@ _____
TOTAL	_____

REMARKS:

27400' 603X

2620' 1005X

310' 503X

Center 10' 105X wiper plug

Rig 3005X

CHARGE TO: Castle Resources

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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PRINTED NAME \_\_\_\_\_

SIGNATURE [Signature]

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE @ \_\_\_\_\_

MILEAGE @ \_\_\_\_\_

MANIFOLD @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

SALES TAX (if Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS