

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)</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. 1040

Date	Sec.	Twp.	Range	County	State	On Location	Finish
10-22-18				Trego	KS		1/20
Lease				Location		Finish	
Baughner				Eils 3N 4W 4002 12W Winto		1/20	
Contractor			Well No.	Owner			
Western well			4	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				
Part Collar			American Oil				
Hole Size		T.D.	Street				
7 7/8							
Csg.		Depth	City				
5 1/2			State				
Tbg. Size		Depth	The above was done to satisfaction and supervision of owner agent or contractor.				
2 7/8							
Tool		Depth	Cement Amount Ordered				
Tool Tech		1657	350 80# 20 QMDC 1/4# 10				
Cement Left in Csg.		Shoe Joint	Meas Line				
			Displace 7BL				
EQUIPMENT			used 150				
Pumptrk 5 No.			Common				
Cementer			Poz. Mix				
Helper			Gel. 4				
Bulktrk No.			Calcium				
Driver			Hulls				
Driver			Salt				
Driver			Flowseal 80#				
Driver			Kol-Seal				
JOB SERVICES & REMARKS			Mud CLR 48				
Remarks: KCC Pat Stead			CFL-117 or CD110 CAF 38				
Rat Hole			Sand				
Mouse Hole			Handling 350				
Centralizers			Mileage				
Baskets			FLOAT EQUIPMENT				
D/V or Port Collar			Guide Shoe				
Test 5 1/2 to govt spot 4 SK			Centralizer				
off open tool + mix 150 SK			Baskets				
Cement - Cement circulated.			AFU Inserts				
Close tool pressure to govt.			Float Shoe				
Run 5 joints + wash clean.			Latch Down				
USED 150 SK + 5 gal			Pumptrk Charge				
Thanks			Mileage 24 port collar				
Signature			Tax				
Brent Hoffman			Discount				
			Total Charge				

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No. 1026

Date	10-3-18	Sec.	23	Twp.	12	Range	21	County	Finley	State	KS	On Location		Finish	12/15/18
Lease								Well No.		Owner					
Baugher								4		To Quality Oilwell Cementing, Inc.					
Contractor								You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Martin #24															
Type Job								Charge To							
Surface								American Oil							
Hole Size				T.D.				Csg.				Depth			
12 1/4				260				8 5/8				259			
Tbg. Size				Depth				Street				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								165 80/20 3/4 CC 2/4 GEL							
Meas Line				Displace											
				15 1/2 BCL											
EQUIPMENT								Common							
Pumptrk 5 No. Cementer								132							
Helper								Poz. Mix							
Brett								33							
Bulktrk No. Driver								Gel.							
Bulktrk 9 No. Driver								3							
Driver								Calcium							
SM								6							
JOB SERVICES & REMARKS								Hulls							
Remarks:								Salt							
Rat Hole								Flowseal							
Mouse Hole								Kol-Seal							
Centralizers								Mud CLR 48							
Baskets								CFL-117 or CD110 CAF 38							
D/V or Port Collar								Sand							
8 5/8 on bottom. Est. Circulation =								Handling 174							
Mix 165 SK & Dispbce.								Mileage							
Cement Circulated:								FLOAT EQUIPMENT 8 5/8 Swage							
								Guide Shoe							
								Centralizer							
								Baskets							
								AFU Inserts							
								Float Shoe							
								Latch Down							
								Pumptrk Charge Surface							
								Mileage 24							
								Tax							
								Discount							
								Total Charge							
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. 1119

Date	10-8-18	Sec.	23	Twp.	12	Range	21	County	Trego	State	Ks	On Location		Finish	4:30 PM
Lease	Baughes			Well No.	#4			Location	Ellis - 3N, 3W to 400 Rd, 1/2 N, W/5						
Contractor	Murfin #24			Owner	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	Long string			Charge To	American oil										
Hole Size	4020			T.D.											
Csg.	17# 5 1/2" New			Depth	4018'										
Tbg. Size				Depth											
Tool	Port Collar			Depth	1665'										
Cement Left in Csg.	21'			Shoe Joint	21'										
Meas Line				Displace	92 3/4 BLS										
EQUIPMENT				Common	175										
Pumptrk	17	No.		Cementer	David										
				Helper											
Bulktrk	9	No.		Driver	Jack										
				Driver											
Bulktrk	P.U.	No.		Driver	Rick										
				Driver											
JOB SERVICES & REMARKS				Common	175										
Remarks:	<p>500 gal mud Clear 48, 20 Bl KCL</p> <p>Hulls 2 gal</p> <p>Salt 15</p> <p>Flowseal</p> <p>Kol-Seal 750 #</p> <p>Mud CLR 48 500 gal</p> <p>CFL-117 or CD110 CAF 38</p> <p>Sand</p> <p>Handling 197</p> <p>Mileage</p>														
Rat Hole	305x														
Mouse Hole	155x														
Centralizers	1, 3, 5, 7, 9, 56														
Baskets	57														
D/V or Port Collar	#57 1665'														
Pipe on bottom, break Circulation pump				Handling	197										
500 gal mud Clear 48, 10 BLS KCL spacer				Mileage											
Plug Rathole + mouse hole. Cement 5 1/2"				FLOAT EQUIPMENT											
Casing w/ 1305x, wash pump + lines				Guide Shoe	Port Collar										
Displaced w/ 92 3/4 BLS First 9 BLS				Centralizer	7										
w/ KCL. Rebased + held.				Baskets	1										
				AFU Inserts											
Lift pressure 700 #				Float Shoe	1										
Land plug to 1500 #				Latch Down	1										
				Rotating head Rotating head											
				Pumptrk Charge											
				Mileage	24										
				Tax											
				Discount											
				Total Charge											
Signature				Aven Weavering											