

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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12039
11919

TICKET NUMBER 55484
LOCATION Ottawa, KS
FOREMAN Jim Green

PRESSURE PUMPING LLC
PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

INVOICE #814585

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-16-18	7069	Compton #7	NE 36	16	21	Mt
CUSTOMER <u>Leased Well Service</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>PO Box 520</u>			669	Jim Gre		
CITY <u>Ottawa</u>			368	Alamad		
STATE <u>Ks</u>	ZIP CODE <u>66067</u>		369	Alamad		
			558	Gar Wall		
JOB TYPE <u>Longstring</u>	HOLE SIZE <u>5 3/8"</u>	HOLE DEPTH <u>820'</u>	CASING SIZE & WEIGHT <u>6 1/2" 78</u>	OTHER		
CASING DEPTH <u>692'</u>	DRILL PIPE	TUBING	CEMENT LEFT IN CASING			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	DISPLACEMENT PSI			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE			

REMARKS: Held safety meeting. Establish circulation mix and pump 15sk cement. Plug back 120' bottom of hole. Mix and pump 100' gel to flush hole. Mix and pump 95sk Poz-Blend IA Cement with 2% gel. Circulated cement to surface. Flush pump clear of cement. Pump 2" rubber plug to TD. Pressure up to 800' PSI. Well held safe float.

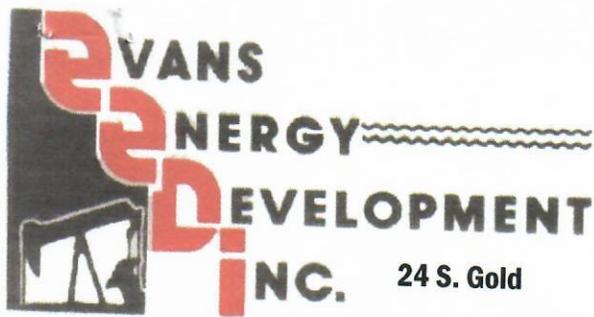
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0002	20	MILEAGE Cement Pump	143.00	
CE0711	1	Ton Mileage	660.00	
WE0853	2 HRC	UAC TR	200.00	
		Sub Total	2503.00	
		- Less 40%	-1001.20	
		Total		1501.80
CC5840	110 SK	Poz-Blend IA	1485.00	
CC5965	289 K	Engel	86.70	
CP8176	1	2" Rubber Plug	45.00	
		Sub Total	1616.70	
		- Less 40%	-646.68	
		Total		970.02
		SALES TAX	870	77.50
		ESTIMATED TOTAL		2549.42
		DATE		(4/24/04)

SCANNED

Ravin 3737

AUTHORIZATION Boe Fual TITLE PRES. DATE (4/24/04)

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



24 S. Gold

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Reusch Well Service, Inc.

Compton #7

API #15-121-31,537

November 14 - November 16, 2018

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
5	soil & clay	5
3	shale	8
10	lime	18
15	shale	33
14	lime	47
26	shale	73 51-red bed-55
14	lime	87
13	shale	100
12	sandstone	112 making water, grey
72	shale	184
19	lime	203
9	shale	212
6	sandstone	218
21	shale	239
6	lime	245
19	shale	264
12	lime	276 grey no oil
1	shale	277
2	lime	279
16	shale	295
25	lime	320
10	shale	330
20	lime	350 oil show
4	shale	354
7	lime	361
2	shale	363 green no oil
4	lime	367 base of the Kansas City
24	shale	391
9	sand	400 soft, grey sand
81	shale	481
2	broken sand	483 grey sand & shale, light oil show
54	shale	537
6	lime	543
7	shale	550
7	lime	557
11	shale	568
1	coal	569
4	shale	573
6	lime	579

1	limey sand	580
1	oil sand	581 soft brown sand, good bleeding
0.5	oil sand	581.5 limey white and brown sand, good bleeding
1	oil sand	582.5 soft brown sand, good bleeding
0.5	oil sand	583 white & brown sand, limey, good bleeding
0.5	oil sand	583.5 soft brown oil sand, good bleeding
1	limey sand	584.5 brown & whitehard, ok bleeding
1	lime	585.5
1.5	silty shale	587
10.5	shale	597.5
5.5	lime	603
12	shale	615
5	lime	620
11	shale	631
1	lime	632
2	shale	634
4	lime	638
11	shale	649
1	lime	650
5	shale	655
3.5	broken sand	658.5 80% brown sand 20% shale gassy, ok bleeding
3.5	oil sand	662 brown sand, gassy, ok bleeding
0.5	broken sand	662.5 50% shale 50% brown sand ok bleeding
1.5	oil sand	664 brown sand, ok bleeding, gassy
2.5	broken sand	666.5 badly broken 40% brown sand, 60% shale light bleeding
3.5	silty shale	670
85	shale	755
5	lime	760 laminated with lots of shale seams
29	shale	789
5	sand	794 hard white sand, no oil
26	shale	820 TD

Drilled a 9 7/8" hole to 22.4'

Drilled a 5 5/8" hole to 820'

Set 22.4' of 7" casing threaded and coupled cemented with 6 sacks of cement.

Set 692' of used 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp and 1 seating nipple.

Seating Nipple at 632'

Well was plugged back from 820' to 720' then long string was completed.

Peru Core Times		
	<u>Minutes</u>	<u>Seconds</u>
580		53
581	1	4
582		54
583	1	7
584	3	15
585	1	47
586		39
587		38
588		48
589		47
590		53
591		58
592	1	6
593		56
594		51
595		46
596		48
597	3	13

	<u>Minutes</u>	<u>Seconds</u>
655		38
656		43
657		47
658		51
659		55
660		49
661		36
662		40
663		40
664		35
665		36
666		37
667		41
668		43
669		46
670		47
671		51
672		58
673	1	1
674	1	-