

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	White Exploration, Inc.
Well Name	PAUL 1
Doc ID	1463472

### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	1769	375 sacks of extended lead cement followed by 150 sacks of Class "C"	525	Class "C" includes 2% CC
Production	7.875	5.5	15.5	5479	Bottom hole is 80 sacks of Multi-Density Cement and 200 Sacks of Pro-C Cement and DV Tool is cemented with 245 sacks Multi-Density Cement and 200 sacks of Pro-C Cement	725	Multi Density contains 3% CC and 1/4# Floseal/sack. Pro-C Cement contains 2% gel, 10% salt, 5# Kolseal/sack, .6% c16A Fluid Loss additive and .25% defoamer



# Quality Well Service, Inc.

PO Box 468  
Pratt, KS 67124

# Invoice

Date	Invoice #
2/25/2019	C-1971

Bill To
White Exploration Inc 1635 N. Waterfront Pkwy, Ste. 100 Wichita, KS 67206

*well file*  
*(C)*

P.O. No.	Terms	Lease Name
		Paul #1 OWWO

Description	Qty	Rate	Amount
MDC	375	18.00	6,750.00T
Pro-C	200	18.00	3,600.00T
Common	150	15.50	2,325.00T
Calcium	16	60.00	960.00T
CC-1	8	35.00	280.00T
Salt	20	13.00	260.00T
Flo-Seal	262.5	3.70	971.25T
Kol-Seal	1,000	0.75	750.00T
Mud Flush	500	1.00	500.00T
Cement Defoamer	47	6.00	282.00T
Fluid Loss	113	7.50	847.50T
5 1/2" Rotating Scratchers	26	82.00	2,132.00T
5 1/2 Centralizer	12	50.00	600.00T
5 1/2 Basket	2	190.00	380.00T
5 1/2 DV Tool	1	5,000.00	5,000.00T
5 1/2 AFU Float Shoe	1	275.00	275.00T
5 1/2 LD Plug & Baffle	1	225.00	225.00T
Longstring	1	1,750.00	1,750.00
Plug Container	1	150.00	150.00
Handling	778	2.10	1,633.80
.08 * sacks * miles	20,000	0.08	1,600.00
Service Supervisor	1	150.00	150.00
LMV	75	3.75	281.25
Heavy Equipment Mileage	300	8.00	2,400.00
Additional Hours	8	250.00	2,000.00
Customer Discount		-18,051.40	-18,051.40
Discount Expires after 30 days from the date of the invoice		0.00	0.00

Thank You for your business!	<b>Subtotal</b>
	<b>Sales Tax (7.5%)</b>
	<b>Total</b>

**Quality Well Service, Inc.**

**PO Box 468  
Pratt, KS 67124**

**Invoice**

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2/25/2019	C-1971

Bill To
White Exploration Inc 1635 N. Waterfront Pkwy, Ste. 100 Wichita, KS 67206

P.O. No.	Terms	Lease Name
		Paul #1 OWWO

Description	Qty	Rate	Amount
Paul #1 OWWO Stanton Co.			

Thank You for your business!	<b>Subtotal</b>	\$18,051.40
	<b>Sales Tax (7.5%)</b>	\$1,960.33
	<b>Total</b>	\$20,011.73



# QUALITY WELL SERVICE, INC.

7066

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2-24-19				STANTON	Ks		
Lease PAUL	Well No. #1 OWWO		Location Johnson City Ks 1 E 3/4 S Winto				
Contractor MURFIN Delg Rig # 22				Owner			
Type Job 5 1/2 2 Stage				To Quality Well Service, Inc. 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. 5610'		Charge To White Exploration Inc				
Csg. 5 1/2 15.5	Depth 5603.90		Street				
Tbg. Size	Depth		City State				
Tool	Depth		City State				
Cement Left in Csg. 70.90	Shoe Joint 70.90		The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line	Displace 132.99		Cement Amount Ordered 200# Proc 375# MDC 150# G...				
<b>EQUIPMENT</b>				COMMON 150#			
Pumptrk 8 No.			Common Proc 200#				
Bulktrk 7 No.			Poz. Mix MDC 375#				
Bulktrk 12 No.			Gel.				
Pickup 15 No.			Calcium 16#				
<b>JOB SERVICES &amp; REMARKS</b>				Hulls CC-1 396			
Rat Hole			Salt 20#				
Mouse Hole			Flowseal 262.5 lbs				
Centralizers 2-3-4-5-6-7-8-10-12-15-56-59			Kol-Seal 1000 lbs				
Baskets Bottom Jt 2-53			Mud CLR 48 500 gal				
D/V or Port Collar Bottom 59 to P 50: 314' 3064			CFL-117 or CD110 CAF 38 47 lbs				
FE in Loc Rig Circulating to str			Sand C16-A 113 lbs				
Lowering down O.P.			Handling 773				
Tell's on Loc			Mileage 20,000				
Run 134 #'s 5 1/2 15.5" set 2 5609.90			5 1/2 <b>FLOAT EQUIPMENT</b>				
Csg or Bottom Hook up to csg			Guide-Shoe 2 EA Rotate Scratchhead				
Break circ 15 min Down Hook up to csg			Centralizer 12 EA				
Rotate 1 hr Change			Baskets 2 EA				
Run 132 #'s set 2 5479			AEU Inserts 1 EA Rotate Head 1 EA 5 1/2 PC				
Hook up to csg & Break circ with rig			Float Shoe 1 EA				
15 min SHUT DOWN Down Bill			Latch Down 1 EA				
Hook up to csg & Break circ 1 hr			SERVICE SW 1 EA				
Start Pumping Pie flush			LMI 75				
5 Bbls H <sub>2</sub> O 12 Bbls MDC Flush 5 Bbls H <sub>2</sub> O			Pumptrk Charge 2.5				
Start mix 200# Proc			Mileage 300				
SHUT DOWN			Add lbs = 8				
Signature <i>[Handwritten Signature]</i>							Tax
							Discount
							Total Charge



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 Home Office 30060 N. Hwy 281, Pratt, KS 67124  
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Date	2-24-19	Sec.		Twp.		Range		County	STANTON	State	KI	On Location		Finish	
Lease	Paul	Well No.	#1 OWWO			Location									
Contractor											Owner				
Type Job											To Quality Well Service, Inc.				
Hole Size											You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.				
Csg.											Charge To				
Tbg. Size											Street				
Tool											City				
Cement Left in Csg.											State				
Meas Line											The above was done to satisfaction and supervision of owner agent or contractor.				
											Cement Amount Ordered				

CLEAR Pump Lines  
 START DISP 2 1/2 KCL 97 out 600" Lft PSI  
 120 out slow RATE 130 out Land Plug 1100 psi p 1400" RELEASE HELP  
 1/2 Bbl Back Drop OPEN tool Long Closing Plug  
 OPEN DV tool 1000" Pump 10 Bbl HES 3 BPM 500"  
 Knock Loose Hook up to Rig size 1 hr  
 Plug R-M Hold 52x mpc  
 START mix 245 sc mpc  
 START mix 150 x Comrow  
 110 out DW CLEAR Pump Lines RELEASE Closing Plug  
 START DISP  
 40 out size out to Pit  
 74 out Plug down 1500"  
 RELEASE HELP  
 Pass size thru Both JOBS  
 Thank you  
 Please Call AGAIN  
 TODD DEER TS JAKE JEM