

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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Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 346-337-6211
<http://kcc.ks.gov/>

Dwight D. Keen, Chair
Shari Feist Albrecht, Commissioner
Susan K. Duffy, Commissioner

Laura Kelly, Governor

August 02, 2019

Bill Hanson
Drillers & Producers, Inc.
PO BOX 385
NEWTON, KS 67114-0385

Re: ACO-1
API 15-115-21505-00-00
BURTON 9
NW/4 Sec.15-22S-04E
Marion County, Kansas

Dear Bill Hanson:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 03/06/2019 and the ACO-1 was received on August 02, 2019 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department

10 E 7TH
 O Box 92
 EKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **4346**
 Foreman David Cochran
 Camp Encke

11-15-115-21505

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
3-10-19	1284	Burton #9	15	23 S	4 E	Marion	KS	
Customer Driller's + Producer's Ten			Safety Meeting D6 11M 2H 5M AM		Unit #	Driver	Unit #	Driver
Mailing Address P.O. Box 385					104	Blair M.		
City Marion					116	Zeke H.		
State KS					113	Steve B.		
Zip Code 67104					141	Kevin M.		

Job Type Logging Hole Depth 2181' KB Slurry Vol. 146 Bbl Tubing _____
 Casing Depth 2723-20' 64 Hole Size 7 7/8 Slurry Wt. 12.2% Drill Pipe _____
 Casing Size & Wt. 5 1/2" 17" Cement Left in Casing _____ Water Gal/SK 83 Other _____
 Displacement 65 Bbl Displacement PSI 1500 Bump Plug to 1500 PSI BPM 5

Remarks: Safety Meeting. Drop Pencil ball. Rig up to 5 1/2" casing. Break circulation w/ 15 Bbl fresh water. Set Basket Size @ 11 Bbl @ 900 PSI. Mixed 450 sks 60/40 Pozmax Cement w/ 16% Gel, 2" Phosocal / sk @ 12.2% / gal, yield 1.75 = 146 Bbl Slurry. Wash out Pump + Lines. Shut down. Released 5 1/2" Top Rubber Plug. Dumped plug + seat w/ 65 Bbl fresh water. Final pumping pressure of 1000 PSI. Pump plug to 1500 PSI. Good cement returns to surface = 7 Bbl slurry to pit. Released pressure. Floct + Plug held. Good circulation @ all times while cementing. Job complete. Rig down.

Plus Reticle w/ 20 sks + Phosocal w/ 15 sks.
Centralizers - 13,57. Buckets - 174.25

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1100.00	1100.00
C107	25	Mileage	4.20	105.00
C203	450 sks	60/40 Pozmax Cement	13.40	6030.00
C206	2320"	Gel @ 16%	.21	487.20
C208	900"	Phosocal @ 2"/sk	1.30	1170.00
C108A	12.35 Ten	Ten Mileage - Pail Trucks	1.40	677.25
C113	5 HRS	30 Bbl Vac Truck	90.00 / HRL	450.00
C774	3300 Gals	City Water	1000/1000 Gals	33.00
C761	1	5 1/2" Type B Basket Size	1355.00	1355.00
C504	4	5 1/2" Centralizers	50.00	200.00
C604	2	5 1/2" Cement Buckets	236.00	472.00
C404	1	5 1/2" Top Rubber Plug	74.00	74.00
			Sub Total	12153.45
			Less 5%	644.90
			7.5%	Sales Tax
				736.59
Authorization _____ Title _____			Total	12,245.94

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

810 E 7TH
 PO Box 92
 UREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
4389
 Ticket No. _____
 Foreman MUSSEN MCGEE
 Camp ELITE

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
5-6-17	1871	Ruston # 7	18	22	4	Marion	KS
Customer <u>Denon + Products Inc.</u>		Safety Meeting <u>10M AD 200'</u>	Unit #	Driver	Unit #	Driver	
Mailing Address <u>P.O. Box 388</u>			<u>105</u>	<u>AD</u>			
City <u>Newton</u>		State <u>Ks</u>	Zip Code <u>67114</u>				

Job Type SIP Hole Depth 224 EB Slurry Vol. _____ Tubing _____
 Casing Depth 34 6L Hole Size 11.75 Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 8.75 Cement Left in Casing 20 Water Gal/SK _____ Other _____
 Displacement 11.94 Displacement PSI _____ Bump Plug to _____ BPM 5

Remarks: Safety + job procedure meeting. 5:10 to 8:30 casing break circulation
of 10 gal water mix + pump 10 gal 20' 37' cycle 27 gal = 34 gal
Slurry @ 14.8" diameter of 224 gal water 4 gal good cement returned to
surface. Close casing. Job complete. TBM down.

Thank you
 Mussen McGee

Code	Qty or Units	Description of Product or Services	Unit Price	Total
A 201	1	Pump Charge	840.00	840.00
A 107	35	Mileage	300.00	10500.00
C 200	115	SKI class A cement	15.75	1811.25
C 203	325'	casing = 37	63	2047.5
C 206	200'	gal = 27	21	4200
E 108 A	5.4	Tax Tax Mileage	64.00	345.60
			Sub Total	3368.00
			- 5%	168.40
			Sales Tax	9.37
Authorization <u>authorized by John Gabel</u> Title <u>Tool Pusher</u>			Total	3546.77

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810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
4389
 Ticket No. _____
 Foreman Russell McCoy
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
3-6-19	1284	Burton # 9	19	22	4	Marion	KS	
Customer <u>Drillers + Producers Inc.</u>			Safety Meeting <u>RM</u> <u>AB</u> <u>zevi</u>		Unit #	Driver	Unit #	Driver
Mailing Address <u>Po. Box 385</u>					<u>105</u>	<u>AB</u>		
City <u>Newton</u>			State <u>Ks</u>		Zip Code <u>67114</u>			
					<u>110</u>	<u>zevi</u>		

Job Type SIP Hole Depth 224 KB Slurry Vol. _____ Tubing _____
 Casing Depth 211 G-L Hole Size 12 1/4 Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 8 5/8 Cement Left in Casing 20' Water Gal/SK _____ Other _____
 Displacement 12 3/4 Displacement PSI _____ Bump Plug to _____ BPM 5

Remarks: Safety + Job Procedure meeting. Rig to 8 5/8 casing Break circulation w/ 10 Bbl water mix + pump 115 SK's Reg w/ 3% CACL2 2% Gel = 20 Bbl Slurry @ 14.8# Displace w/ 12 3/4 Bbl water 4 Bbl good cement Returns to surface. Close casing in. Job complete, Tear Down.

Thank you
Russell McCoy

Code	Qty or Units	Description of Product or Services	Unit Price	Total
<u>C-101</u>	<u>1</u>	<u>Pump Charge</u>	<u>840.00</u>	<u>840.00</u>
<u>C-107</u>	<u>25</u>	<u>Mileage</u>	<u>4.20</u>	<u>105.00</u>
<u>C-200</u>	<u>115</u>	<u>SK's CLASS A cement</u>	<u>15.75</u>	<u>1811.25</u>
<u>C-205</u>	<u>325 #</u>	<u>CACL2 = 3%</u>	<u>.63</u>	<u>204.75</u>
<u>C-206</u>	<u>200 #</u>	<u>Gel = 2%</u>	<u>.21</u>	<u>42.00</u>
<u>C-108 A</u>	<u>5.4</u>	<u>Ton Ton mileage</u>	<u>M-C</u>	<u>365.00</u>
			<u>Sub TOTAL</u>	<u>3,368.00</u>
			<u>- 5%</u>	<u>176.12</u>
			<u>Sales Tax</u>	<u>7.5%</u>

Authorization witnessed by Judd Gulick Title Tool Pusher Total 3,346.23

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810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **4346**
 Foreman David Gardner
 Camp Eureka

API # 15-115-21505

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
3-10-19	1284	Burton #9	15	22 S.	4 E.	Marion	KS
Customer	Mailing Address		City	State	Zip Code	Safety Meeting	Unit #
Driller's + Producer's Inc.	P.O. Box 385		Newton	KS	67114	DG AM Z# SM KM	Driver
							Unit #
							Driver

Job Type Longstring Hole Depth 3181' K.B. Slurry Vol. 140 Bbl Tubing _____
 Casing Depth 2733.20' G.L. Hole Size 7 7/8 Slurry Wt. 12.8# Drill Pipe _____
 Casing Size & Wt. 5 1/2" 17# Cement Left in Casing _____ Water Gal/SK 8.3 Other _____
 Displacement 65 Bbl Displacement PSI 1000 Bump Plug to 1500 PSI BPM 5

Remarks: Safety Meeting. Drop Brass ball. Rig up to 5 1/2" casing, Break circulation w/ 15 Bbl fresh water. Set Basket Shoe @ 11 Bbl @ 900 PSI. Mixed 450 sks 60/40 Pozmix Cement w/ 6% Gel, 2# Phenoseal /sk @ 12.8#/gal, yield 1.75 = 140 Bbl Slurry. Wash out Pump & lines. Shut down. Released 5 1/2" Top Rubber Plug. Displace plug to seat w/ 65 Bbl fresh water. Final pumping pressure of 1000 PSI. Bump plug to 1500 PSI. Good cement returns to surface = 7 Bbl slurry to pit. Released pressure. Float & Plug held. Good circulation @ all times while cementing. Job complete. Rig down.

Plug Rathole w/ 20 sks & Mouse Hole w/ 15 sks.
Centralizers - 1, 3, 5, 7. Baskets - 17 & 35.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1100.00	1100.00
C107	25	Mileage	4.20	105.00
C203	450 sks	60/40 Pozmix Cement	13.40	6030.00
C206	2320#	Gel @ 6%	.21	487.20
C208	900#	Phenoseal @ 2#/sk	1.30	1170.00
C108B	19.35 Tons	Ton Mileage - Bulk Trucks	1.40	677.25
C113	5 HRS	80 Bbl Vac Truck	90.00 / HR	450.00
C224	3300 Gals.	City Water	1000 / 1000 Gals	33.00
C761	1	5 1/2" Type B Basket Shoe	1355.00	1355.00
C504	4	5 1/2" Centralizers	50.00	200.00
C604	2	5 1/2" Cement Baskets	236.00	472.00
C404	1	5 1/2" Top Rubber Plug	74.00	74.00
			Sub Total	12,153.45
			Less 5%	644.50
			7.5% Sales Tax	736.59
				12,245.54

Thank you

Authorization _____ Title _____ Total 12,245.54

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