

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
--	---

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
---	--	------------------------------------

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:	
----------------	-------	---------	------------	--

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



Cement or Acid Field Report
Ticket No. 4551
Foreman Russell McCoy
Camp Eureka

Date	Cust. ID #	Lease & Well Number		Section	Township	Range	County	State
6-6-19	1037	Busewitz 14-1		14	24S	4E	Butler	KS
Customer			Safety Meeting	Unit #	Driver		Unit #	Driver
C+G Drilling			Rm AM Caleb Zev	104	Alan - M			
Mailing Address				112	Caleb			
701 E. River				141	Zev			
City		State	Zip Code					
Eureka		KS						

Job Type Longstring Hole Depth 2730 KB Slurry Vol. 38 45 Tubing _____
 Casing Depth 2711 G.L. Hole Size 7 7/8 Slurry Wt. 13.8 Drill Pipe _____
 Casing Size & Wt. 5 1/2 used Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement 66 Bbl Displacement PSI 750 Bump Plug to 1400 BPM 5

Remarks: Safety Meeting + Job Procedure Rig to 5 1/2 casing w/ Rotating Swivel
BREAK Circulation w/ 15 Bbl Fresh water Mix 115 SKs T.S. cement w/ 5# Kolseal
2# Phenoseal @ 13.8 w/ yield of 1.8 = 38 Bbl Slurry (Plug Rathie + M.H.)
WASH OUT Pump + Lines Release 5 1/2 Latch Down Plug Displacement 66 Bbl
Water FINAL Pump PSI 750# Seat Plug to 1400# Release PSI Plug Held.
NOTE GOOD circulation @ All times During cementing Procedure.
Job Complete, Tear Down. THANK YOU Russell McCoy

Centralizers # 1 # 3 # 4 # 5 # 7 # 17 Zones 2460-2540 Mississippi
 NOTE Plug R.H. w/ 20 SKs M.H. w/ 15 SKs 2090 - K.C.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-102	1	Pump Charge		
C-107	10	Mileage From Eldorado	1100.00 4.20	1100.00 42.00
C-201	150	SKs Thick Set cement (115 for Productive)	20.50	3075.00
C-208	300#	Phenoseal = 2# per/sk	1.30	390.00
C-207	750#	Kolseal = 5# per/sk	.47	352.50
C-108a	7.05	Ten Mileage		
C-222	2	Gallon KLL Mixed in First 20 Bbl Displacement	30.00	60.00
C-421	1	5 1/2 Latch Down Plug	242.00	242.00
C-661	1	5 1/2 AFU Float Shoe	309.00	309.00
C-504	5	5 1/2 x 7 7/8 Centralizers	50.00	250.00
			SUBTOTAL	6185.50
			- 5%	324.78
			Sales Tax	304.10
			6.5%	
Authorization <u>Witnessed by Tim</u> Title <u>owner</u>			Total	6165.12

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
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **4707**
 Foreman Russell McCoy
 Camp Eureka AB

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
	1037	Rusenitz 14-1	14	24	4 E	Butler	Ks
Customer <u>C+G Drg</u>			Unit #	Driver	Unit #	Driver	
Mailing Address <u>701 E. River</u>			106	Zev			
City <u>Eureka</u>			141	Josh			
State <u>Ks</u>			128	Josh			
Zip Code <u>67045</u>							

Job Type Acid Hole Depth _____ Slurry Vol. _____ Tubing 238
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 5/8 used Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement 90 Bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting + Job Procedure. Packer set 90' Above Perf's 2460-94
Stage 2 mult Acid + Swab Back on 8-13-19 Rig to 238 tubing Pump 2 Bbl
Acid @ 1200# 4 BPM to pretest rate + PSI for Ball off Packer Holding Good
Annulus Full load Ball Guv w/ 10 Balls Pump Remaining 1416 gallons Acid w/
2 Ball per BBI = 34 Bbl Ball Action from 1200-1400 w/ Break Backs During Ball
Job Final Rate 4.6 BPM 1400# w/ 10 Bbl over Flush shut Down, Release Ball's
wait 5 min Resume Pumping @ 4.6 BPM 1100# After Ball Release. Flush
w/ 90 Bbl salt water @ 1500# 5.8 BPM Isif 500# 15 min 400# Close well
IN Over night. Job Complete, Tear Down.
NOTE 136 Bbl TOTAL LOAD THANK YOU
Russ-AB-Zosh

Code	Qty or Units	Description of Product or Services	Unit Price	Total
A-106	2	Pump Charge <u>Retreat Stage 2</u> Mileage	210.00 N.C.	420.00 -
A-205	1500	gallons 15% HCL Acid	1.75	2625.00
A-213	3	gallons Acid Inhibitor	42.00	126.00
A-210	3	gallons Surface Tension Reducer	33.00	99.00
A-214	6	gallons Non Emulsifier Agent	32.00	192.00
A-215	6	gallons Iron Control	38.00	228.00
A-109	1	Ball Injector Rental	105.00	105.00
A-218	70	1.3 perf Ball Sealers	2.50	175.00
A-113	2	hr Bu BBI VAC Truck	90.00	180.00
				4,150.00
			- 5%	(207.95)
			Sales Tax	6.93
			Total	3949.98

Authorization by Tim Gulick Title owner

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.

GEOLOGICAL REPORT

C & G Drilling, Inc.

Busenitz #14-1

SE SE NW SE Section 14-124S-R4E

Butler County, Kansas

COMMENCED: 06-03-19

COMPLETED: 06-06-19

CONTRACTOR: C & G Drilling Co.

SIZE OF HOLE: 7 7/8"

SURFACE PIPE: 8 5/8"

CEMENTED WITH: N/A

LONG STRING: 5 1/2"

CEMENTED WITH: N/A

R.T.D.: 2730'

STATUS: Oil

API #: 15-015-24124

OPERATOR LIC.: 32701

FIELD: Plum Grove NW

ELEVATION: 1411 K.B.

LOGS: None

MUD SYSTEM: Chemical

OTHER:

Mike M. Stout
7-19

William M. Stout
Geologist

FORMATION TOPS

1402 G.L. 1411 K.B.

Formation	Sample
Kansas City	2083-672
Base Kansas City	2228-817
Altamont	2344-933
Cherokee	2434-1021
Mississippi Chert	2463-1052
Mississippi Lime	2518-1107
Hunterhook	2552-1141
Hunton	2650-1239
Viola	2712-1301
Total Depth	2730-1319

SAMPLE DESCRIPTIONS

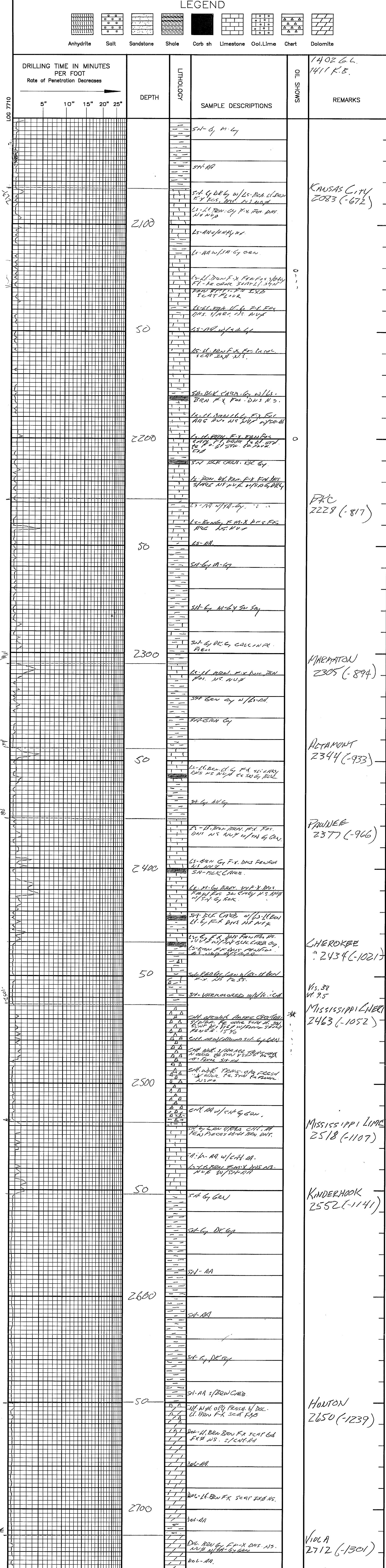
- Kansas City 2083' (-672)
2118' - 2124'
Limestone - light brown, fine crystalline, few fossils, faint odor, scattered light stain, few spots free oil, intercrystalline porosity, scattered fluorescence.
- 2198' - 2204'
Limestone - light brown, fine crystalline, few fossils, faint odor, trace light stain, trace free oil, intercrystalline porosity, trace fluorescence.
- Mississippi 2463' (-1052)
2463' - 2495'
Chert - off white, some amber, opaque to translucent, trace weathered, fair odor, scattered light stain, show free oil with few gas bubbles, scattered vugular and pin point porosity with fluorescence (up to 15%).

CONCLUSIONS

Decision was made to set and cement casing to further evaluate the Mississippian through perforations.

LEGEND

Anhydrite	Salt	Sandstone	Shale	Carb sh	Limestone	Ool.Lime	Chert	Dolomite



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



Cement or Acid Field Report

Ticket No. **4531**
 Foreman David Gardner
 Camp Eureka

API# 15-015-24124

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
6-4-19	1037	Busewitz #14-1	14	24 S.	4 E.	Butler	KS
Customer			Safety Meeting	Unit #	Driver	Unit #	Driver
C + G Drilling			DG	105	Jason		
Mailing Address			JH	114	Josh		
701 E. River			JV				
City	State	Zip Code					
Eureka	KS	67045					

Job Type Surface Hole Depth 220' K.B. Slurry Vol. 25 Bbl Tubing _____
 Casing Depth 204.90' G.C. Hole Size 12 1/4" Slurry Wt. 15" Drill Pipe _____
 Casing Size & Wt. 9 5/8" Cement Left in Casing 15' 1/2" Water Gal/SK 6.5 Other _____
 Displacement 16 Bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting. Rig up to 9 5/8" casing w/ 8 1/2" Landing Joint + change over. Break circulation w/ 10 Bbl fresh water. Mixed 105 sks Class 'A' Cement w/ 3% Cactz + 2% Gel @ 15"/gal, yield 1.35 = 25 Bbl Slurry. Displace w/ 16 Bbl fresh water. Shut down. Close casing in. Good cement returns to surface - 7 Bbl Slurry to pit. Job complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	890.00	890.00
C107	10	Mileage	4.20	42.00
C200	105 sks	Class 'A' Cement	15.75	1653.75
C205	300 ^g	Cactz @ 3%	.63	189.00
C206	200 ^g	Gel @ 2%	.21	42.00
C108A	4.935 Tons	Ton Mileage - Bulk Truck	m/c	365.00
<u>Thank You</u>				
			Sub Total	3,181.75
			Less 5%	165.21
			Sales Tax	122.51

Authorization by Judd Gulick Title Tool Pusher Total 3,139.05

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.