

Confidentiality Requested:

☐ Yes ☒ NoKANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

Form must be Typed
Form must be Signed
All blanks must be FilledWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33097
 Name: Southern Star Central Gas Pipeline, Inc.
 Address 1: 4700 HWY 56
 Address 2: _____
 City: OWENSBORO State: KY Zip: 42301 + 8498
 Contact Person: SETH TURNER
 Phone: (270) 852-5000
 CONTRACTOR: License # 32775
 Name: McLean's CP Installation, Inc.
 Wellsite Geologist: SETH TURNER
 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 #: _____

11/05/2019 11/08/2019 11/08/2019
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No.: 15-153-21214-00-00

Spot Description: _____

SE - NW SE - NE Sec. 6 Twp. 5 S. R. 35 ☐ East ☒ West
1692 Feet from ☒ North / ☐ South Line of Section
916 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SWGPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84County: RawlinsLease Name: C60706 Well #: 01A

Field Name: _____

Producing Formation: N/AElevation: Ground: 3091 Kelly Bushing: 3091Total Vertical Depth: 200 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at: 20 FeetMultiple 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: 0 ppm Fluid volume: 0 bblsDewatering method used: Evaporated

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 DistributionALT ☐ I ☐ II ☒ III Approved by: Karen Ritter Date: 11/20/2019

Operator Name: Southern Star Central Gas Pipeline, Inc. Lease Name: C60706 Well #: 01A
 Sec. 6 Twp. 5 S. R. 35 ☐ East ☒ West County: Rawlins

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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:	☐ Yes ☒ No ☒ Yes ☐ No ☐ Yes ☒ No ☐ Yes ☒ No ☐ Yes ☒ No	☒ Log Formation (Top), Depth and Datum ☐ Sample <table style="width: 100%;"> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> <tr> <td>SAND</td> <td>0</td> <td>59</td> </tr> <tr> <td>CLAY</td> <td>60</td> <td>79</td> </tr> <tr> <td>SHALE</td> <td>80</td> <td>200</td> </tr> </table>	Name	Top	Datum	SAND	0	59	CLAY	60	79	SHALE	80	200
Name	Top	Datum												
SAND	0	59												
CLAY	60	79												
SHALE	80	200												

CASING RECORD ☒ New ☐ 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
Surface	16.500	10.500	70	20	BENTONITE	27	WATER

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
☐ Perforate				
☐ Protect Casing	-			
☐ Plug Back TD				
☐ 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: ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. <i>(Submit ACO-5)</i> ☐ Commingled <i>(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:					

Form	ACO1 - Well Completion
Operator	Southern Star Central Gas Pipeline, Inc.
Well Name	C60706 01A
Doc ID	1483093

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	16.500	10.500	70	20	BENTONITE	27	WATER



4520 State Hwy 136, Amarillo, TX 79108-7617 • tel. 806-383-5047 • fax 806-383-1716

Deep Well GroundBed Data:			Date: 11/08/19		
Job Number: SST21-2019-KS-A			Drilling Contractor: MCLEANS CP INSTALLATION, INC.		
Company Name: SOUTHERN STAR			Facility/Line: C60706-A		
Subject: DEEP WELL			State: KS		
Well Depth: 200 FT			County: RAWLINS		
Diameter: 10 IN			Other-Driller: TR		
Casing: 20 FT 10"			Drilling Method: MUD		
Type of Backfill: SC2			Base Useable Water:		
Anode Type: 1 SET OF 10 ANOTECH 2684					
GPS: N39.65060043, W101.28443909			TEST VOLTS:		
Remarks:					
Drilling Log			Electrical Log		
			BEFORE BACKFILL		
Depth:	Formation Type:	Material:	Volt	Anode Depth	Anode #
0'	SAND	CASING/HOLEPLUG			
5'	SAND	CASING/HOLEPLUG			
10'	SAND	CASING/HOLEPLUG			
15'	SAND	CASING/HOLEPLUG			
20	SAND	CASING/HOLEPLUG			
25	SAND	HOLEPLUG			
30	SAND	HOLEPLUG			
35	SAND	HOLEPLUG			
40	SAND	HOLEPLUG			
45	SAND	HOLEPLUG			
50	SAND	HOLEPLUG			
55	SAND	HOLEPLUG			
60	CLAY	HOLEPLUG			
65	CLAY	HOLEPLUG			
70	CLAY	COKE			
75	CLAY	COKE			
80	SHALE	COKE			
85	SHALE	COKE			
90	SHALE	COKE			
95	SHALE	COKE			
100	SHALE	COKE			
105	SHALE	COKE			10
110	SHALE	COKE			
115	SHALE	COKE			9
120	SHALE	COKE			
125	SHALE	COKE			8
130	SHALE	COKE			
135	SHALE	COKE			7
140	SHALE	COKE			
145	SHALE	COKE			6
150	SHALE	COKE			
155	SHALE	COKE			5
160	SHALE	COKE			
165	SHALE	COKE			4
170	SHALE	COKE			
175	SHALE	COKE			3
180	SHALE	COKE			
185	SHALE	COKE			2
190	SHALE	COKE			
195	SHALE	COKE			1
200	SHALE	COKE			

BELOW GROUND COMPLETION

Well Name: C60706 A
County: Rawlins

