

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](mailto: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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5	lime	762
6	shale	768
6	lime	774
6	shale	780
7	lime	787
13	shale	800
4	lime	804
7	shale	811
9	lime	820
21	shale	841
1	lime	842
2	shale	844
2	silty shale	846
1	limy sand	847 CP hard white, no show
6	broken sand	853 40% brown sand, 60% shale, light bleed gassy
12	oil sand	865 brown sand good bleed good saturation
6	silty shale	871
29	shale	900 TD

Drilled a 9 7/8" hole to 91.45'

Drilled a 5 5/8" hole to 900'

Set 91.45' of new 7" casing threaded and coupled. Cemented by consolidated.

Set 885' of new 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp.

Dug 1 pit

Cored 847'-866'



**REMIT TO**  
**QES Pressure Pumping LLC**  
 Dept:970  
 P.O.Box 4346  
 Houston, TX 77210-4346

**MAIN OFFICE**

P.O.Box884  
 Chanute,KS 66720  
 620/431-9210,1-800/467-8676  
 Fax 620/431-0012

Invoice

Invoice# 901152

Invoice Date: 07/29/19

Terms: C.O.D.

Page 1

TAUY OIL  
 P.O. BOX 973  
 BALDWIN CITY KS 66006  
 USA

FAULKNER #10

Part No	Description	Quantity	Discounted Unit Price	Discounted Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	825.0000	825.00
CE0002	Equipment Mileage Charge - Heavy Equipment	20.000	3.9325	78.65
CE0711	Minimum Cement Delivery Charge	1.000	363.0000	363.00
WE0853	80 BBL Vacuum Truck (Cement Services)	2.000	55.0000	110.00
CC5840	Poz-Blend I A (50:50)	125.000	7.4250	928.13
CC5965	Bentonite	410.000	0.1650	67.65
CC6075	Celloflake	31.000	1.1000	34.10
CP8176	2 7/8" Top Rubber Plug	1.000	24.7500	24.75
SubTotal After Discount				2,431.28

Tax: 81.73  
 Total: 2,513.01

Amount Due 4,569.11 If paid after 07/29/19



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 Dept:970  
 P.O.Box 4346  
 Houston, TX 77210-4346

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P.O.Box884  
 Chanute,KS 66720  
 620/431-9210,1-800/467-8676  
 Fax 620/431-0012

Invoice Invoice# 901148

Invoice Date: 07/26/19 Terms: C.O.D. Page 1

TAUY OIL  
 P.O. BOX 973  
 BALDWIN CITY KS 66006  
 USA

FAULKNER # 10

Part No	Description	Quantity	Discounted Unit Price	Discounted Total
CE0450	Cement Pump Charge 0 - 1500'	1.000	825.0000	825.00
CE0711	Minimum Cement Delivery Charge	0.500	363.0000	181.50
WE0853	80 BBL Vacuum Truck (Cement Services)	1.500	55.0000	82.50
CC5840	Poz-Blend I A (50:50)	45.000	7.4250	334.13
CC5965	Bentonite	76.000	0.1650	12.54
CC6075	Celloflake	11.000	1.1000	12.10
SubTotal After Discount				1,447.77

Tax: 27.80  
 Total: 1,475.57

Amount Due 2,682.85 If paid after 07/26/19



24 S. Gold Paola, KS 66071

Allen's Holdings & Investments  
 Oil & Gas Well Drilling  
 Water Wells  
 Geo-Loop Installation

Phone: 913-557-9083  
 Fax: 913-557-9084

**WELL LOG**

Tauy Oil, Inc.  
 Faulkner #10

API #15-045-22297-00-00  
 July 19, 2019-July 22, 2019

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
8	soil & clay	8
20	sandstone	28 brown
10	shale	38 grey
28	sandstone	66 brown 46' wet
9	sandstone	75 course grained grey sandstone
10	sandstone	85 limy white & grey
115	shale	200
7	lime	207
13	shale	220
16	lime	236
10	shale	246
7	lime	253
5	shale	258
19	lime	277
1	shale	278
7	lime	285
37	shale	322
5	lime	327
7	shale	334
20	lime	354
46	shale	400
24	lime	424
13	shale	437
20	lime	457
23	shale	480
8	lime	488
23	shale	511
21	lime	532
7	shale	539
25	lime	564
4	shale	568
4	lime	572
4	shale	576
5	lime	581 Base of Kanasa City/Hertha
6	shale	587
6	sand	593 green sand, wet, gassy
35	shale	628
13	sand	641 grey sand with coal laminations
116	shale	757