

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)</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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PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1008026	1718	10/14/2019
INVOICE NUMBER			
93066836			

Pratt (620) 672-1201
 B SCOUT ENERGY MANAGEMENT
 I 4901 LBJ FREEWAY SUITE 300
 L DALLAS
 L TX US 75244
 T
 O ATTN: WILLIAMS

J LEASE NAME Martin 3A
 O LOCATION
 B COUNTY Kearny
 S STATE KS
 I JOB DESCRIPTION Cement-Casing Seat-Prod W
 T JOB CONTACT
 E

EDI INVOICE

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41192745	19572		Net - 30 days	11/13/2019

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 10/11/2019 to 10/11/2019</i>				
0041192745 Cement Production Liner/AFE#11679				
AFE # =11679;DEPARTMENT =Accounts Payable; 171819779L Cement-Casing Seat-Prod W 10/11/2019 Cement Production Liner/AFE#19572				
A-Con Blend	65.00	EA	22.50	1,462.50 T
Calcium Chloride	124.00	LB	0.45	55.80 T
C-37	47.00	LB	3.60	169.20 T
C-51	7.00	LB	9.90	69.30 T
Top Rubber Cement Plug, 4 1/2"	1.00	EA	80.00	80.00 T
4 1/2" Float Shoe(Blue)	1.00	EA	340.00	340.00 T
Heavy Equipment Mileage	200.00	MI	3.60	720.00 T
Blending & Mixing Service Charge	65.00	SK	0.63	40.95 T
Ton Mileage	306.00	MI	1.35	413.10 T
Depth Charge, 2001'-3000'	1.00	HR	810.00	810.00 T
Plug Container Utilization Charge	1.00	EA	112.50	112.50 T
Light Vehicle Mileage	100.00	MI	2.25	225.00 T
Cement Densimeter, with chart recorder	1.00	EA	157.50	157.50 T
Service Supervisor Charge	1.00	EA	75.00	75.00 T
Driver Charge	1.00	EA	35.00	35.00 T

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	4,765.85
BASIC ENERGY SERVICES,LP	BASIC ENERGY SERVICES,LP	TAX	309.78
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	5,075.63
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



Liberal Yard #1717 - Phone 620-624-2277 - 1700 S. Country Estates Road, Liberal KS 67901

PRESSURE PUMPING

Job Log

Customer:	Scout	Cement Pump No.:	37223 19572 13HRS	Operator TRK No.:	86531	
Address:		Ticket #:	1718 19779 L	Bulk TRK No.:	30464 37547 Ruben	30464 37547
City, State, Zip:		Job Type:	Z41 - Cement Production Liner			
Service District:	1718-Liberal KS	Well Type:	OIL			
Well Name and No.:	Martin 3A	Well Location:	36,21,38	County:	Kearny	State: Ks

Type of Cmt	Sacks	Additives	Truck Loaded On		
A-Con Cement	65	2% Calcium Chloride, .1% WCA-1, .75% C-37	30464 37547 Ruben	Front	Back
			30464 37547	Front	Back
				Front	Back

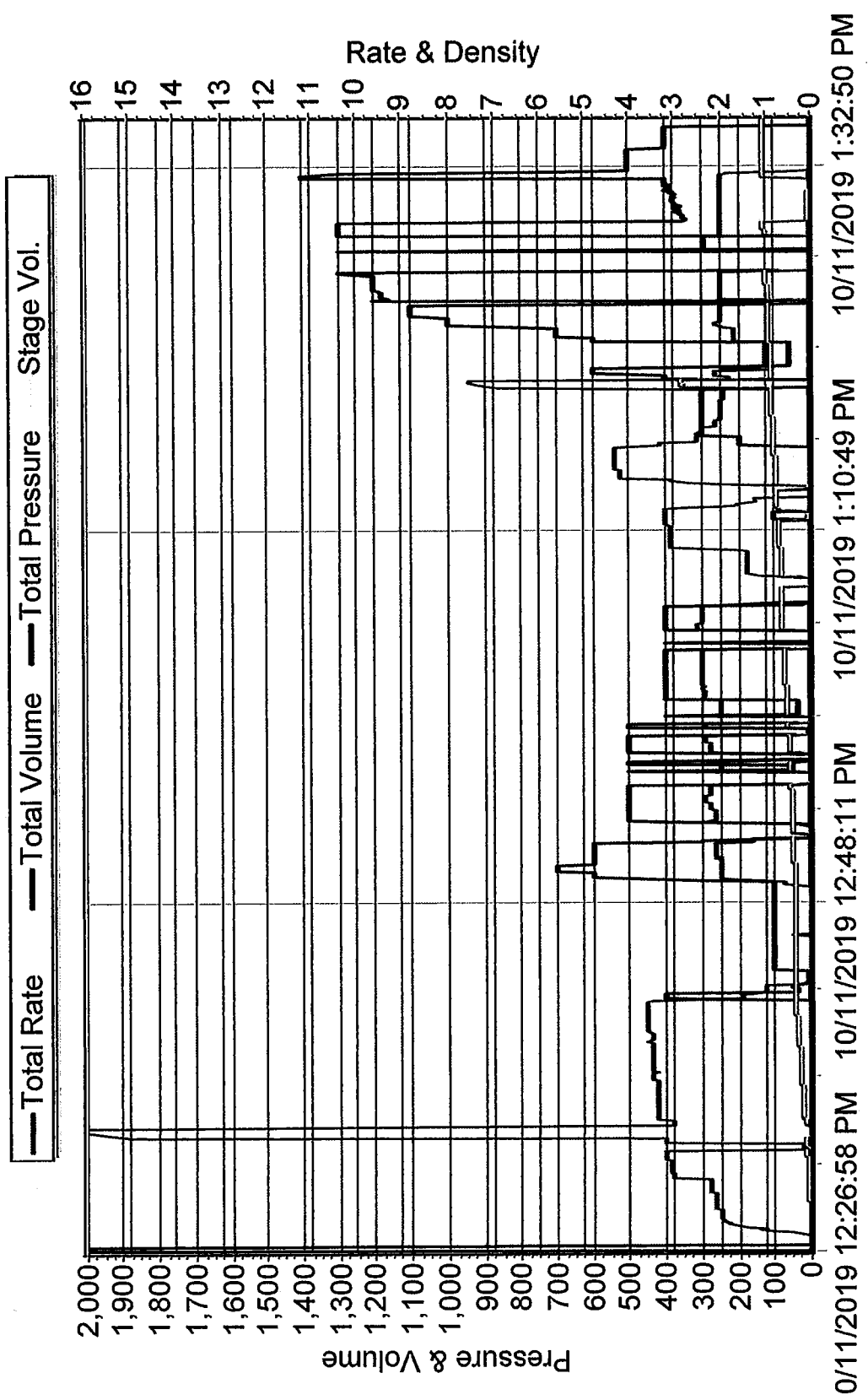
Lead/Tail:	Weight #1 Gal.	Cu/Ft/sk	Water Requirements	CU. FT.	Man Hours / Personnel	
Lead:	12.2	2.33	13.45	151.45	TT Man Hours:	41
Tail:					# of Men on Job:	3

Time (am/pm)	Volume (BPM)	Volume (BBLs)	Pumps		Pressure (PSI)		Description of Operation and Materials
			T	C	Tubing	Casing	
10:00am							Arrived at location
11:30am							Spot trucks/Rig up
12:00pm							Safety meeting
12:26pm						2500	Pressure test lines to 2500psi
12:28pm	1.3	45				500	Circulate well
12:49pm	2	26.9				700	Pump 26.9bbls of cement from 65sks at 12.22lbs
13:06pm							Shut down/Drop plug/Wash pump and lines to pit
13:13pm							Start displacement with fresh water
13:20pm	2	20				650	20bbls gone
13:26pm	2	33				1320	33bbls gone/Slow down rate
13:32pm	2	43				1500	Bump plug
							Release pressure to check if float holds
							Got 10 bbls of cement to surface
							Rig down
							Job completed
							Thanked company man and rig crew

Size Hole	5 1/2	Depth	2830		TYPE	
Size & Wt. Csg.	4 1/2 11.6#	Depth	2824	New / Used	SJ set	2819 Depth
Landing Psi	1000+	Depth			Retainer	Depth
Shoe Joint	5	Type			Perfs	CIBP

Customer Signature: <i>Brook Hays</i>	Basic Representative:	Victor A. Corgna
	Basic Signature:	<i>Victor A. Corgna</i>
	Date of Service:	10/11/2019

**Scout
Martin 3A
4 1/2 Liner
10/11/2019**



Lease & Well No. Martin #3A
Field Name Panoma Field (Council Grove)
Location - Legal 1320' FSL & 1320' FEL Sec 36-T21S-R38W
Location - GPS _____

Former Name _____
County & State Kearny, Kansas
API No. 15-093-20402

K.B. Elevation 3,345'
D.F. Elevation _____
Ground Level 3,338'

Surface Casing					
Size	8 5/8"	Weight	24#	Depth	310'
Grade	K-55	Sx. Cmt.	200 sx	TOC @	Surface
Drilled	12 1/4"				

Production Casing					
Size	5 1/2"	Weight	14.#	Depth	3,050'
Grade	K-55	Sx. Cmt.	700 sx	TOC @	600'
Drilled	7 7/8"				

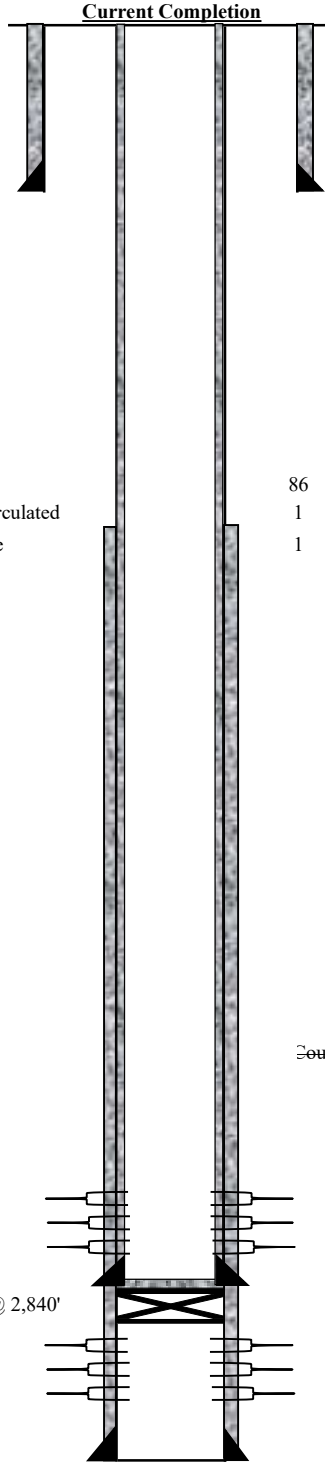
Production Liner					
Size	4 1/2"	Weight	11.6#	Depth	2,821'
Grade	J-55	Sx. Cmt.	65 sx	TOC @	Surface
Drilled	5 1/2"				

Well History

Spud Date: 3/15/1977
Completion Date: 3/29/1977

- o Perforated Council Grove @ 2 spf. Frac w/ 120,000 gals SW & 100,000# river sand. ATP =1400, ATR =137. 03/79 Tbg Leak. 11/79 Rod Part. 04/91 Pump Change, Stripping Job. 08/94 Tbg Leak, Flow T.
- o 08/94 Tbg Leak, Parted Tbg. 09/94 Pump Change, 500 gals 15% HCl. 11/98 Tbg Leak, Acidized w/ 1000 gals 15% HCl. 12/03 Tbg Leak, Stripping job. 04/04 Rod Part. 07/04 Rod Part, Pony. 09/06 Tbg Leak, Stripping Job.
- o 01/07 Rod Part. 01/08 Trashed Pump. 01/12 Stuck Pump, Acidize w/ 2000 gals 15% HCl.
- o 10/2019 Installed 4-1/2" liner to recomplete to Chase. CIBP set @ 2,840' and dump bailed 10' of CMT.
- o **1 Snap on Rod guides on btm 98 rods.**

TOC - Circulated @ Surface



PBTD: 2,828'
 TD: 3,055'

Production Test: 11/25/19

Oil	-	0	BBLS
Gas	-	73	MCF
Water	-	58	BBLS

Artificial Lift Method: Pumping Unit

Unit: Churchill 9M-50-84-36
SL: 36
SPM: 10

Production Equipment

Tbg:	KB	7'	7'
86 Jts 2-3/8" 4.7# J-55		2,793.6'	2,800.6'
1 2-3/8" SN		1.1'	2,801.7'
1 2-3/8" MA		8.0'	2,809.7'
		.0'	2,809.7'
		.0'	2,809.7'
		.0'	2,809.7'
EOT			2,809.7'
Rods:	KB	7'	7'
1 -1/8"x11' PR w/ 1-3/8"x6' PR		11.0'	11.0'
3 4',8',8' 3/4" Pony Rod		20.0'	31.0'
110 3/4" Grade D Rods		2,750.0'	2,781.0'
1 Brass Back-Off		.6'	2,781.6'
1 2"x1.25"x10"x4'		10.0'	2,791.6'
1 1"x1' Gas Anchor		1.0'	2,792.6'

Re-Perfs in Red

	Perforation Intervals		SPF	Holes
Council Grove	2,866'	- 2,942'		152
Chase	2,551'	- 2,558'		28
Chase	2,561'	- 2,566'		20
Chase	2,591'	- 2,594'		12
Chase	2,619'	- 2,627'		32
Chase	2,662'	- 2,666'		16
Chase	2,673'	- 2,677'		16
Chase	2,752'	- 2,757'		20
Chase	2,762'	- 2,765'		12

Last Edited
 TJS - 01/02/20