

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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**Lease & Well No.** Goering, Joe #1A

**Field Name** Panoma Field (Council Grove)

**Location - Legal** 1320' FSL & 1320' FEL (SE/4) Sec 12-T21S-R38W

**Location - GPS** \_\_\_\_\_

**K.B. Elevation** 3,356'

**D.F. Elevation** \_\_\_\_\_

**Ground Level** 3,349'

**Former Name** Joe Goering #1A

**County & State** Kearny, Kansas

**API No.** 15-093-20488

Surface Casing					
Size	8 5/8"	Weight	24#	Depth	341'
Grade	K-55	Sx. Cmt.	200 sx	TOC @	Surface
Drilled	12 1/4"				

Intermediate Casing					
Size		Weight		Depth	
Grade		Sx. Cmt.		TOC @	
Drilled					

Production Casing					
Size	5 1/2"	Weight	14.#	Depth	3,049'
Grade	K-55	Sx. Cmt.	700 sx	TOC @	1,100'
Drilled	7 7/8"				

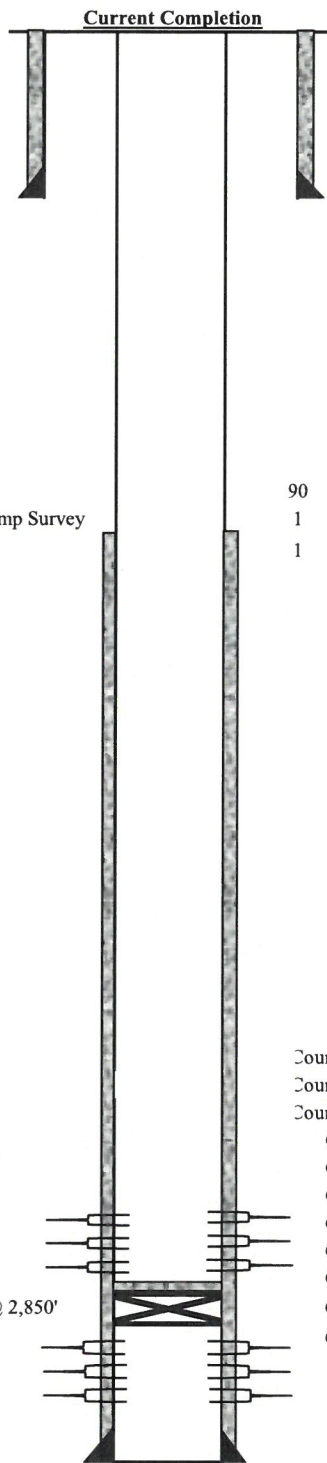
**Well History**

**Spud Date:** 3/6/1978

**Completion Date:** 3/27/1978

- o Perforated Council Grove @ 2 spf. Acidized w/ 2000 gals 15% HCl, frac w/ 120,000 gals SW & 150,000# river sand. 12/78 Trashed pump. 07/87 Rod Part. 02/89 Rod Part. 05/89 Rod Part. 08/89 Rod Part. 12/91 Pump Change.
- o 07/92 Rod Part. 12/92 Rod Part. 04/93 Rod Part. 07/93 Rod Part. 11/93 Rod Part. 06/94 Rod Part. 06/94 Trashed Pump. 06/94 Trashed Pump. 07/94 Pump Barrel Change. 01/97 Rod Part. 10/97 Rod Part. 12/97 Rod Part.
- o 11/98 Tbg Leak. 10/99 Tbg Leak. 10/99 Rod Part. 12/99 Rod Part. 11/00 Rod Part. 11/00 Rod Part, Replaced 35. 04/02 Tbg Leak. 04/02 Trashed Pump. 04/04 Rod Part. 04/04 Trashed Pump. 06/04 Rod Part. 02/05 Rod Part.
- o 04/05 Trashed Pump, Acidized w/ 2000 gals 15% HCl. 02/06 Pump Change. 03/07 Tbg Leak, Acidized w/ 2000 gals 15% HCl. 05/07 Rod Part. 06/07 Rod Part. 12/08 Rod Part, Acidized w/ 1000 gals 15% HCl. 01/09 Rod Part.
- o 02/09 Rod Part. 03/09 Rod Part. 03/09 Rod Part. 03/11 Trashed Pump. 11/11 Tbg Leak, Acidized w/ 2000 gals 15% HCl. 10/2019 Set CIBP @ 2,850' and dump bailed 10' of CMT on top.
- o **1 Snap on Rod guides on btm 70 rods.**

TOC - Temp Survey @ 1,100'



**Production Test: 12/02/19**

Oil	-	0	BBLs
Gas	-	70	MCF
Water	-	65	BBLs

**Artificial Lift Method: Pumping Unit**

**Unit:** Churchill 9M-50-84-36

**SL:** 36

**SPM:** 10

**Production Equipment**

Tbg:	KB	7'	7'
90	Jts 2-3/8" 4.7# J-55	2,782.2'	2,789.2'
1	2-3/8" SN	1.1'	2,790.3'
1	2-3/8" OEMA	8.0'	2,798.3'
		.0'	2,798.3'
		.0'	2,798.3'
		.0'	2,798.3'
EOT			2,798.3'

Rods:	KB	7'	7'
1	1/8"x11' PR w/ 1 3/8"x6' PR	11.0'	11.0'
3	6',8',8' 3/4" Pony Rod	22.0'	33.0'
110	3/4" Grade D Rods	2,750.0'	2,783.0'
1	On/Off Tool	.5'	2,783.5'
1	2x1.25x10x4	10.0'	2,793.5'
1	1"x1' Gas Anchor	1.0'	2,794.5'

**Re-Perfs in Red**

	Perforation Intervals	SPF	Holes
Council Grov	2,874' - 2,888'		2
Council Grov	2,888' - 2,899'		2
Council Grov	2,930' - 2,950'		2
Chase	2,554' - 2,556'		4
Chase	2,562' - 2,564'		4
Chase	2,588' - 2,592'		4
Chase	2,619' - 2,625'		4
Chase	2,660' - 2,664'		4
Chase	2,720' - 2,724'		4
Chase	2,750' - 2,756'		4
Chase	2,774' - 2,777'		4

CIBP @ 2,850'

PBTD: 2,837'

TD: 3,050'

Last Edited

TJS - 12/19/19









**DAILY COMPLETION / WORKOVER REPORT**

WELL NAME:	<b>GOERING, JOE #1A</b>	DATE:	8-Oct-19	REPORT NO:	2
LOCATION:	<b>12-31S-38W</b>	RIG/SERVICE UNIT:	PIONEER	AFE #:	11682
TD (KB):	0.0	PBTD (KB):	0.0	Size (inch)	Wt (lb/ft)
FORMATION:	CHASE RECOMPLETION	CASING:	8 5/8"	Grade	Landed @ KB
PERFORATIONS:	CHASE GROUP	CASING:	5 1/2"		341'
OBJECTIVE:	0	LINER:	NONE	0.0	0.0
CURRENT OPERATIONS:	SET PLUG	TUBING:			
		PKR:		TAC:	

TIME: Hrs	SITP:	psi	SICP:	psi
	MIRU PIONEER AND TIH W/ GAUGE RIG AND JUNK BASKET TO 2855 CHECKED LOGS GOOD. TOH W/ TOOL. RIGGED UP CIBP AND TIH TO 2850' CHECKED LOGS GOOD. SET CIBP AT 2850' TOH W/ TOOLS, RIGGED UP BAILER AND CEMENT AND RIH, DUMPED CEMENT ON TOP OF PLUG. TOH W/ BAILER. WILL TEST CSG IN THE A.M.AND PERF IF GOOD.			
	10-9-2019 MIRU.PRESS-TRUCK, LOADED TBG AND PRESS TO 2500# . WELL HELD 2500# FOR 15 MIN RELEASED PRESS RDMO.PRESS-TRUCK. MIRU WIRE-LINE LOADED GUNS AND TIH TO 2777' CHECK LOGS SHOT 1 ST OF PERFS 2774-2777 MOVED UP HOLE SHOT 2ND SET 2750-2756, MOVED UP HOLE SHOT 3RD SET 2720-2724, MOVED UP HOLE SHOT 4TH SET 2660-2664. CAME OUT OF HOLE CHECKED TO MAKE SURE ALL SHOTS WHERE FIRED (GOOD) RIH W/ SECOND GUN TO 2625. SHOT 5 TH SET OF PERF, 2619-2625, CAME UP HOLE SHOT 6 TH SET OF PERF 2588-2592, CAME UP HOLE SHOT 7TH SET 2562-2564, CAME UP HOLE SHOT 8TH SET 2554-2556. TOH W/ TOOLS, CHECKED TO MAKE SURE ALL SHOT WHERE FIRED (GOOD) RDMO.WIRE-LINE.			
	10-17-2019 ELDREDGE MIRU.SWAB RIG. RIH HITTING IFL AT 1350' SWABBED DOWN TO 2777' RDMO.SWAB RIG			

**DAILY COST SUMMARY**

Item	Service/Material Supplier	Amount		Amount
875.12 - WWC-WIRELINE UNIT	PIONEER	\$9,153	DAILY COST	<b>\$11,832</b>
			PREVIOUS CO	\$0
875.19 - WWC-ONSITE SUPERVISION	SCOUT	\$200	COST TO DAT	<b>\$11,832</b>
			AFE AMOUNT	\$0
875.1 - WWC-WELL TESTING	10-9-2019 PRO-STIM	\$400	AFE REMAININ	<b>(\$11,832)</b>
			WEATHER:	
875.19 - WWC-ONSITE SUPERVISION	SCOUT	\$200	PREPARED	B.KEMPKE
			RECEIVED I	
875.05 - WWC-WORKOVER OPERATIONS	TRECO	\$330	COMMENTS:	
875.13 - WWC-SWABBING UNIT	ELDREDGE	\$1,449		
875.19 - WWC-ONSITE SUPERVISION	SCOUT	\$100		
	<b>Total</b>	<b>\$11,832</b>		

**LOAD FLUID - bbls**

Load Fluid:	Total Load Fluid:	Daily Recovery:	Recovered to Date:	Load to Recover:
Oil: _____	Oil: 0.0	Oil: _____	Oil: 0.0	Oil: 0.0
Water: _____	Water: 0.0	Water: _____	Water: 0.0	Water: 0.0















