

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) (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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API# 15-179-20196-00-01

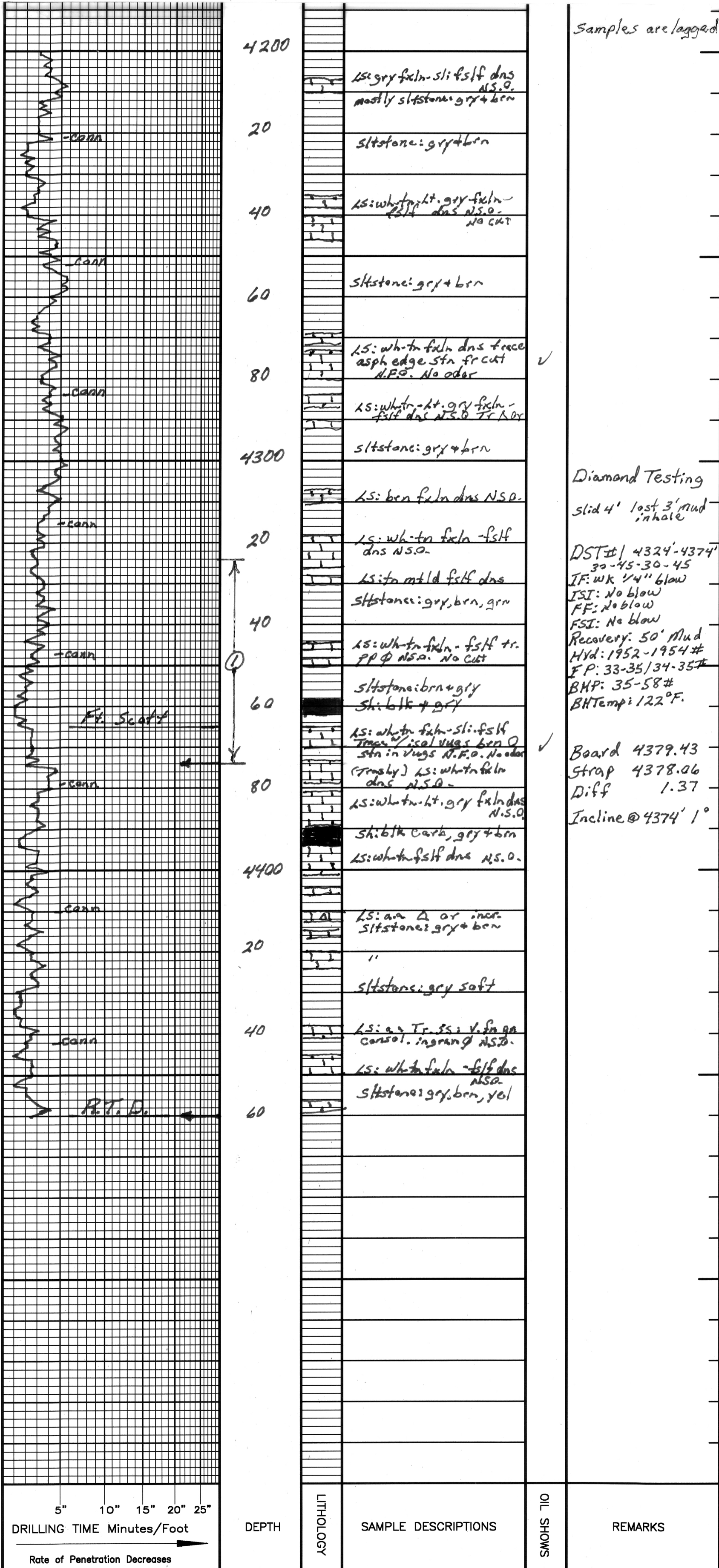
GEOLOGICAL REPORT
DRILLING TIME AND SAMPLE LOG

COMPANY	RL Investment, LLC	ELEVATION	KB 2817'
LEASE	Pratt #3 OIWD	DF	2815'
FIELD	Hoxie West	GL	2810'
LOCATION	2086 East 554' FWL	Depths Measured From	Log KB Drilling KB
SEC	35 TWP 8S RGE 29W	CASING	Surface 8 3/4" 2 3/4" Production 5 1/2"
COUNTY	Sheridan STATE Kansas	ELECTRIC LOGS	ELI
CONTRACTOR	STP Drilling Rig #1	FORMATION TOPS AND STRUCTURAL POSITION	
SPUD	8-21-18 COMP 8-24-18	FORMATION	SAMPLE E. LOG DATUM A B C D
SAMPLES SAVED FROM	4200 TO R.T.D.	Ft. Scott	4365 4365 - 1548 -1534
		Total Depth	4460 4460 - 1643 -1637

REFERENCE WELLS

A RL Investment, LLC, Pratt #3-35, SW 1/4 NW Sec. 35 - 8S-35W
B
C
D

REMARKS This OIWD washed down the Koch Exploration Co. Pratt #4 to the original total depth of 4195'. Samples were examined from 4200 to 4460' to evaluate the Ft. Scott formation. This formation top ran 14 feet lower than the reference producer and the D.S.T. results were negative for oil production. 5 1/2" casing was cemented to the Anhydrite so the Cedar Hills sandstone could be perforated for saltwater disposal. Richard B. Bell 8-24-18



7502



Company: R. L. Investment, LLC

Lease: Pratt OWWO #3

SEC: 35 TWN: 08S RNG: 29W
County: SHERIDAN
State: Kansas
Drilling Contractor: STP Drilling, LLC - Rig 1
Elevation: 2817 KB
Field Name: Hoxie West
Pool: Infield
Job Number: 217

Operation:
Test Complete

DATE
August
23
2018

DST #1 **Formation: Fort Scott** **Test Interval: 4324 - 4374'** **Total Depth: 4374'**
Time On: 19:09 08/23 Time Off: 03:15 08/24
Time On Bottom: 21:58 08/23 Time Off Bottom: 00:28 08/24

Electronic Volume Estimate:
8'

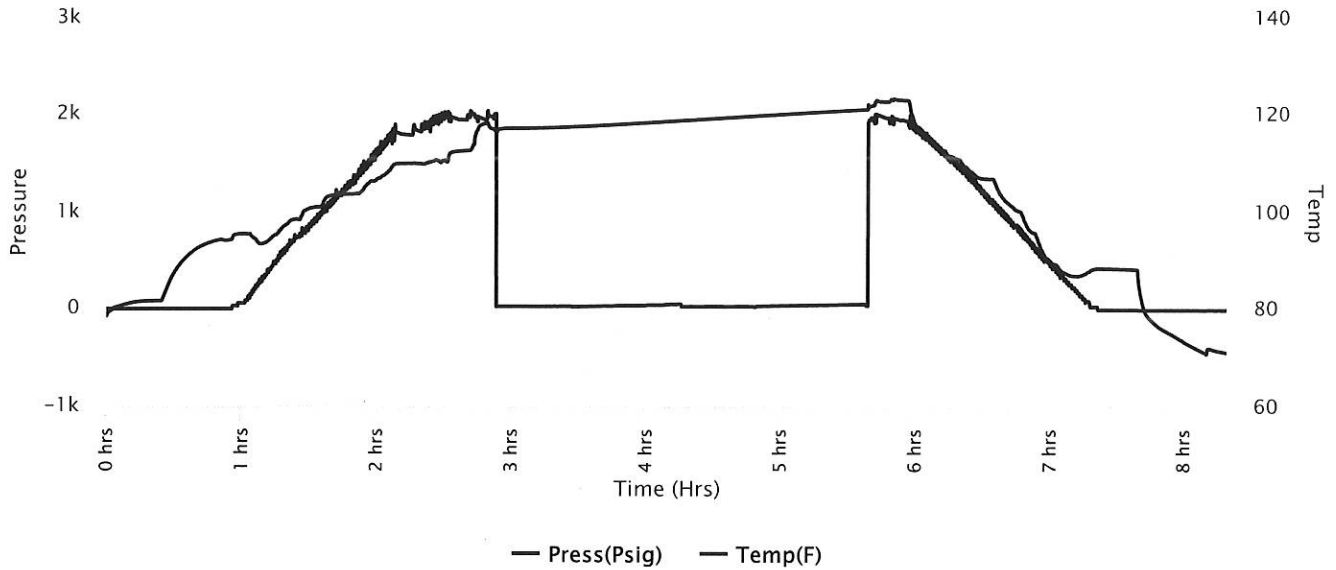
1st Open
Minutes: 30
Current Reading:
.20" at 30 min
Max Reading: .25"

1st Close
Minutes: 45
Current Reading:
0" at 45 min
Max Reading: 0"

2nd Open
Minutes: 30
Current Reading:
0" at 30 min
Max Reading: 0"

2nd Close
Minutes: 45
Current Reading:
0" at 45 min
Max Reading: 0"

Inside Recorder





Company: R. L. Investment, LLC

Lease: Pratt OWWO #3

SEC: 35.TWN: 08S.RNG: 29W
 County: SHERIDAN
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<u>Recovered</u>		<u>Description of Fluid</u>	<u>Gas %</u>	<u>Oil %</u>	<u>Water %</u>	<u>Mud %</u>
<u>Foot</u>	<u>BBLs</u>					
50	0.246	M	0	0	0	100

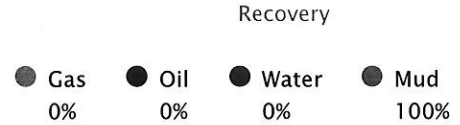
Total Recovered: 50 ft
 Total Barrels Recovered: 0.246

Reversed Out
 NO

Recovery at a glance

Initial Hydrostatic Pressure	1952	PSI
Initial Flow	33 to 35	PSI
Initial Closed in Pressure	35	PSI
Final Flow Pressure	34 to 35	PSI
Final Closed in Pressure	58	PSI
Final Hydrostatic Pressure	1954	PSI
Temperature	122	°F
Pressure Change Initial Close / Final Close	0.0	%

BBL
 0.2
 0.1
 0





**Company: R. L. Investment,
LLC**

Lease: Pratt OWWO #3

SEC: 35 TWN: 08S RNG: 29W
County: SHERIDAN
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Rig 1
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BUCKET MEASUREMENT:

1st Open: 1/4 in. blow. No build.
1st Close: No blow back.
2nd Open: No blow.
2nd Close: No blow back.

REMARKS:

Hit about 5 ft. of fill on first attempt. Tried opening tool on fill & tool slid to bottom. Pulled tool & added another joint. Made it to bottom. Majority of fluid recovered on test was when tool slid to bottom.

Tool Sample: 0% Gas 0% Oil 0% Water 100% Mud



**Company: R. L. Investment,
LLC**

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Elevation: 2817 KB
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Down Hole Makeup

Heads Up: 32.58 FT **Packer 1:** 4319.16 FT
Drill Pipe: 4203.86 FT **Packer 2:** 4324.16 FT
 ID-3 1/2 **Top Recorder:** 4308.58 FT
Weight Pipe: 0 FT **Bottom Recorder:** 4362 FT
 ID-2 7/8 **Well Bore Size:** 7 7/8
Collars: 120.31 FT **Surface Choke:** 1"
 ID-2 1/4 **Bottom Choke:** 5/8"
Test Tool: 33.57 FT
 ID-3 1/2-FH
 Jars
 Safety Joint
Total Anchor: 49.84

Anchor Makeup

Packer Sub: 1 FT
Perforations: (top): 3 FT
 4 1/2-FH
Change Over: 1 FT
Drill Pipe: (in anchor): 31.34 FT
 ID-3 1/2
Change Over: .5 FT
Perforations: (below): 13 FT
 4 1/2-FH



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Mud Properties

Mud Type: Chemical **Weight:** 8.6 **Viscosity:** 57 **Filtrate:** 7.6 **Chlorides:** 900 ppm

Double-click on the Preview image to view it in a pop

#1 ✓
PCC

KOCH EXPLORATION CO. 35-8-29W
WICHITA, KANSAS
#4 PRATT 150' NW, C NW SW
Contr. RED TIGER DRLG. CO. Cty. SHERIDAN

Geol. Pool HOXIE WEST

E. 2817 KB Cm. 3/29/69 Cp. 4/10/69 IPD&A/BKC †
28/4 DF

API 15-179-20, 196

LOG Tops Depth Datum Csg. 8-5/8" 223/175 SX

LOG Tops	Depth	Datum
ANH	2432	+ 385
HOW	3591	- 774
HEEB	3888	-1071
TOR	3911	-1094
LKC	3926	-1109
BKC	4168	-1351
RTD	4195	-1378
LTD	4197	-1380

DST 4092-4115/1', 15' M W/SP
O, BHP 44#/30"-53#/60"
FP 18-35#

NO CORES

INDEPENDENT OIL & GAS SERVICE
WICHITA, KANSAS