

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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>Name Top Datum |
|--|---|

| 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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><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:<br><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:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> | PRODUCTION INTERVAL:<br>Top Bottom |
|---|---|------------------------------------|

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record<br><i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |

|                |       |         |            |  |
|----------------|-------|---------|------------|--|
| TUBING RECORD: | Size: | Set At: | Packer At: |  |
|----------------|-------|---------|------------|--|



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 1099

Cell 785-324-1041

| Date   | Sec.                           | Twp.     | Range | County   | State | On Location | Finish   |
|--|--------------------------------|----------|-------|--|-------|-------------|----------|
| 1-3-19                                       |                                |          |       | Ellis  | KS    |             | 10:30 AM |
| Location Walker N Fair Ground Rd 3/4 W S11+0 |                                |          |       |  |       |             |          |
| Lease Weigel                                 | Well No. 1                     |          |       | Owner  |       |             |          |
| Contractor Express                           |                                |          |       | To Quality Oilwell Cementing, Inc.   |       |             |          |
| Type Job Port Collar                         |                                |          |       | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |       |             |          |
| Hole Size 2 7/8                              | T.D.                           |          |       | Charge To CG Oil   |       |             |          |
| Csg. 5 1/2                                   | Depth                          |          |       | Street   |       |             |          |
| Tbg. Size 2 7/8                              | Depth                          |          |       | City State   |       |             |          |
| Tool Port Collar                             | Depth 1070                     |          |       | The above was done to satisfaction and supervision of owner agent or contractor.   |       |             |          |
| Cement Left in Csg.                          | Shoe Joint                     |          |       | Cement Amount Ordered 200 80/20 QMDC 1/4 #10   |       |             |          |
| Meas Line                                    | Displace <del>3.5</del> 3.5 BX |          |       |  |       |             |          |
| <b>EQUIPMENT</b>                             |                                |          |       | Common 200 80/20 QMDC  |       |             |          |
| Pumptrk 20                                   | No.                            | Cementer | Chris | Poz. Mix   |       |             |          |
|  |                                | Helper   | Brett |  |       |             |          |
| Bulktrk                                      | No.                            | Driver   | Tony  | Gel.   |       |             |          |
| Bulktrk 15                                   | No.                            | Driver   | Tony  | Calcium  |       |             |          |
| <b>JOB SERVICES &amp; REMARKS</b>            |                                |          |       | Hulls  |       |             |          |
| Remarks: KCC Port Collar                     |                                |          |       | Salt   |       |             |          |
| Rat Hole                                     |                                |          |       | Flowseal 50#   |       |             |          |
| Mouse Hole                                   |                                |          |       | Kol-Seal   |       |             |          |
| Centralizers                                 |                                |          |       | Mud CLR 48   |       |             |          |
| Baskets                                      |                                |          |       | CFL-117 or CD110 CAF 38  |       |             |          |
| D/V or Port Collar                           |                                |          |       | Sand   |       |             |          |
| Test 5 1/2 to 800#                           |                                |          |       | Handling   |       |             |          |
| Open Tool + Est. Circulation                 |                                |          |       | Mileage  |       |             |          |
| Mix 200SK + Cement Circulation               |                                |          |       | <b>FLOAT EQUIPMENT</b>   |       |             |          |
| Close Tool + Test to 800#                    |                                |          |       | Guide Shoe   |       |             |          |
| Run 5 joints + wash Open                     |                                |          |       | Centralizer  |       |             |          |
| USED 200SK                                   |                                |          |       | Baskets  |       |             |          |
|  |                                |          |       | AFU Inserts  |       |             |          |
|  |                                |          |       | Float Shoe   |       |             |          |
|  |                                |          |       | Latch Down   |       |             |          |
|  |                                |          |       | Pumptrk Charge port collar Job   |       |             |          |
|  |                                |          |       | Mileage 15   |       |             |          |
|  |                                |          |       | Tax  |       |             |          |
|  |                                |          |       | Discount   |       |             |          |
|  |                                |          |       | Total Charge   |       |             |          |
| Signature Terry W. Presher                   |                                |          |       |  |       |             |          |

Thanks

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Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1127

|      |          |      |    |      |    |       |    |        |       |       |    |             |  |        |         |
|------|----------|------|----|------|----|-------|----|--------|-------|-------|----|-------------|--|--------|---------|
| Date | 10-25-18 | Sec. | 22 | Twp. | 13 | Range | 16 | County | Ellis | State | Ks | On Location |  | Finish | 4:15 AM |
|------|----------|------|----|------|----|-------|----|--------|-------|-------|----|-------------|--|--------|---------|

Lease Weigel Well No. 1 Location Walker - 3 1/2 N to Fairground Rd, 3/4 W

Contractor Southwind #1 Owner to Windmill, S Into

Type Job Longstring Charge To CG Oil  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Hole Size 7 7/8" T.D. 3438' Street

Csg. 5 1/2" New 17# Depth 3436.51' City

Tbg. Size Depth City State

Tool Port Collar Depth 1070' #56 The above was done to satisfaction and supervision of owner agent or contractor.

Cement Left in Csg. 41.13' Shoe Joint 41.13' Cement Amount Ordered 175 sx OProc 102 salt 5% Gilsomite

Meas Line Displace 78 3/4 BLS 500 gal mud Clear 48 1/4 # F/o seal

**EQUIPMENT**

Pumptrk 17 No. Cementer David Common 775

Bulktrk 3 No. Driver Doug Poz. Mix

Bulktrk p.u. No. Driver Rick Gel.

Calcium

**JOB SERVICES & REMARKS**

Remarks: Halls

Rat Hole Salt 14

Mouse Hole Flowseal 37#

Centralizers 3, 5, 8, 10, 55 Kol-Seal 750#

Baskets 11, 56 Mud CLR 48 500 gal

D/V or Port Collar #56 1070' CFL-117 or CD110 CAF 38

pipe on bottom, break Circulation Sand

pump 500 gal mud Clear 48, plug Handling 196

Rathole w/ 30 sx + mousehole w/ 15 sx Mileage

**FLOAT EQUIPMENT**

Cement 5 1/2" Casing w/ 130 sx. Shut Guide Shoe Port Collar

down wash pump 1+ lines. Displaced Centralizer 5

plug w/ 78 3/4 BLS of H2O. Released Baskets 2 ~~2~~ ~~2~~

+ held. Lift pressure # AFU Inserts

Land plug to #. Float Shoe 1

Latch Down 1

Pumptrk Charge prod string

Mileage 19

Tax

Discount

Total Charge

X Signature Ryan [Signature]