KOLAR Document ID: 1459445

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 #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
•	If Alternate II completion, cement circulated from:
Operator:	•
Well Name:	feet depth to: sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	·
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec. Twp. S. R. East West
Recompletion Date Recompletion Date	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:

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#### Page Two

Operator Name:				Lease Name:			Well #:			
Sec Twp.	S. R.	Ea	st West	County:						
	lowing and shu	ıt-in pressures, w	hether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,		
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log		
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample		
Samples Sent to G	eological Surv	ey	Yes No	Na	me		Тор	Datum		
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No							
		Re			New Used	ion, etc.				
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives		
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	l				
Purpose:		epth Ty Bottom	pe of Cement	# Sacks Used		Type and F	Percent Additives			
Protect Casi										
Plug Off Zon										
<ol> <li>Did you perform a</li> <li>Does the volume o</li> <li>Was the hydraulic</li> </ol>	of the total base f	luid of the hydraulic	fracturing treatment	_	_	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,		
Date of first Producti Injection:	on/Injection or Re	esumed Production	/ Producing Meth	nod:	Gas Lift 0	Other <i>(Explain)</i>				
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity		
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			ON INTERVAL:		
			Open Hole			mmingled mit ACO-4)	Тор	Bottom		
,	Submit ACO-18.)									
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record		
TUBING RECORD:	Size:	Set /	At:	Packer At:						
. 5213   12.00   10.	5120.		···	. 30.0.71						

Form	ACO1 - Well Completion
Operator	Haas Petroleum, LLC
Well Name	THOWE VHP-1
Doc ID	1459445

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.250	8.625	20	300	Cement	200	0



EMENT TREA	TMEN	r REP	DRT							
Customer:				Tho	ve V	HP #1		Ticket:	ICT	1795
-			County:			ee, KS		Date:		6/2019
_										ırface
Field Rep:	Field Rep: Dave Farthing S-T-R:				13s/	ive		Servico:	Su	mace
Downhole In	formatio	n	Slurry	,				Cen	nent Blend	
Hole Size:	12.25		Weight:	14.5 #/	5X		P	roduct	%	#
Hole Depth:	303		Water / Sx:	7,44 gal			Class A		100.0	18800
Casing Size:	8.625	In	Yield:	1.49 ft <sup>3</sup>	sx		Gel		2.0	376
Casing Depth:	300	ft	Bbls / Ft.:				CaCl		3.0	564
Tubing / Liner:		in	Depth:	ft	ft Metso					
Depth:		ft	Volume:	bbl	bbls		KolSeal			
Tool / Packer:	··		Excess:	%			PhenoSeal		0.5	100
Depth:		ft	Total Slurry:	53.07 bbl	9		Salt			
Displacement:	19.11	bbls	Total Sacks:	200 sx						
									Total	19,84
TIME RATE	PSI	BBLs	REMARKS	TIME R	ATE	PSI	BBLs	1	REMARKS	
			On location safety meeting							
			Spot In and rig up					· .		
·			Hook up to casing							
3,0	250.0	5.0	Break circulation				ļ <u>.</u>		,	
3.0	250.0	5.0	Mix and pump mudflush							
3.0	250.0	5.0	Mix and pump dyed water				ļ			
3.0	250.0	53.1	Mix and pump cement				<u> </u>			
	250.0		Get cement to surface							
			Stop							
3.0	250.0	1.0	Start displacement and wash up							
3.0	250.0		Continue displacement				_			
1.0	300.0	19.0	Stop and shut in well				<u> </u>			
	····	<u> </u>	Rig down							
		<u> </u>					<b>———</b>			
				<u> </u>			<del> </del>			
		<u> </u>		-						
		<u> </u>								
				, , , , ,						
	· · · · · · · · · · · · · · · · · · ·									
	CREW	ì	UNIT					SUMMAR	Y	
Cementer:	Jake	Heard	77		Average Rate Ave			verage Pressure Total Fluid		
Pump Operator:	Kevi	n	265	2.	71429	bpm	256.25	psi	88.07	bbis
Bulk #1:	Jost	1	240							
Bulk #2:										