

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
--	---

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
---	--	------------------------------------

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:	
----------------	-------	---------	------------	--



Franklin County, KS  
 Well: Wiseman 3  
 Lease Owner: TDR Construction

TDR Construction, Inc.  
 (913) 710-5400

Commenced Spudding:  
 1/18/2021

15-059-27269-00-00

WELL LOG

Thickness of Strata	Formation	Total Depth
0-9	soil-clay	9
15	lime	24
166	shale	190
25	lime	215
8	shale	223
10	lime	233
5	shale	238
17	lime	255
34	shale	289
21	lime	310
76	shale	386
23	lime	409
2	shale	411
2	lime	413
9	shale	422
6	lime	428
24	shale	452
5	lime	457
18	shale	475
2	lime	477
13	shale	490
8	lime	498
4	shale	502
12	lime	514
9	shale	523
24	lime	547
3	shale	550
4	lime	554
4	shale	558
6	lime	564 Hertha
5	shale	569
1	lime	570
9	sandy shale	579
105	shale	684
14	sand	698
6	sandy shale	704
37	shale	741
11	lime	752
3	shale	755
6	lime	761



# Log Book

Well No. 3

Farm WISSEMAN

KS Franklin  
(State) (County)

30 15 21  
(Section) (Township) (Range)

For IDR construction  
(Well Owner)

**Town Oilfield  
Services, Inc.**  
1207 N. 1st East  
Louisburg, KS 66053  
913-710-5400

W. Schuman Farm: Franklin County

KS State; Well No. 3

Elevation 1114

Commenced Spudding 1-18 2021

Finished Drilling 1-30 2021

Driller's Name Wesley Dollard

Driller's Name Ryan Ward

Driller's Name

Tool Dresser's Name

Tool Dresser's Name

Tool Dresser's Name

Contractor's Name TDR Construction

30 15 21

(Section) (Township) (Range)

Distance from 5 line, 2020 ft.

Distance from E line, 5110 ft.

3 sacks

14 hours

5-5/8" bore hole

### CASING AND TUBING RECORD

10" Set	10" Pulled
8" Set	8" Pulled
6 1/2" Set 20'	6 1/2" Pulled
4" Set	4" Pulled
2" Set	2" Pulled

### CASING AND TUBING MEASUREMENTS

Feet	In.	Feet	In.	Feet	In.
891 ft.		to	BEFFLE		
924 ft.		to	Floor Share		
940 ft.		to	TDR		
2-7/8"			Casing.		

Thickness of Strata	Formation	Total Depth	Remarks
0-9	soil - clay	9	
15	Lime	24	
106	Shale	190	
25	Lime	215	
8	Shale	223	
10	Lime	233	
5	Shale	238	
17	Lime	255	
34	Shale	289	
21	Lime	310	
76	Shale	386	
23	Lime	409	
2	Shale	411	
2	Lime	413	
29	Shale	442	
6	Lime	448	
24	Shale	472	
5	Lime	477	
18	Shale	495	
2	Lime	497	
13	Shale	490	
8	Lime	498	
4	Shale	502	
12	Lime	<del>514</del>	
9	Shale	523	
24	Lime	547	
3	Shale	550	



530

Thickness of Strata	Formation	Total Depth	Remarks
4	Lime	554	
4	Shale	558	
6	Lime	564	
5	Shale	569	
1	Lime	570	
9	Sandy Shale	579	
105	Shale	684	
14	Sand	698	
6	Sandy Shale	704	
37	Shale	741	
11	Lime	752	
3	Shale	755	
6	Lime	761	
4	Shale	765	
9	Lime	774	
13	Shale	787	
3	Lime	790	
4	Shale	794	
1	Lime	795	
3	Shale	798	
4	Lime	802	
2	Shale	804	
7	Lime	811	
16	Shale	827	
2	Lime	829	
10	Shale	<del>839</del>	
	Sand		

He. Hn.

839

Next Page







**CEMENT TREATMENT REPORT**

Customer: <b>TDR Construction</b>	Well: <b>Wiseman 3, 4</b>	Ticket: <b>EP1279</b>
City, State: <b>Louisburg, KS</b>	County: <b>FR, KS</b>	Date: <b>1/22/2021</b>
Field Rep: <b>Lance Town</b>	S-T-R: <b>30-16-21</b>	Service: <b>longstrings</b>

**Downhole Information**

Hole Size:	<b>5 5/8 In</b>
Hole Depth:	<b>940 ft</b>
Casing Size:	<b>2 7/8 In</b>
Casing Depth:	<b>924 ft</b>
Tubing / Liner:	<b>In</b>
Depth:	<b>ft</b>
Tool / Packer:	<b>baffle</b>
Tool Depth:	<b>892 ft</b>
Displacement:	<b>5.16 bbls</b>

**Calculated Slurry - Lead**

Blend:	<b>50/50/2</b>
Weight:	<b>14.25 ppg</b>
Water / Sk:	<b>5.83 gal / sk</b>
Yield:	<b>1.24 ft<sup>3</sup> / sk</b>
Annular Bbls / Ft.:	<b>bbls / ft.</b>
Depth:	<b>ft</b>
Annular Volume:	<b>0.0 bbls</b>
Excess:	<b></b>
Total Slurry:	<b>49.91 bbls</b>
Total Sacks:	<b>226 sk</b>

**Calculated Slurry - Tail**

Blend:	<b></b>
Weight:	<b>ppg</b>
Water / Sk:	<b>gal / sk</b>
Yield:	<b>ft<sup>3</sup> / sk</b>
Annular Bbls / Ft.:	<b>bbls / ft.</b>
Depth:	<b>ft</b>
Annular Volume:	<b>0 bbls</b>
Excess:	<b></b>
Total Slurry:	<b>0.0 bbls</b>
Total Sacks:	<b>0 sk</b>

TIME	RATE	PSI	BBLs	TOTAL BBLs	REMARKS
11:30 AM			-	-	on location, held safety meeting
	4.0		-	-	#3 - established circulation
	4.0		-	-	mixed and pumped 200# Bentonite Gel followed by 5 bbls fresh water
	4.0		-	-	mixed and pumped 115 sks 50/50 Pozmix cement with 2% Bentonite per sk, cement to surface
	4.0		-	-	flushed pump clean
	1.0		-	-	pumped 2 7/8" rubber plug to baffle with 5.16 bbls fresh water
			-	-	pressured to 800 PSI
			-	-	well held pressure, released pressure to set float valve
	4.0		-	-	washed up equipment
			-	-	
			-	-	
	4.0		-	-	#4 - established circulation
	4.0		-	-	mixed and pumped 200# Bentonite Gel followed by 5 bbls fresh water
	4.0		-	-	mixed and pumped 111 sks 50/50 Pozmix cement with 2% Bentonite per sk, cement to surface
	4.0		-	-	flushed pump clean
	1.0		-	-	pumped 2 7/8" rubber plug to baffle with 5.06 bbls fresh water
			-	-	pressured to 800 PSI
			-	-	well held pressure, released pressure to set float valve
	4.0		-	-	washed up equipment
			-	-	
			-	-	
			-	-	
			-	-	

CREW		UNIT	SUMMARY		
Cement:	<b>Casey Kennedy</b>	<b>89</b>	Average Rate	Average Pressure	Total Fluid
Pump Operator:	<b>Garrett Scott</b>	<b>239</b>	<b>3.5 bpm</b>	<b>- psi</b>	<b>- bbls</b>
Bulk:	<b>Alan Mader</b>	<b>248</b>			
H2O:					

