KOLAR Document ID: 1468412

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 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	and Percent Additives		
Protect Casi									
Plug Off Zon									
 Did you perform a Does the volume o Was the hydraulic 	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	
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:									
	_	on Lease	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:					
. 5513 1200 10.	5120.		···	. 30.0.71					

Form	ACO1 - Well Completion
Operator	Jo-Allyn Oil Co., Inc.
Well Name	PETERSEN OWWO 2
Doc ID	1468412

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Production	7.875	5.5	15.5	4560	СОММ	200	10%SALT 2%GEL 2%PLAS TER 3#GIKANI TE
Surface	12.25	8.625	24	337	POS	50	60/40 POS 6%GEL

GLOBAL OIL FIELD SERVICES, LLC 13762

REMIT TO

24 S. Lincoln Russell, KS 67665 SERVICE POINT:

pre annual contraction of the co		COVI CO	TOD CT	ART JOB FINISH
DATE 6 29-19 SEC. / TWP.	RANGE CA	ALLED OUT ON LO	CATION JOB ST	10:15 om
a grawiii	Co (Ar coult le	THE SOURCE	COUNT	
LEASE PHEISON WELL#. Z	LOCATION / Egglas	f Sperce LS	Ne	99 185
OLD OR NEW (CIRCLE ONE)	2 N Wind Danes	this soft to		
CONTRACTOR White Knight	D. 11. D. #1		Allyn C	ELLO TAR
CONTRACTOR AND THE PROPERTY	Prolling Kight	OWNER 00	MIND C	TCO FIRE
TYPE OF JOB PILE JOB	ma Wall	S. William		
	T.D. 4614	CEMENT	2005KS	Con
1	DEPTH	AMOUNT ORDERED_	0/-0/	C 01 -1 -
	DEPTH	10 c Sult - 2	100E1 - 5	Y. Plaster
	DEPTH	34# GIKanit	<u> </u>	
	DEPTH 2563 PC			
	MINIMUM	COMMON		
MEAS. LINE	SHOE JOINT 19.40	POZMIX	@	
CEMENT LEFT IN CSG.		GEL	@	
PERFS		CHLORIDE		
DISPLACEMENT		ASC	@	
EQUIPMENT			@	
			@	
PUMP TRUCK CEMENTER Cody			@	
# 409 HELPER Wark				
BULK TRUCK	7-11)
# 492 DRIVER TOAMES	- Eddif		@	
BULK TRUCK			@	
# DRIVER			@	
		HANDLING	@	
		MILEAGE		1
DEMARKS				TOTAL
REMARKS:				
Centralizers on 1-3-5-7				
Boskets on 7-52	4 1 1		SERVICE	
Ran 1/2,75 of 5/2 cosing + 9	La tale II Alice I		7	
Dropped Part Curcularie 30mins Hooken	TOTTACK Plaged	DEPTH OF JOB		
	Frush Thinped	PUMP TRUCK CHARGE		
Took of Coment + Released Plug	* 1713placed 104 71661	EXTRA FOOTAGE		
of H20 Lande WI+h 1500 1951	- Kelegged and	MILEAGE	@	
float held		MANIFOLD		
T 1. 01	c Tu		@	
CHARGE TO: JO-AILYO OIL	CO. LNC			
				TOTAL
STREET				
CITYSTATE	ZIP	PLUC	& FLOAT EQ	JIPMENT + 105 - 105
		1 5/ c 11/1	or sh	Shoe Sta Liche domi
01 1 1015 110				Stoe Lacke home
Global Oil Field Services, LLC		7 sh Baskets	@	S 10.1
You are hereby requested to rent cen				
furnish cementer and helper(s) to assist	owner or contractor to	51/2 Post Colla		
do work as is listed. The above work v		N N ATTI		
and supervision of owner agent or con-			@	
understand the "GENERAL TERMS	AND CONDITIONS"			
listed on the reverse side.				TOTAL
PRINTED NAME		SALES TAX (If Any)		
124-11/	1/m			
SIGNATURE COM	acer	TOTAL CHARGES		
		DISCOUNT		IF PAID IN 30 DAYS
//		2.0000111		