

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)</i> <i>(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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# COPELAND

## Acid & Cement

BURRTON, KS    ♦    GREAT BEND, KS  
 (620) 463-5161    (620) 793-3366  
 FAX (620) 463-2104    FAX (620) 793-3536

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

### Invoice

INVOICE NUMBER:  
**C50464-IN**

**BILL TO:**

**K-BAR OIL  
 1219 TURKEY CREEK DR  
 MCPHERSON, KS 67460**

**LEASE: ELLIOTT #4**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
08/11/2021	50464		08/04/2021	ELLIOTT #4	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
25.00	MI	MILEAGE PICKUP		15.00	2.00	42.50
25.00	MI	MILEAGE CEMENT PUMP TRUCK		15.00	4.00	85.00
1.00	EA	PUMP CHARGE LONG STRING		15.00	1,600.00	1,360.00
530.00	SK	60/40 POZ MIX 2% GEL		15.00	11.25	5,068.13
16.00	SK	2% ADDITIONAL GEL		15.00	24.00	326.40
100.00	LB	C-41P DEFOAMER		15.00	3.75	318.75
50.00	LB	FLUID LOSS C-12		15.00	6.00	255.00
100.00	LB	FRICTION REDUCER C-37		15.00	4.00	340.00
1,200.00	LB	FINE SALT		15.00	0.25	255.00
1,000.00	LB	GILSONITE		15.00	0.75	637.50
10.00	EA	5 1/2" CENTRALIZER		15.00	65.00	552.50
10.00	EA	5 1/2" BASKET		15.00	155.00	1,317.50
1.00	EA	INSERT FLOAT BAR		15.00	285.00	242.25
1.00	EA	AUTO FILL ASSEMBLY		15.00	70.00	59.50
1.00	EA	LATCH DOWN PLUG AND BAFFLE		15.00	175.00	148.75

Continued

# COPELAND

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 HAYSVILLE, KS 67060  
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**Invoice**

INVOICE NUMBER:  
**C50464-IN**

**BILL TO:**  
**K-BAR OIL**  
**1219 TURKEY CREEK DR**  
**MCPHERSON, KS 67460**

**LEASE: ELLIOTT #4**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
08/11/2021	50464		08/04/2021	ELLIOTT #4	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
500.00	GAL	MUD FLUSH		15.00	0.75	318.75
595.00	EA	BULK CHARGE		15.00	1.25	632.19
633.63	MI	BULK TRUCK - TON MILES		15.00	1.10	592.44
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice: 12,552.16		
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		MCPCO Sales Tax: 1,004.17		
		<b>NET 30 DAYS</b>		<b>Invoice Total: 13,556.33</b>		

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

# COPELAND

## Acid & Cement

BURRTON, KS    ♦    GREAT BEND, KS  
 (620) 463-5161    (620) 793-3366  
 FAX (620) 463-2104    FAX (620) 793-3536

POST OFFICE BOX 438  
 HAYSVILLE, KS 67060  
 (316) 524-1225  
 (316) 524-1027 FAX

### Invoice

INVOICE NUMBER:  
**C50461-IN**

**BILL TO:**  
**K-BAR OIL**  
**1219 TURKEY CREEK DR**  
**MCPHERSON, KS 67460**

**LEASE: ELLIOT 4**

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
07/30/2021	50461		07/30/2021	ELLIOT 4	NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
40.00	MI	MILEAGE PICKUP		15.00	2.00	68.00
40.00	MI	MILEAGE CEMENT PUMP TRUCK		15.00	4.00	136.00
1.00	EA	PUMP CHARGE SURFACE		15.00	1,100.00	935.00
250.00	SK	60/40 POZ MIX 2% GEL		15.00	11.25	2,390.63
14.00	SK	CALCIUM CHLORIDE		15.00	40.00	476.00
264.00	EA	BULK CHARGE		15.00	1.25	280.50
454.00	MI	BULK TRUCK - TON MILES		15.00	1.10	424.49
<b>REMIT TO:</b> P.O. BOX 438 HAYSVILLE, KS 67060		<b>COP</b>  FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Net Invoice: 4,710.62 MCPCO Sales Tax: 376.85 <b>Invoice Total: 5,087.47</b>		
RECEIVED BY _____		<b>NET 30 DAYS</b>				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days pas

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9025 4th St. Bldg. C  
Great Bend, KS 67530  
(620) 792-1822  
mobile: (620) 793-2609

Anhydrite  
N/A

15-113-21401  
Bill's Bit Sales  
**BIT RECORD**

DISPLACE  
2414-2433

CRT

NO LOG  
TD: 3225'

DIST. \_\_\_\_\_

CONTRACTOR Southwind RIG NO. 1 SURVEY \_\_\_\_\_ ABS \_\_\_\_\_ BLOCK \_\_\_\_\_  
SECTION 19 TOWNSHIP 19 RANGE 1  
TOOL PUSHER Frank Rome COUNTY McPherson STATE Kansas  
OIL COMPANY K-Bar LEASE Elliott WELL NO. 4  
OIL COMPANY REPRESENTATIVE Hal Krehbiel MUD CO. Andy's MUD TYPE/DEPTH Chemical

Engines (1) C-15 (2) \_\_\_\_\_ (3) \_\_\_\_\_ SPUD DATE 2:00 PM 7-30-2021 DRILL \_\_\_\_\_ HEAVY \_\_\_\_\_  
RIG MAKE AND MODEL TSM 6000 UNDER SURFACE \_\_\_\_\_ PIPE: SIZE/TYPE \_\_\_\_\_ WEIGHT: SIZE/TYPE \_\_\_\_\_ LENGTH \_\_\_\_\_  
NO. 1 PUMP MAKE AND MODEL \_\_\_\_\_ INTERMEDIATE \_\_\_\_\_ DRILL COLLARS: NO. \_\_\_\_\_ O.D. \_\_\_\_\_ I.D. \_\_\_\_\_ LENGTH \_\_\_\_\_  
NO. 2 PUMP MAKE AND MODEL \_\_\_\_\_ T.D. DATE \_\_\_\_\_ DRILL COLLARS: NO. 16 O.D. \_\_\_\_\_ I.D. \_\_\_\_\_ LENGTH \_\_\_\_\_

BIT NO.	BIT SIZE	BIT MFR.	BIT TYPE	BIT SERIAL NO.	JET SIZE OR TFA	DEPTH OUT	FTGE	HOURS RUN	ACC HOURS	FT HR	WOB	RPM	VERT DEV	PUMP PRESS	PUMPS NO.	LIN	SPM	MUD			DULL CODE				REASON PULLED	DATE (REMARKS)	
																		WT	VIS	WL	CUTTING STRUCTURE	TI	To	MDC			Loc
1	12 7/8	JZ	Tooth		3/16	265	265	2	2			110	3/4	340					Ran 6 Jts. New 24# 8 5/8								
2	7 7/8	PCLOGIO	PDC		3/15	2380	2115	29 3/4	31 3/4			90/100		650					Tally 253 Set @ 265								
3	7 7/8	JZ	HA20TL	Rerun	3/15	3225	1110	35 3/4	67 1/2			80/90		900					w/ 250 SX 60/40, 3% CC, 20% Gel By Copeland TK# 50461 Plug Down 8:30 PM 7-30-2021 Cement Did Circulate								
(47.8)																											
NO TESTS																											
Ran 77 Jts. Used 15.5# 5 1/2 Tally @ 3209 Set @ 3219 w/ 300 SX 65/35 8% Gel On Top 200 SX 60/40, 2% Gel On Bottom By Copeland TK# 50462 Plug Down 12:30 AM 8-09-2021 Cement Did Not Appear To Circulate To Pit New Washpipe & Packing In Swivel New Piston - Bullwheel Side																											
Eric Tan - Chris Batchman Hauled Water - Butch Davis Trash Trailer + Port Abby (Mike's Septic) Gas Pump - Pit To RIG End Mud Cost - 6259.40 End-Fuel - 30'																											

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Anhydrite  
N/A

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DISPLACE  
2414-2433

**CRT**

NO LOG  
TD: 3225'

DIST. \_\_\_\_\_

CONTRACTOR Southwind RIG NO. 1 SURVEY \_\_\_\_\_ ABS \_\_\_\_\_ BLOCK \_\_\_\_\_  
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OIL COMPANY K-Bar COUNTY McPherson STATE Kansas  
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RIG MAKE AND MODEL TSM 6000 UNDER SURFACE \_\_\_\_\_ PIPE: SIZE/TYPE \_\_\_\_\_ WEIGHT: SIZE/TYPE \_\_\_\_\_ LENGTH \_\_\_\_\_  
NO. 1 PUMP MAKE AND MODEL \_\_\_\_\_ INTERMEDIATE \_\_\_\_\_ DRILL COLLARS: NO \_\_\_\_\_ O.D. \_\_\_\_\_ I.D. \_\_\_\_\_ LENGTH \_\_\_\_\_  
NO. 2 PUMP MAKE AND MODEL \_\_\_\_\_ T.D. DATE \_\_\_\_\_ DRILL COLLARS: NO 16 O.D. \_\_\_\_\_ I.D. \_\_\_\_\_ LENGTH \_\_\_\_\_

BIT NO.	BIT SIZE	BIT MFR.	BIT TYPE	BIT SERIAL NO.	JET SIZE OR TFA	DEPTH OUT	FTGE	HOURS RUN	ACC HOURS	FT HR	WOB	RPM	VERT DEV	PUMP PRESS	PUMPS NO.	LIN	SPM	MUD			DULL CODE				REASON PULLED	DATE (REMARKS)
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3	7 7/8	JZ	HA20TL	Rerun	3/15	3225	1110	35 3/4	67 1/2			80/90		900					w/ 250 SX 60/40, 3% CC, 20% Gel By Copeland TK# 50461 Plug Down 8:30 PM 7-30-2021 Cement Did Circulate							
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