

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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GEOLOGICAL REPORT

C & G Drilling, Inc.

Busenitz B #2

W1/2 NE NW SE Section 14-T24S-R5E

Butler County, Kansas

COMMENCED: 06-01-21
 COMPLETED: 06-04-21
 CONTRACTOR: C & G Drilling Company
 SIZE OF HOLE: 7 7/8"
 SURFACE PIPE: 8 5/8"
 CEMENTED WITH: N/A
 LONG STRING: 5 1/2"
 CEMENTED WITH:
 R.T.R.: 2680'

STATUS: Oil
 A.P.I. #: 15-015-24145
 OPERATOR LIC.: 32701

FIELD: Plum Grove NW
 ELEVATION: 1410 K.B.

LOGS: CNT LDT M.L.T.PIT

MUD SYSTEM: Chemical

OTHER:

William M. Stout
 6-6-21

William M. Stout
 Geologist

FORMATION TOPS

	1401 G.L.	1410 K.B.
Kansas City	2079 -669	2075 -665
Base Kansas City	2234 -824	2230 -820
Altamont	2334 -924	2330 -920
Cherokee	2422 -1012	2418 -1008
Mississippi	2448 -1038	2443 -1033
Mississippi Lime	2519 -1109	2515 -1105
Kinderhook	2549 -1139	2543 -1133
Total Depth	2580 -1170	2575 -1165

*Log was off 5' to rotary depth.

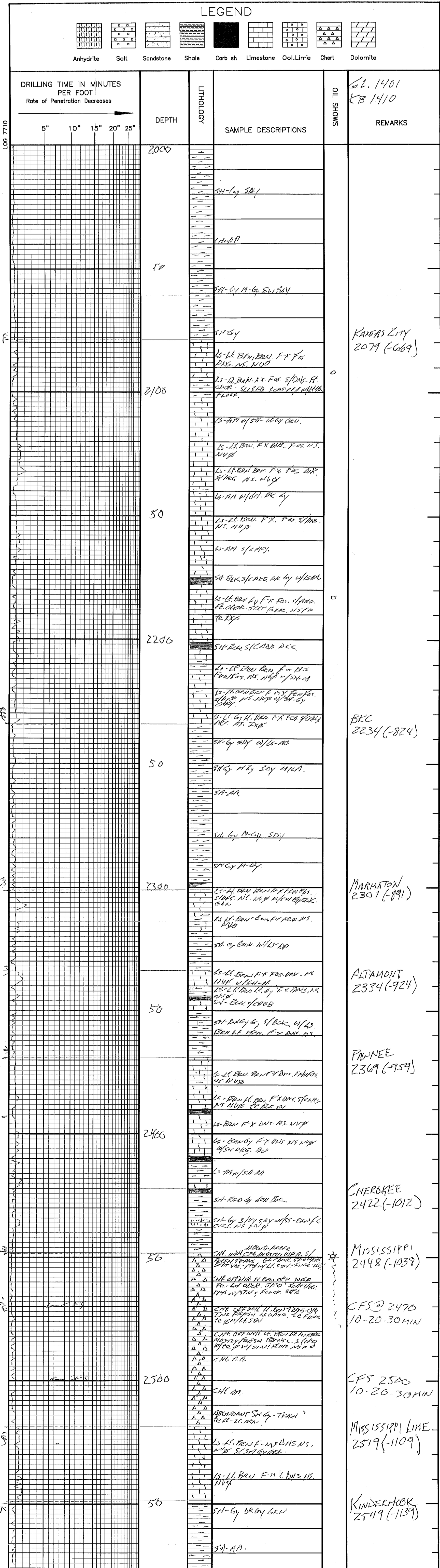
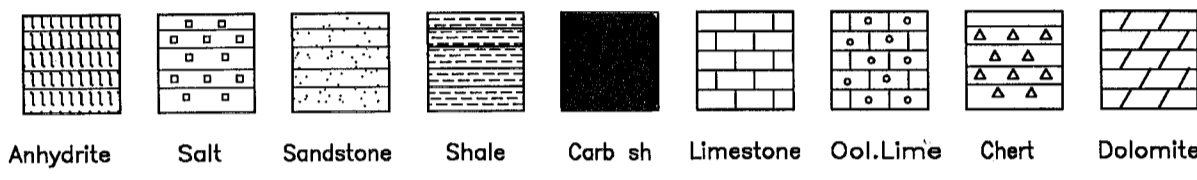
SAMPLE DESCRIPTIONS

- Kansas City 2079' (-669)
 2085' - 2091'
 Limestone - light brown, fine crystalline, fossiliferous, some dense, faint odor, slight show free oil, scattered intercrystalline and pin point porosity with light stain and fluorescence.
- 2182' - 2188'
 Limestone - light brown, gray, fine crystalline, few fossils, some argillaceous, faint odor, light stain, trace free oil, some intracrystalline porosity with fluorescence.
- Mississippi 2448' (-1038)
 2448' - 2472'
 Chert - white, light brown, opaque mostly weathered, some fresh, translucent good odor, light stain, show free oil with few gas bubbles, scattered vugular and pin point porosity with light stain and fluorescence (25%).
- 2473' - 2495'
 Chert - off white, light brown, some amber, mostly fresh, translucent to opaque, no odor, trace pin point porosity with fluorescence.

CONCLUSIONS

The decision to was made to run 5 1/2 inch casing to further evaluate the Mississippian Chert through perforations.

LEGEND



810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



R11 #2

Cement or Acid Field Report
 Ticket No. **5638**
 Foreman Kevin McCoy
 Camp EUREKA

API 15-015-24145

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
6-4-21	1037	BUSENITZ B*2	14	245	4E	BUTLER	Ks	
Customer C & G DRILLING			Unit #		Driver		Unit #	Driver
Mailing Address 701 E. RIVER			105		JASON H.			
City EUREKA			110		ALAN M.			
State Ks		Zip Code 67045						

Job Type <u>Longstring</u>	Hole Depth <u>2580' K.D.</u>	Slurry Vol. <u>41 BBL</u>	Tubing _____
Casing Depth <u>2569' S.L.</u>	Hole Size <u>7 7/8"</u>	Slurry Wt. <u>12.8"</u>	Drill Pipe _____
Casing Size & Wt. <u>5 1/2 17"</u>	Cement Left in Casing <u>0'</u>	Water Gal/SK <u>7.0</u>	Other _____
Displacement <u>61.7 BBL</u>	Displacement PSI <u>750</u>	Bump Plug to <u>1300 PSI</u>	BPM _____

Remarks: Safety Meeting: 5 1/2 17" Casing Set @ 2569' S.L. Rig up to 5 1/2 casing w/ Rotating Swivel. BREAK CIRCULATION w/ 10 BBL Fresh water. Mixed 125 SKS THICK SET Cement w/ 5* KOL-SEAL 1SK 2* PhenoSEAL 1SK @ 12.8"/gal, yield 1.85 = 41 BBL SLURRY. Wash out Pump & Lines. Shut down. Release Latch down Plug. Displace Plug to Seat w/ 61.7 BBL Fresh water. (KCL in first 20 BBL) FINAL Pumping Pressure 750 PSI. Bump Plug to 1300 PSI. wait 2 mins. Release Pressure. Float & Plug Held. Good Circulation @ ALL times while Cementing. Rotated Casing while Displacing Plug. Job Complete. Rig down.

Plug R.H. & M.H.
CENTRALIZERS ON * 1, 2, 3, 6, 7, 8.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 102	1	Pump Charge	1100.00	1100.00
C 107	30	Mileage	4.20	126.00
C 201	150 SKS	THICK SET CEMENT	22.55	3382.50
C 207	750 *	KOL-SEAL	.52 *	390.00
C 208	300 *	PhenoSEAL 2* 1SK	1.45 *	435.00
C 108 A	8.25 TONS	TON MILEAGE	M/C	365.00
C 661	1	5 1/2 AFU FLOAT Shoe w/ Latch down INSERT	340.00	340.00
C 421	1	5 1/2 LATCH DOWN Plug	266.00	266.00
C 504	6	5 1/2 x 7 7/8 CENTRALIZERS	55.00	330.00
C 112	1	Rotating Cementing Swivel	105.00	105.00
C 222	1 gal	KCL	30.00	30.00
			Sub Total	6867.50
			Less 5%	360.65
			Sales Tax 6.5%	343.10

THANK YOU
M

Authorization By Tim Gulick Title _____ Total 6,851.97

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report

Ticket No. **5569**
 Foreman David Gaudner
 Camp Eureka

API # 15-015-24145

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
6-1-21	1037	Kusewitz B #2	14	24S	4E	Butler	KS
Customer			Unit #	Driver	Unit #	Driver	
C4G Drilling			105	Jason			
Mailing Address			112	Becker			
701 E. River							
City	State	Zip Code					
Eureka	KS	67045					

Job Type Surface Hole Depth 225' K.B. Slurry Vol. 38 Bbl Tubing _____
 Casing Depth 211.07' G.L. Hole Size 12 1/4" Slurry Wt. 15" Drill Pipe _____
 Casing Size & Wt. 5 3/8" Cement Left in Casing 15' +/- Water Gal/SK 6.5 Other _____
 Displacement 13 Bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting. Rig up to 8 3/8" casing. Break circulation w/ 10 Bbl fresh water. Mixed 145 sacks Class H Cement w/ 3% Cactz, 2% Gel, 1/4" Floccul/sk @ 15#/gal, yield 1.47 = 38 Bbl slurry. Displace w/ 13 Bbl fresh water. Shut down. Close casing in. Good cement returns to surface = 4 Bbl slurry to pit. Job complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	890.00	890.00
C107	30	Mileage	4.20	126.00
C200	145 Sks	Class H Cement	17.35	2515.75
C205	410"	Cactz 3%	.69	282.90
C206	275"	Gel 2%	.28	77.00
C209	35"	Floccul 1/4"/sk	2.60	91.00
C108B	6.81 Tons	Ton Mileage - Bulk Truck	m/c	365.00
<u>Thank You</u>				
			Sub Total	4,347.65
			Less 5%	227.02
			Sales Tax	192.83
				6.5%

Authorization by Tim Gulick Title _____ Total 4,313.46

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.