



Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West      County: \_\_\_\_\_

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to [kcc-well-logs@kcc.ks.gov](mailto: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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name	Top	Datum
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:					

<div style="text-align: center;"> <b>CASING RECORD</b>      <input type="checkbox"/> New    <input type="checkbox"/> Used            Report all strings set-conductor, surface, intermediate, production, etc.         </div>							
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 (Explain) _____			
Estimated Production Per 24 Hours	Oil      Bbls.	Gas      Mcf	Water	Bbls.	Gas-Oil Ratio      Gravity

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented    <input type="checkbox"/> Sold    <input type="checkbox"/> Used on Lease</p> <p><i>(If vented, Submit ACO-18.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole    <input type="checkbox"/> Perf.    <input type="checkbox"/> Dually Comp.    <input type="checkbox"/> Commingled</p> <p><i>(Submit ACO-5)</i>                      <i>(Submit ACO-5)</i>                      <i>(Submit ACO-4)</i></p>	<p>PRODUCTION INTERVAL:</p> <p>Top                      Bottom</p>	

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Phillips Exploration Company L.C.
Well Name	WANKER 3-4 SHR
Doc ID	1481736

#### Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.750	23	210	Common	150	80/20
Production	7.750	5.5	14	4178	Common	180	10% salt 5% gil
Production	7.75	5.5	14	1999	common	200	80/20



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 1809

Date	10-16-19	Sec.	4	Twp.	13	Range	24	County	Trego	State	KS	On Location		Finish	3:30 AM
Location								Wakeeney 4s SW 1/2s Into							

Lease	Wanker	Well No.	3-4 SHR	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Contractor	Murfin #16				Charge To Phillips Exploration	
Type Job	Production String				Street	
Hole Size	7 7/8	T.D.	4180	City		
Csg.	5 1/2 14#	Depth	4175	State		
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.		
Tool	Port Collar #52	Depth	1999	Cement Amount Ordered 225 10/salt + 5/6/somite		
Cement Left in Csg.	21.26	Shoe Joint	21.26	Common 225		
Meas Line		Displace	101 1/2 BBL	500 gal mud clear 20 BBL KCL		
EQUIPMENT				Poz. Mix		
Pumptrk	20	No.	Cement Helper Craig T.M.	Gel.		
Bulktrk		No.	Driver	Calcium KCL 2 gal		
Bulktrk	15	No.	Driver Michael	Hulls		

## JOB SERVICES & REMARKS

Remarks:

Rat Hole 30SK

Mouse Hole 15SK

Centralizers

Baskets

D/V or Port Collar

5 1/2 set @ 41.75. Bulk @ 4153.25  
Est. Circulation - Pump 500 gal mud clear  
20 BBL KCL Plug Reathole mousehole.  
Cement 5 1/2 with 180SK.  
Clear lines & Displace Plug.  
Plug landed @ - 1500#  
Lift pressure - 800#

Salt 17

Flowseal

Kol-Seal 900#

Mud CLR 48 500 60L

CFL-117 or CD110 CAF 38

Sand

Handling 241

Mileage

## FLOAT EQUIPMENT

Guide Shoe 16 Scratchers

Centralizer 6

Baskets 2

AFU Inserts Port collar

Float Shoe 1

Latch Down 1

2 Limit Clamps

Pumptrk Charge prod string

Mileage 42

Tax

Discount

Total Charge

X Signature

Thanks



# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

No. 1596

Phone 785-483-1071  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

Date	10.10.19	Sec.	4	Twp.	13	Range	24	County	Trego	State	KS	On Location		Finish	4:45
Location								Wakeney 3 3/4 S to m rd 5 W 1/2 S							

Lease	WanPer	Well No.	#3-4	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	Murphy Drilling			Charge To	Phillips Exploration
Type Job				Street	
Hole Size	12 1/4	T.D.		City	
Csg.	8 5/8	Depth	208.05'	State	
Tbg. Size		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Tool		Depth		Cement Amount Ordered	150SK 80/20 31.21
Cement Left in Csg.		Shoe Joint	10'		
Meas Line		Displace	12 1/2 1/2		

EQUIPMENT			
Pumptrk	#20	No.	Cementor Tony L
			Helper David
Bulktrk		No.	Driver Tony L
Bulktrk	#15	No.	Driver Tony L

Common	120
Poz. Mix	30
Gel.	3
Calcium	6
Hulls	
Salt	
Flowseal	
Kol-Seal	
Mud CLR 48	
CFL-117 or CD110 CAF 38	
Sand	
Handling	159
Mileage	

JOB SERVICES & REMARKS	
Remarks:	USED: 150SK 80/20 31.21
Rat Hole	
Mouse Hole	
Centralizers	
Baskets	
D/V or Port Collar	
* 8 5/8 csg rel @ 208.05'	
mix cement @ 150SK 80/20 31.21	
* Displace cement @ 12 1/2 1/2	
arrived to surface!	

FLOAT EQUIPMENT	
Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	

Signature		Pumptrk Charge	Surface
		Mileage	42
		Tax	
		Discount	
		Total Charge	

♦ 815 Main Street Victoria, KS 67671 ♦ 24 Hour Phone (785) 639-7269  
♦ Office Phone (785) 639-3949 ♦ Email: franksoilfield@yahoo.com

**TICKET NUMBER** 0109

LOCATION Hoxie MS

FOREMAN Miles Shaw

Ms

CUSTOMER		
Phillips Exploration		
MAILING ADDRESS		
CITY	STATE	ZIP CODE

	TRUCK #	DRIVER	TRUCK #	DRIVER
SW to CR200	CT 1	Preston D		
1/2 S 1/4 W	101	Jack T		
1/4 S E 1/4	902	Miles S		

JOB TYPE <u>Port collar</u>	HOLE SIZE _____	HOLE DEPTH _____	CASING SIZE & WEIGHT <u>5.5"</u>
CASING DEPTH _____	DRILL PIPE _____	TUBING <u>2 3/8"</u>	OTHER <u>PC @ 1999'</u>
SLURRY WEIGHT <u>11.7</u>	SLURRY VOL <u>2.39</u>	WATER gal/sk _____	CEMENT LEFT in CASING <u>1661</u>
DISPLACEMENT <u>76 1/2</u>	DISPLACEMENT PSI <u>500 #</u>	MIX PSI _____	RATE _____

REMARKS: Safety meetings & Rig upon Well Test to 1000' open Port Collar tool  
Set 10 bbls gel water over tool before opening mix remaining 10 bbls gel water Establish circulation  
mix zone x 60/40 1 to 1/4" closed displace 7 bbls water Shut down Shut tool test to 1000'  
Tool closed run in 5 Snts circulate hole clean with 25 bbls water Rig down Equip

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CP003	1	PUMP CHARGE	1850. <sup>00</sup>	1850. <sup>00</sup>
M001	60	MILEAGE	6.50	390. <sup>00</sup>
M062	9.3 tons	Ton Mileage delivery	1.5	837. <sup>00</sup>
C021	200 SX	W/40 Gto 1st Gt	17.35	3470. <sup>00</sup>
			Subtotal	4547. <sup>00</sup>
		less 30% discount		1964.10
			Subtotal	4582.90
			Sales Tax	
			ESTIMATED TOTAL	

**AUTHORIZATION** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.**