

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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Form	ACO1 - Well Completion
Operator	Staab Oil Co., a General Partnership
Well Name	BODINE 1
Doc ID	1634029

Tops

Name	Top	Datum
Anhydrite	1370	+625
Topeka	2929	-934
Heebner Shale	3139	-1144
Toronto	3160	-1165
Lkc	3180	-1185
BKC	3403	-1408
Arbuckle	3421	-1426
TD	3471	-1476





**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

Staab Oil Company

**28-8-18, Rooks, KS**

1607 Hopewell RD  
Hays, KS 67601

**Bodine 1**

Job Ticket: 67959

**DST#: 1**

ATTN: Janel Staab

Test Start: 2021.11.17 @ 02:54:00

## GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:43:32

Time Test Ended: 10:12:02

Test Type: Conventional Straddle (Initial)

Tester: Kevin Webster

Unit No: 72

**Interval: 3382.00 ft (KB) To 3442.00 ft (KB) (TVD)**

Reference Elevations: 1993.00 ft (KB)

Total Depth: 3480.00 ft (KB) (TVD)

1988.00 ft (CF)

Hole Diameter: 7.78 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

**Serial #: 8365 Inside**

Press@RunDepth: 69.71 psig @ 3383.00 ft (KB)

Capacity: psig

Start Date: 2021.11.17

End Date:

2021.11.17

Last Calib.:

2021.11.17

Start Time: 02:54:01

End Time:

10:12:02

Time On Btm:

2021.11.17 @ 04:42:17

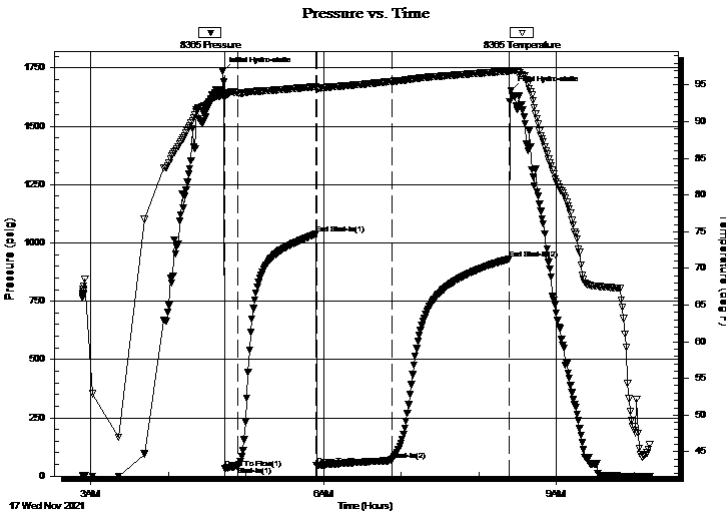
Time Off Btm:

2021.11.17 @ 08:24:47

TEST COMMENT: IF- WSB built to 1"  
IS- No blow back  
FF- WSB built to 4"  
FS- No blow back

10 min  
60 min  
60 min  
90 min

## PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1735.49	93.56	Initial Hydro-static
2	32.15	93.35	Open To Flow (1)
12	42.44	93.95	Shut-In(1)
72	1037.62	94.74	End Shut-In(1)
73	44.95	94.50	Open To Flow (2)
131	69.71	95.49	Shut-In(2)
221	930.87	96.92	End Shut-In(2)
223	1652.15	96.99	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
60.00	55% Oil 45%Mud	0.30

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE**  
**TESTING, INC**

# DRILL STEM TEST REPORT

Staab Oil Company

**28-8-18, Rooks, KS**

1607 Hopewell RD  
Hays, KS 67601

**Bodine 1**

Job Ticket: 67959

**DST#: 1**

ATTN: Janel Staab

Test Start: 2021.11.17 @ 02:54:00

## GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:43:32

Time Test Ended: 10:12:02

Test Type: Conventional Straddle (Initial)

Tester: Kevin Webster

Unit No: 72

Interval: **3382.00 ft (KB) To 3442.00 ft (KB) (TVD)**

Reference Elevations: 1993.00 ft (KB)

Total Depth: 3480.00 ft (KB) (TVD)

1988.00 ft (CF)

Hole Diameter: 7.78 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

## Serial #: 6752

Press@RunDepth: psig @ ft (KB)

Capacity: psig

Start Date: 2021.11.17

End Date:

2021.11.17

Last Calib.:

2021.11.17

Start Time: 02:54:01

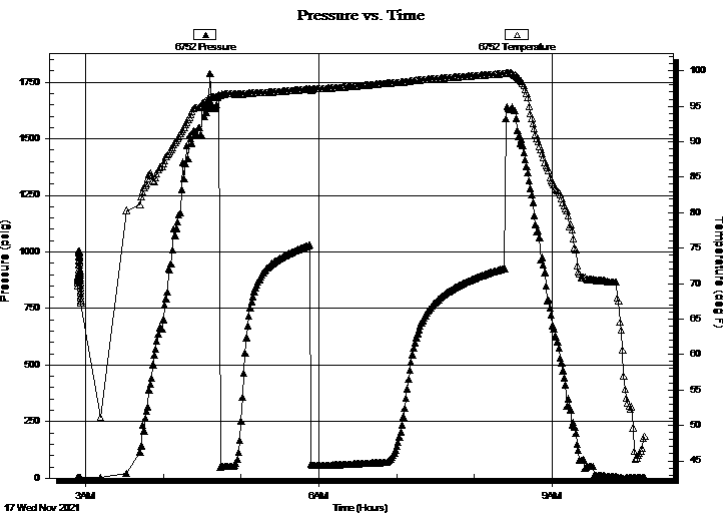
End Time:

10:11:02

Time On Btm:

Time Off Btm:

TEST COMMENT: IF- WSB built to 1" 10 min  
 IS- No blow back 60 min  
 FF- WSB built to 4" 60 min  
 FS- No blow back 90 min



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

## Recovery

Length (ft)	Description	Volume (bbl)
60.00	55% Oil 45%Mud	0.30

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



# DRILL STEM TEST REPORT

Staab Oil Company  
 1607 Hopewell RD  
 Hays, KS 67601  
 ATTN: Janel Staab

**28-8-18, Rooks, KS**  
**Bodine 1**  
 Job Ticket: 67959 **DST#: 1**  
 Test Start: 2021.11.17 @ 02:54:00

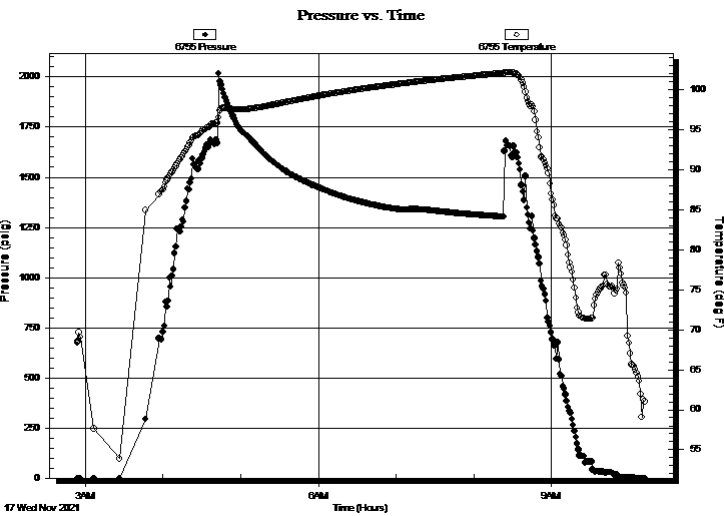
## GENERAL INFORMATION:

Formation: **Arbuckle**  
 Deviated: No Whipstock: ft (KB) Test Type: Conventional Straddle (Initial)  
 Time Tool Opened: 04:43:32 Tester: Kevin Webster  
 Time Test Ended: 10:12:02 Unit No: 72  
 Interval: **3382.00 ft (KB) To 3442.00 ft (KB) (TVD)** Reference Elevations: 1993.00 ft (KB)  
 Total Depth: 3480.00 ft (KB) (TVD) 1988.00 ft (CF)  
 Hole Diameter: 7.78 inches Hole Condition: Fair KB to GR/CF: 5.00 ft

## Serial #: 6755 Outside

Press@RunDepth: psig @ 3480.00 ft (KB) Capacity: psig  
 Start Date: 2021.11.17 End Date: 2021.11.17 Last Calib.: 2021.11.17  
 Start Time: 02:54:01 End Time: 10:12:02 Time On Btm:  
 Time Off Btm:

TEST COMMENT: IF- WSB built to 1" 10 min  
 IS- No blow back 60 min  
 FF- WSB built to 4" 60 min  
 FS- No blow back 90 min



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

## Recovery

Length (ft)	Description	Volume (bbl)
60.00	55% Oil 45% Mud	0.30

## Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

## FLUID SUMMARY

Staab Oil Company

**28-8-18, Rooks, KS**

1607 Hopewell RD  
Hays, KS 67601

**Bodine 1**

Job Ticket: 67959

**DST#: 1**

ATTN: Janel Staab

Test Start: 2021.11.17 @ 02:54:00

### Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 51.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.80 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: inches

### Recovery Information

Recovery Table

Length ft	Description	Volume bbl
60.00	55% Oil 45%Mud	0.295

Total Length: 60.00 ft      Total Volume: 0.295 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

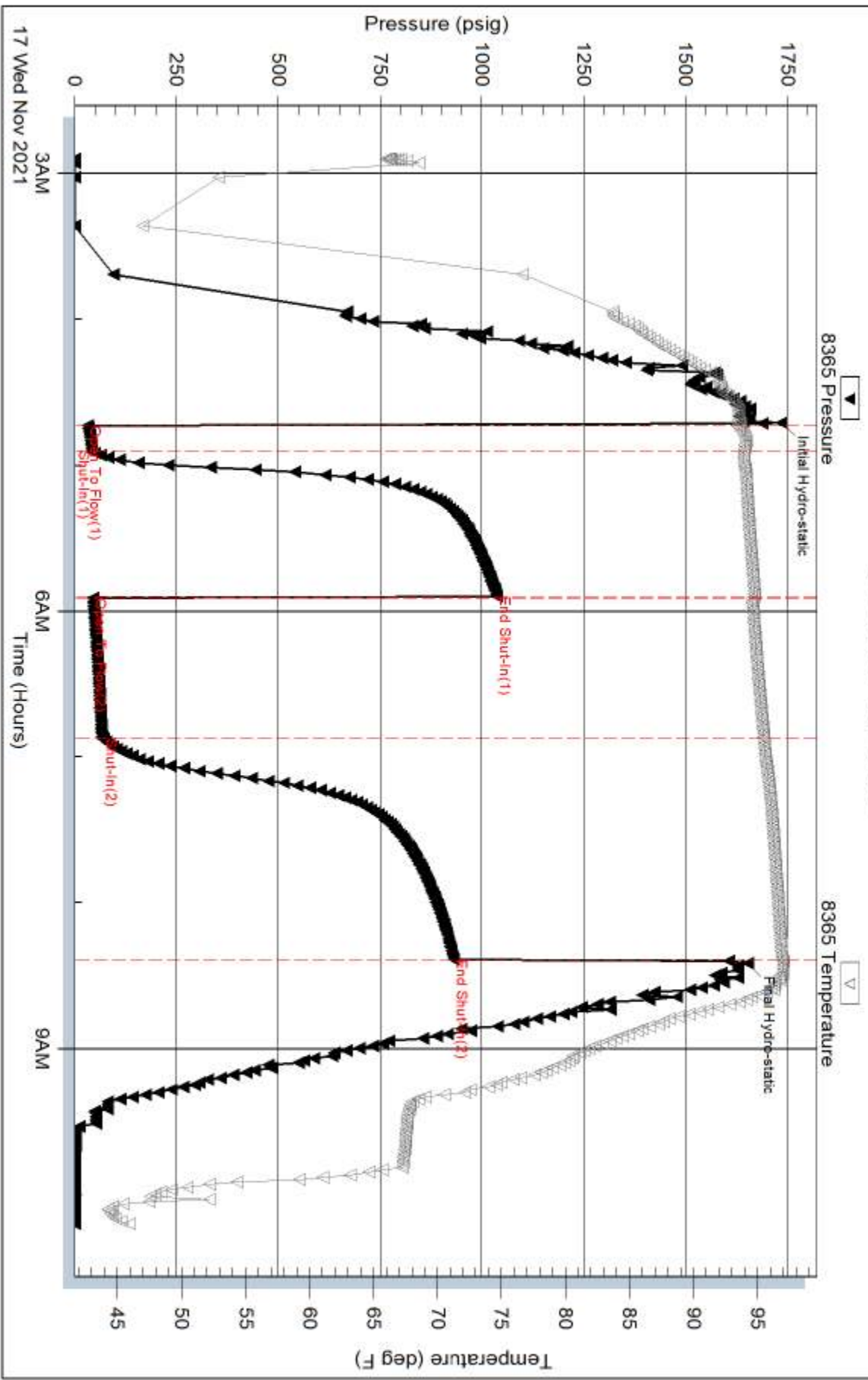
Laboratory Name:

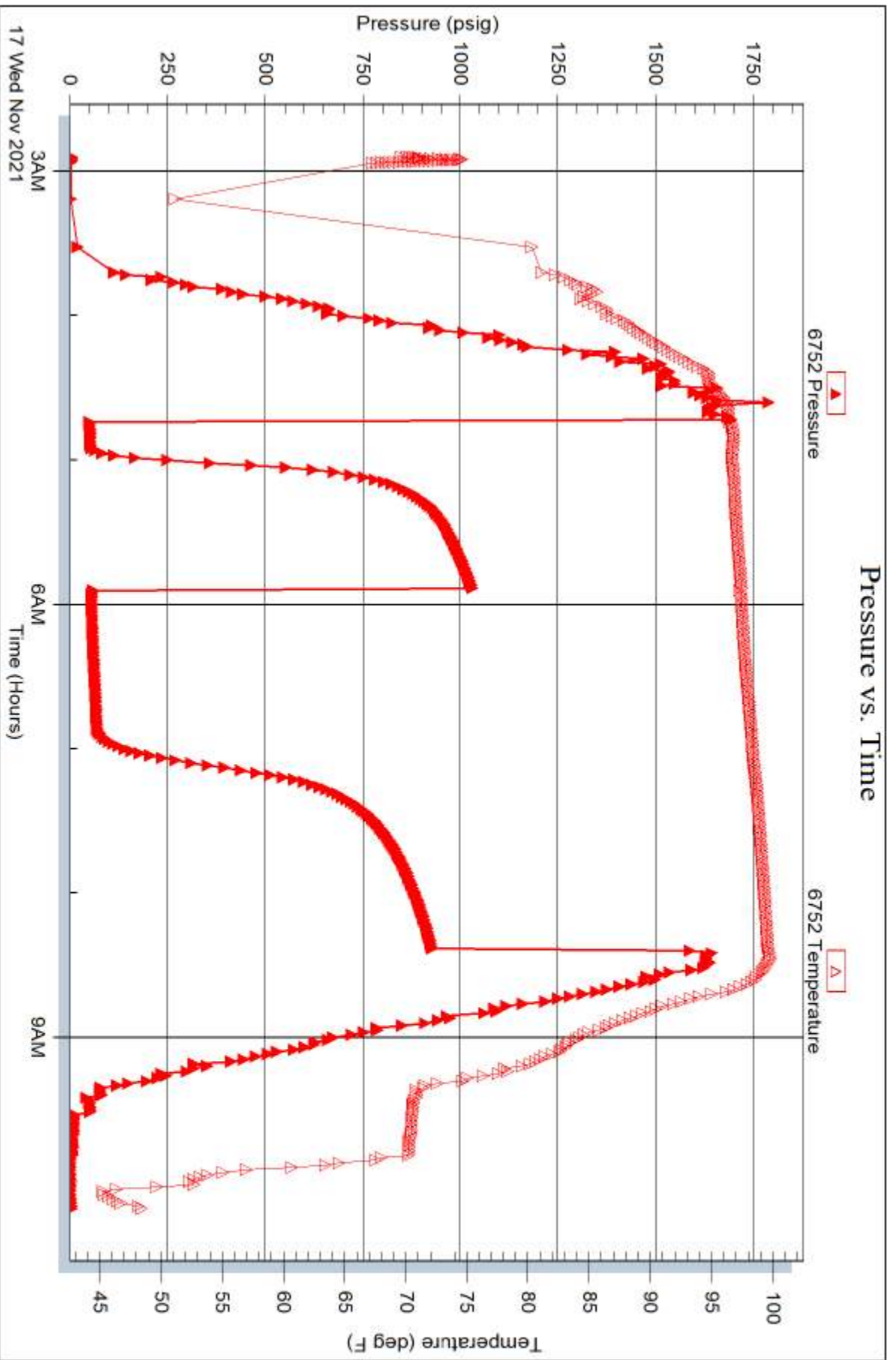
Laboratory Location:

Recovery Comments: 3# LCM



### Pressure vs. Time



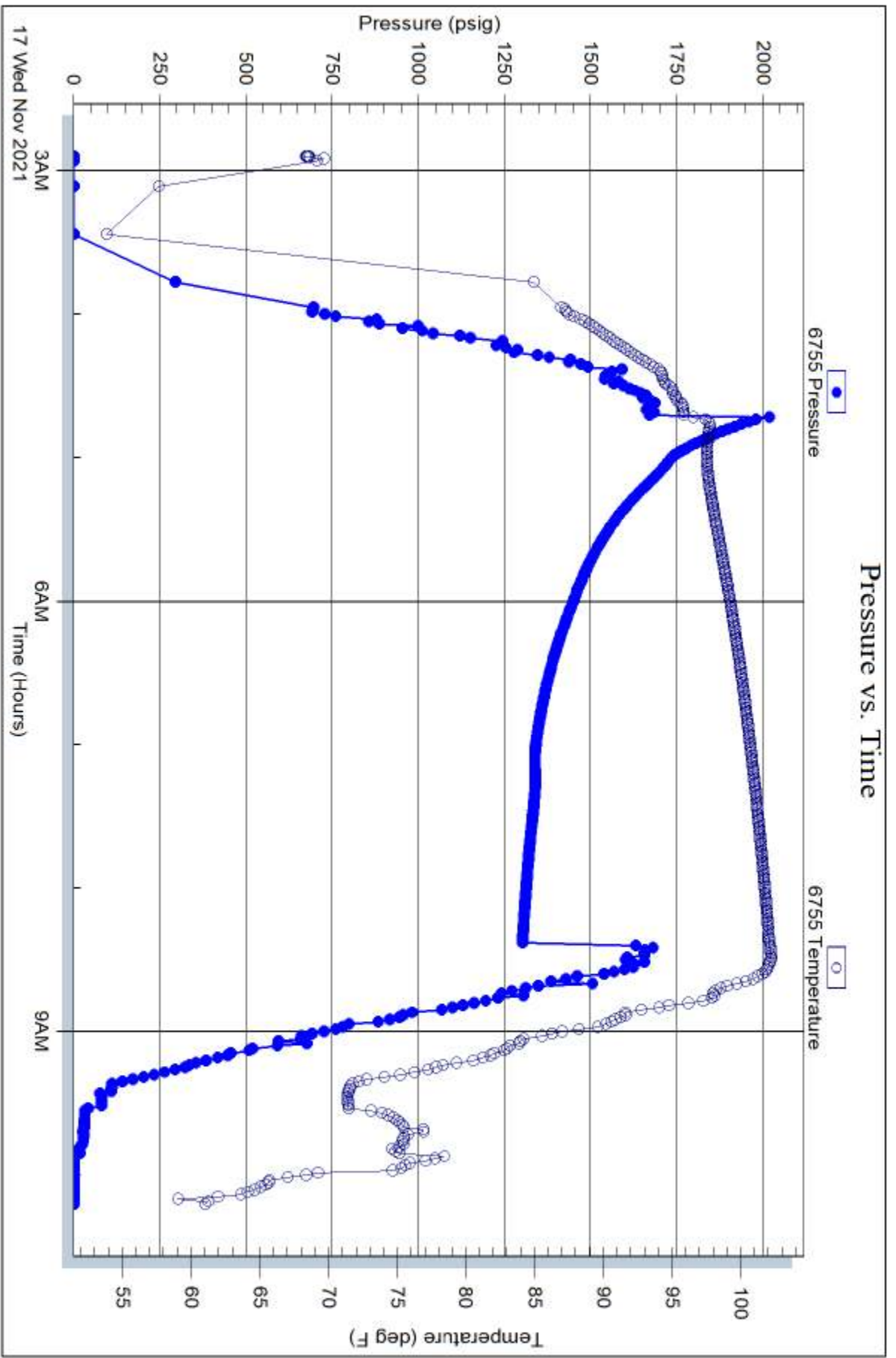


Serial #: 6755

Outside Staab Oil Company

Bodine 1

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 67959

Printed: 2021.11.17 @ 10:36:19



# 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. 2592

Date	11-12-21	Sec.	28	Twp.	8	Range	1D	County	ROCK	State	KS	On Location		Finish	11:15pm				
Lease								Location		Bn 25w Pville									
Bodine								Well No.	1										
Contractor								STP								Owner		To Quality Oilwell Cementing, Inc.	
Type Job								SURFACE								You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size				T.D.				251				Charge To				STAB Oil			
Csg.				Depth				250				Street							
Tbg. Size				Depth				City				State							
Tool				Depth				The above was done to satisfaction and supervision of owner agent or contractor.											
Cement Left in Csg.				Shoe Joint				Cement Amount Ordered				1757 80/20 3-2							
Meas Line				Displace				15											
<b>EQUIPMENT</b>												Common				140			
Pumptrk		20		No.		Cementer		Helper		Bill		Poz. Mix		35					
Bulktrk				No.		Driver		Driver		CRAIG		Gel.		3					
Bulktrk		9		No.		Driver		Driver		DOUG		Calcium		6					
<b>JOB SERVICES &amp; REMARKS</b>												Hulls							
Remarks:												Salt							
Rat Hole												Flowseal							
Mouse Hole												Kol-Seal							
Centralizers												Mud CLR 48							
Baskets												CFL-117 or CD110 CAF 38							
DV or Port Collar												Sand							
RAN 65+5 of 88												Handling				181			
DATE 250												Mileage							
Cemt w/1757												<b>FLOAT EQUIPMENT</b>							
pump plug w/ 15 bbls												Guide Shoe							
Cemt did circ												Centralizer							
												Baskets							
												AFU Inserts							
												Float Shoe							
												Latch Down							
												Pumptrk Charge				Surface			
												Mileage				34			
Signature												Thanks				Tax			
																Discount			
																Total Charge			

# 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. 2595

Date	11-17-21	Sec.	28	Twp.	8	Range	10	County	ROOKS	State	KS	On Location		Finish	9:30PM
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Location *Pole 6 N 2 1/2 W*

Lease	<i>Bodine</i>	Well No.	<i>1</i>	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	<i>STP</i>				Charge To	<i>STAB OIL</i>
Type Job	<i>Prod string</i>					
Hole Size	<i>7 7/8</i>	T.D.				
Csg.	<i>5 1/2 15</i>	Depth	<i>3770</i>	Street		
Tbg. Size		Depth		City State		
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.		
Cement Left in Csg.	<i>21.54</i>	Shoe Joint	<i>21.54</i>	Cement Amount Ordered <i>150 10% salt 5# 6:1</i>		
Meas Line		Displace	<i>82.26</i>	<i>350 Qmdc 1/2 Flowseal</i>		

**EQUIPMENT**

Pumptrk	<i>20</i>	No.		Cementer	<i>Bill</i>	Common	<i>150</i>
				Helper		Poz. Mix	<i>350 80% QMDC</i>
Bulktrk	<i>1</i>	No.		Driver	<i>CRAIG</i>	Gel.	
				Driver	<i>Jordan</i>	Calcium	
Bulktrk	<i>19</i>	No.		Driver	<i>Duke</i>	Hulls	
				Driver		Salt	<i>13</i>

**JOB SERVICES & REMARKS**

Remarks:		Salt	<i>13</i>
Rat Hole		Flowseal	<i>87#</i>
Mouse Hole	<i>300#</i>	Kol-Seal	<i>750 #</i>
Centralizers		Mud CLR	<i>48</i>
Baskets		CFL-117 or CD110 CAF	<i>38</i>
D/V or Port Collar		Sand	
<i>pipe rate</i>	<i>3470</i>	Handling	<i>520</i>
<i>Shoe JT</i>	<i>21.54</i>	Mileage	
<i>Insert</i>	<i>3456.46</i>		

**FLOAT EQUIPMENT**

<i>Cent of 150 Com Follow 320 Qmdc</i>	Guide Shoe	
<i>Pump plug w 82# bds</i>	Centralizer	<i>-6</i>
<i>Land plug e 1500 #</i>	Baskets	<i>-3</i>
<i>Float did hold</i>	AFU Inserts	
<i>Cent did circ.</i>	Float Shoe	<i>-1</i>
	Latch Down	<i>(</i>

Pumptrk Charge	<i>Prod string</i>
Mileage	<i>34</i>

X Signature *Stab Oil Co*  
*Jedd Stab*

Thanks

Tax	
Discount	
Total Charge	