KOLAR Document ID: 1516268

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
Contact Person:	_ Footages Calculated from Nearest Outside Section Corner:
Phone: ()	_ NE NW SE SW
CONTRACTOR: License #	
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	
Purchaser:	
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
☐ Oil ☐ WSW ☐ SWD	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/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 Produce	(Data must be collected from the Reserve Pit)
Commission Powert #	Chloride content:ppm Fluid volume:bbls
☐ Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
EOR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R ☐ East ☐ West
Recompletion Date  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 Taken Yes No (Attach Additional Sheets)						on (Top), Depth ar	n (Top), Depth and Datum		
Samples Sent to G	eological Surv	ey	Yes No	Na	Name		Тор		
Cores Taken Yes Electric Log Run Yes Geologist Report / Mud Logs Yes List All E. Logs Run:									
		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	# Sacks Used Type and Percent Additives				
Protect Casii									
Plug Off Zon									
<ol> <li>Did you perform a</li> <li>Does the volume o</li> <li>Was the hydraulic</li> </ol>	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 Oil Bbls. Per 24 Hours						Gas-Oil Ratio	Gravity		
DISPOSITION OF GAS: METHOD OF COMPLETION:							PRODUCTION INTERVAL:		
☐ Vented ☐ Sold ☐ Used on Lease ☐ Op  (If vented, Submit ACO-18.)			Open Hole		ally Comp. Commingled omit ACO-5) (Submit ACO-4)		Тор	Bottom	
,	,								
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)			Record	
TUBING RECORD:	Size:	Set /	At:	Packer At:					
. 5213   12.00   10.	5120.		···	. 30.0.71					

Form	ACO1 - Well Completion		
Operator	Merit Energy Company, LLC		
Well Name	INTERSTATE D 2		
Doc ID	1516268		

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	24	1274	Lite Class H	550	SEE ORIGINAL
Production	7.875	4.5	10.5	4544	CLASS H 35/65 POZ	200	SEE ORIGINAL