

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) (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	Griffin, Charles N.
Well Name	MARY 3
Doc ID	1500402

All Electric Logs Run

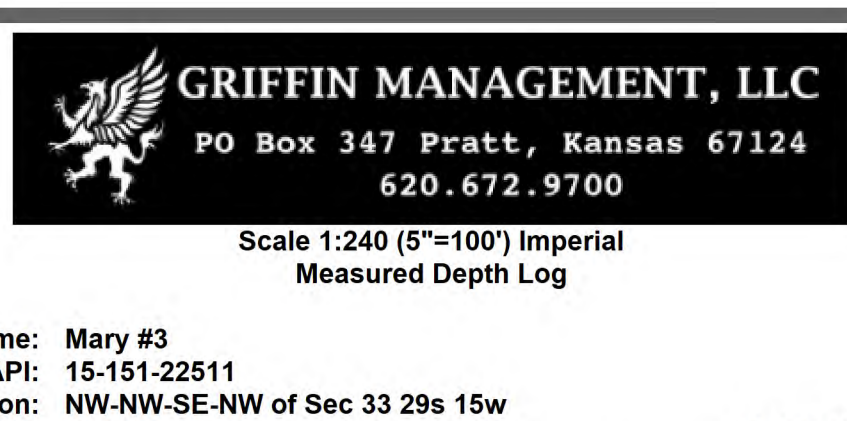
CNL/CDL w/ PE
DUAL INDUCTION
MICRO
SONIC

Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	MARY 3
Doc ID	1500402

Tops

Name	Top	Datum
KING HILL	3679	-1700
HEEBNER	3887	-1908
BROWN LIME	4055	-2076
LANSING	4078	-2099
STARK	4375	-2396
B/KC	4460	-2481
PAWNEE	4518	-2539
CHEROKEE	4560	-2581
VIOLA	4595	-2616
SIMPSON SHALE	4750	-2771
SIMP SAND	4787	-2808





Scale 1:240 (5"=100') Imperial  
Measured Depth Log

Well Name: Mary #3  
 API: 15-151-22511  
 Location: NW-NW-SE-NW of Sec 33 29s 15w  
 License Number: 33936  
 Spud Date: 1/27/2020  
 Surface Coordinates: Lat: 37.481116 Long: -98.96878  
 Bottom Hole Coordinates: Same as surface coordinates. Survey 1/2 degree @ 4520'.  
 Ground Elevation (ft): 1968' K.B. Elevation (ft): 1979'  
 Logged Interval (ft): 3600' To: 4940' Total Depth (ft): 4940'  
 Formation: Ordovician @ RTD  
 Type of Drilling Fluid: Mud Co. Chemical Drispac  
 Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

**OPERATOR**  
 Company: Griffin Management, LLC  
 Address: P.O. Box 347  
 Pratt, KS 67124-0347

**GEOLOGIST**  
 Name: Eli J. Felts  
 Company: Griffin Management, LLC  
 Address: ejfelts47@gmail.com  
 316.204.5059

**Formation Tops**

SAMPLE TOPS	LOG TOPS
KING HILL 3675 (-1696)	KING HILL 3679 (-1700)
HEBNER 3882 (-1903)	HEBNER 3887 (-1908)
BROWN LIME 4051 (-2072)	BROWN LIME 4055 (-2076)
LANSING 4073 (-2094)	LANSING 4078 (-2098)
STARK 4370 (-2391)	STARK 4375 (-2386)
B/KC 4460 (-2471)	B/KC 4460 (-2481)
PAWNEE 4514 (-2535)	PAWNEE 4516 (-2539)
CHEROKEE 4592 (-2571)	CHEROKEE 4590 (-2561)
VIOLA 4692 (-2613)	VIOLA 4695 (-2616)
SIMP SHALE 4740 (-2761)	SIMP SHALE 4760 (-2771)
SIMP SAND 4770 (-2791)	SIMP SAND 4787 (-2808)
RTD 4840 (-2981)	LTD 4850 (-2971)

**Drilling Report**

Sterling Drilling, Rig #4  
 Tool Pusher: Lanny Saloga  
 Cell # 620.388.2676  
 1/27/2020  
 MIRU. Spud @ ~4pm. Set Surface.  
 1/28/2020  
 WOC @ 271'  
 1/29/2020  
 Drilling @ 1800'  
 1/30/2020  
 Drilling @ 3420'. Displaced Mud @ 2753'. Geo on location @ 12pm.  
 1/31/2020  
 Drilling @ 4442'. Bit trip @ 4520'.  
 2/01/2020  
 Drilling @ 4640'. Bit trip @ 4664'. RTD @ 9PM. CTCH for Loggers.  
 2/02/2020  
 Finished Logging @ ~5AM. TIH w/ bit to CTCH for casing. Released Rig @ 8:30 pm.  
 2/03/2020  
 Tearing Down.

**Problems**

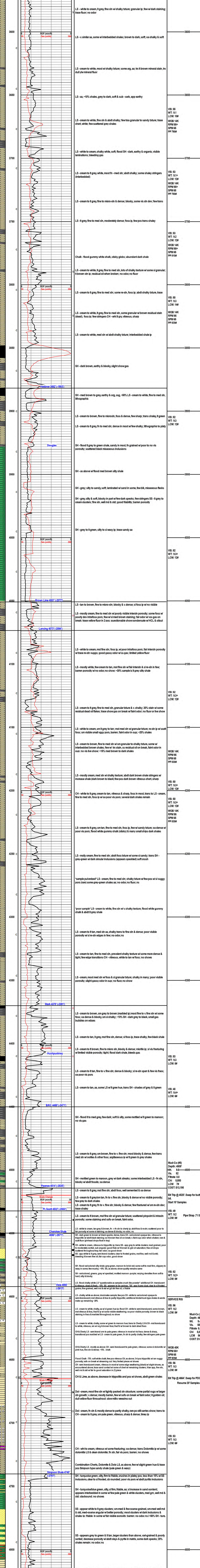
Bit #2 (button bit) did not give adequate penetration rates. Drilled 144' in 14 hours. Brand new, JZHA20-C missing nearly 1/2 the buttons & had significant wearing on the face. This bit was run to improve sample quality in pay zones & was swapped back out for PDC after drilling & CFS in Viola porosity.

**Pipe Setting**

12.25" (23#) Surface @ 267' KB  
 4.5" (10.5#) Production @ 4833' KB

**ROCK TYPES**

Anhy	Bent	Brec	Cht	Clyst	Coal	Congl	Dol-cream	Dol	Gyp	Igne	Granite 2	Granite	Lmst tan	Lmst	Meta	Mrist	Quartz	Salt	Shale 2	Shale 1	Shol	Shgy	Slst	Till
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RTD @ 4840'  
 LTD @ 4850'

ELI WIRELINE Ran the following logs:  
 CNL/COL w/ PE  
 Dual Induction  
 Micro-resistivity  
 Sonic

# QUALITY WELL SERVICE, INC.

7353

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410  
Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	1-27-20	Sec.	32	Twp.	29S	Range	15W	County	Pratt	State	Ks	On Location		Finish			
Lease	MARY	Well No.	#3			Location						KNOFT, K <sub>2</sub> S to 10 <sup>th</sup> rd 1 E to 13 <sup>th</sup> rd					
Contractor	STERLING OIL & GAS RIG #4							Owner								IS TO DE 1/2 S 1/2 SE INTO	
Type Job	Surface							To Quality Well Service, Inc.								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	12 1/4		T.D.		271'		Charge To								Griffin		
Csg.	3 5/8 23"		Depth		267'		Street										
Tbg. Size			Depth				City								State		
Tool			Depth				City								State		
Cement Left in Csg.			Shoe Joint		20'		The above was done to satisfaction and supervision of owner agent or contractor.										
Meas Line			Displace		15.31		Cement Amount Ordered								225 sk Common		
<b>EQUIPMENT</b>										2 1/2 FEL 3 1/2 CL 1/2 PS							
Pumptrk	3	No.					Common								225 sk		
Bulktrk	15	No.					Poz. Mix										
Bulktrk		No.					Gel.								423 #		
Pickup		No.					Calcium								635 #		
<b>JOB SERVICES &amp; REMARKS</b>										Hulls							
Rat Hole							Salt										
Mouse Hole							Flowseal								112.5 #		
Centralizers							Kol-Seal										
Baskets							Mud CLR 48										
D/V or Port Collar							CFL-117 or CD110 CAF 38										
Roll 6 sk's 3 5/8 23" CSG SET @ 267'										Sand							
START CSG CSG ON Bottoming Hook up to										Handling						242	
CSG & BREAK CIRC W/ING										Mileage						25 / 6050	
START Pumping 10 Bbls H <sub>2</sub> O										<b>3 5/8 FLOAT EQUIPMENT</b>							
START Mix Pump 225 sk Common										Guide Shoe						HEAD & MANIFOLD 1 EA	
2 1/2 FEL 3 1/2 CL 1/2 PS @ 14.3 #/gal										Centralizer						3 5/8 WOODEN PLOG 1 EA	
GAST DOWN RELEASE 3 5/8 WOODEN PLOG										Baskets							
START ASP										AFU Inserts							
P.V. DOWN 15.3 Bbls										Float Shoe							
Close Valve on CSG 150'										Latch Down							
Gm circ thru JOBS										SERVICE Sp/						1 EA	
CIRC CMT TO RT										LMV						25	
THANK YOU										Pumptrk Charge						Surface	
PLEASE CALL AGAIN										Mileage						50	
TODD IS JAKE																	
Signature <i>Todd J. Jake</i>																	
																Tax	
																Discount	
																Total Charge	

# QUALITY WELL SERVICE, INC.

7356

*Inv  
C-2211*

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2-2-20	33	29S	15W	PRATT	KS		
Lease MARY #	Well No. #3		Location KOPK, KS S to 110 <sup>th</sup>   E to 130 <sup>th</sup> rd				
Contractor STEELING DRG. RIG #4				Owner Y2 E into			
Type Job 4 1/2 L.S.	To Quality Well Service, Inc. 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 7 7/8	T.D. 4850'		Charge To Griffin				
Csg. 4 1/2 10.5"	Depth 4833'		Street				
Tbg. Size	Depth		City State				
Tool	Depth		City State				
Cement Left in Csg.	Shoe Joint 10.48		The above was done to satisfaction and supervision of owner agent or contractor.				
Meas Line	Displace 76.63		Cement Amount Ordered 200 sc ProC 2-1 Gal 10% SALT				
<b>EQUIPMENT</b>				5 1/2" KOLSEAL 6" C16A .25" C41P 1/4" PS			
Pumptrk 3 No.			Common 200 sc				
Bulktrk 10 No.			Poz. Mix				
Bulktrk No.			Gel. 376"				
Pickup No.			Calcium				
<b>JOB SERVICES &amp; REMARKS</b>				Hulls			
Rat Hole 30 sc			Salt 1101"				
Mouse Hole 20 sc			Flowseal 50"				
Centralizers 1-2-3-4-5-6			Kol-Seal 1000"				
Baskets			Mud CLR 48 500 GAL				
D/V or Port Collar			CFL-117 or CD110 CAF 38 C16A 1128"				
Don 4 1/2 10.5" CSG SET @			Sand CG-1 7 GAL C41P 47"				
START CSG CS6 ON Bottom! TAG Hook up to CSG!			Handling 246				
BREAK Circ w/ RIG DROP BALL & Circ w/ RIG			Mileage 25/6150				
START Pumping 10 Bbls H2O 12 Bbls HF 10 Bbls H2O			4 1/2 FLOAT EQUIPMENT				
START PLOG R.M H-LES			Guide Shoe HEAD: man. fld 1 EA				
START Mix & Pump 150g ProC down CSG @ 14.8"/GAL			Centralizer 6 EA				
SHUT DOWN wash up + RIG! RELEASE 4 1/2 LD PLOG			Baskets				
START Disp w/ 2 1/2 KCL			AFU Inserts				
LIFT PS. 65 1/2 out 600"			Float Shoe 1 EA				
PLOG DOWN 1100" 77 Bbl out			Latch Down 1 EA				
PS. up CSG 1500"			SERVICE Spool 1 EA				
Release! HELD 1/2 Bbl BACK			LMV 25				
Good Circ thro JOB			Pumptrk Charge LS.				
				Mileage 50			
THANK YOU				Tax			
PLEASE CALL AGAIN TOMORROW TO MAKE JOB				Discount			
Signature <i>[Signature]</i>				Total Charge			