

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



**Cement or Acid Field Report**

Ticket No. **5107**  
 Foreman David Gardner  
 Camp Eureka

API # 15-049-22623

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
6-17-20	1028	Schule #3	35	30 S.	9 E.	ELK	KS	
Customer <u>Lone Wolf Oil &amp; Gas Co. LLC</u>			Safety Meeting DG ZA 3V		Unit #	Driver	Unit #	Driver
Mailing Address <u>Box 241</u>					<u>102</u>	<u>Zevi</u>		
City <u>Moline</u>			State <u>KS</u>		Zip Code <u>67353</u>			
					<u>113</u>	<u>Josh</u>		

Job Type Surface Hole Depth 55' Slurry Vol. Bbl Tubing \_\_\_\_\_  
 Casing Depth 40.62' Hole Size 12 1/4" Slurry Wt. 15<sup>g</sup> Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 8 5/8" Cement Left in Casing 10' +/- Water Gal/SK 6.5 Other \_\_\_\_\_  
 Displacement 2 1/2 Bbl Displacement PSI \_\_\_\_\_ Bump Plug to \_\_\_\_\_ BPM \_\_\_\_\_

Remarks: Safety Meeting. Rig up to 8 5/8" casing. Break circulation w/ 5 Bbl fresh water. Mixed 55 sks Class H' Cement w/ 3% Cactz, 2% Gel, 4 1/4" Floccle/sk @ 15<sup>g</sup> /gal, yield 1.35 = 13 Bbl slurry. Displace w/ 2 3/4 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	55 sks	Class H' Cement	15.75	866.25
C205	155 <sup>g</sup>	Cactz 3%	.63	97.65
C206	105 <sup>g</sup>	Gel 2%	.21	22.05
C209	15 <sup>g</sup>	Floccle 1/4"/sk	2.35	35.25
C108A	2.58 Tons	Ton Mileage - Bulk Truck	m/c	365.00
<u>Thank You</u>				
			Sub Total	2,402.20
			Less 5%	123.94
			Sales Tax	76.59
			7.5 %	

Authorization by Rob Wolf Title \_\_\_\_\_ Total 2,354.85

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 7<sup>TH</sup>  
 PO Box 92  
 EUREKA, KS 67045  
 (620) 583-5561



**Cement or Acid Field Report**  
 Ticket No. **5083**  
 Foreman Kevin McCoy  
 Camp EUREKA

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
6-18-20	1028	Schule #3	35	30S	9E	ELK	Ks
Customer <u>Lone Wolf Oil &amp; Gas</u>		Safety Meeting KM AM SM JV		Unit #	Driver	Unit #	Driver
Mailing Address <u>Box 241</u>				104	ALAN M.		
City <u>Moline</u>		State <u>Ks</u>	Zip Code <u>67353</u>	113	Josh V.		
				145	Steve M.		

Job Type Longstring Hole Depth 1195' KB Slurry Vol. 60 bbl Tubing \_\_\_\_\_  
 Casing Depth 1170' G.L. Hole Size 7 7/8" Slurry Wt. 13.6 # Drill Pipe \_\_\_\_\_  
 Casing Size & Wt. 5 1/2 14 # Cement Left in Casing 4' Water Gal/SK \_\_\_\_\_ Other \_\_\_\_\_  
 Displacement 29.5 Bbl Displacement PSI 500 Bump Plug to 1000 PSI BPM \_\_\_\_\_

Remarks: Safety Meeting: 5 1/2" 14 # casing set @ 1170' G.L. Rig up to 5 1/2 casing. BREAK  
Circulation w/ 12 bbl fresh water. Mixed 170 sks THICK Set Cement w/ 5 # Kol-Seal/sk,  
1 # PhenoSeal/sk @ 13.6 #/gal, yield 1.98 = 60 bbl slurry. wash out pump & lines, shut down,  
Release Latch down Plug. Displace Plug to Seat w/ 29.5 bbl fresh water. FINAL Pumping  
Pressure 500 PSI. Bump Plug to 1000 PSI. wait 2 mins. Release Pressure. float & Plug  
Heid. Good Cement Returns to SURFACE = 3 bbl slurry to sit. ANNULUS Standing full  
of Cement. Job Complete. Rig down.

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	170 SKS	THICK Set Cement	20.50	3485.00
C 207	850 #	Kol-Seal 5#/sk	.47 #	399.50
C 208	170 #	PhenoSeal 1#/sk	1.30 #	221.00
C 108.B	9.35 TONS	TON Mileage 30 miles	1.40	392.70
C 113	3 HRS	80 BBL VAC TRUCK	90.00	270.00
C 224	3000 gals	CITY WATER	10.00/1000	30.00
C 421	1	5 1/2 LATCH down Plug	242.00	242.00
C 691	1	5 1/2 Guide Shoe	175.00	175.00
C 703	1	5 1/2 AFU INSERT Flapper Valve	152.00	152.00
C 604	1	5 1/2 Cement BASKET	236.00	236.00
C 504	3	5 1/2 x 7 7/8 Centralizers	50.00	150.00
			Sub Total	6979.20
			Less 5%	368.05
			Sales Tax 7.5%	381.79
Authorization <u>By Rob Wolfe</u> Title _____			Total	6,992.94

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.