KOLAR Document ID: 1676973

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:	SecTwpS. R East West					
Address 2:	Feet from North / South Line of Section					
City:	Feet from East / West Line of Section					
Contact Person:	Footages Calculated from Nearest Outside Section Corner:					
Phone: ()	□NE □NW □SE □SW					
CONTRACTOR: License #	GPS Location: Lat:, Long:					
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxx)					
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84					
Purchaser:	County:					
Designate Type of Completion:	Lease Name: Well #:					
New Well Re-Entry Workover	Field Name:					
	Producing Formation:					
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:					
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:					
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet					
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No					
Cathodic Other (Core, Expl., etc.):						
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 Producer	(Data must be collected from the Reserve Pit)					
Commingled Permit #:	Chloride content:ppm Fluid volume:bbls					
Dual Completion Permit #:	Dewatering method used:					
SWD Permit #:	Location of fluid disposal if hauled offsite:					
EOR Permit #:	Location of haid disposal in hadica offsite.					
GSW Permit #:	Operator Name:					
	Lease Name: License #:					
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. R East West					
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 Na	ame: _			Well #:	
SecTwp	oS.	R	East	West	County: _					
open and closed, and flow rates if g	flowing and s gas to surface y Log, Final L	hut-in pressu test, along wi ogs run to ob	res, whe ith final c tain Geo	ther shut-in prechart(s). Attach	essure reache extra sheet i and Final Elec	ed stati if more ctric Lo	c level, hydrosta space is neede	tic pressures, d.		val tested, time tool rature, fluid recovery,  Digital electronic log
Drill Stem Tests Taken Ye  (Attach Additional Sheets)			es No	s No Log Formation (Top), Depth			h and Datum Sample			
			Y	es  No			е		Datum	
Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:			Y	es No es No es No						
			David		RECORD	☐ Ne				
	Qi	ize Hole	-	ze Casing	conductor, surface, interme		Setting	Type of	# Sacks	Type and Percent
Purpose of Str		Drilled		t (In O.D.)	Weight Lbs. / F		Depth	Cement	Used	Additives
	'			ADDITIONAL	. CEMENTING	3 / SQL	JEEZE RECORD	'	'	
Purpose:		Depth p. Rottom	Туре	of Cement	# Sacks U	sed		Туре а	and Percent Additives	
Perforate Top Bottom Protect Casing Plug Back TD										
Plug Off Zo										
Did you perform     Does the volume     Was the hydraulic	of the total bas	e fluid of the hy	draulic fra	acturing treatmen		•		No (If No	o, skip questions 2 and o, skip question 3) o, fill out Page Three o	
Date of first Produc	ction/Injection or	Resumed Prod	duction/	Producing Meth			0.1%	NI (5 ( ) )		
				Flowing Pumping				other (Explain) _		
Estimated Product Per 24 Hours	tion	Oil Bl	bls.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:				N	METHOD OF COMPLETION:				PRODUCTIO	
☐ Vented ☐ Sold ☐ Used on Lease				Open Hole	Perf.			nmingled	Тор	Bottom
(If vented	d, Submit ACO-1	8.)				(Submit	ACO-5) (SUD	mit ACO-4)		
Shots Per Foot	Perforation Top	Perforati Botton		Bridge Plug Type	g Bridge Plug Set At		Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)			Record
TUBING RECORD	): Size:	:	Set At:		Packer At:					

Form	ACO1 - Well Completion					
Operator	R & B Oil & Gas, Inc.					
Well Name	BOCK C 1					
Doc ID	1676973					

## 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	23	256	60:40 Poz		2% Gel, 3% CC
Production	7.875	4.5	10.5	2432	Class H	100	10% Salt, 5# Kolseal