## KOLAR Document ID: 1684317

Confidentiality Requested:

CONFIDENTIAL

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

OPERATOR: License #		API No.:
Name:		Spot Description:
Address 1:		
Address 2:		Feet from North / South Line of Section
City: State	e: Zip:+	Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		
CONTRACTOR: License #		GPS Location: Lat:, Long:
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entry Workover		Field Name:
		Producing Formation:
		Elevation: Ground: Kelly Bushing:
Gas DH EOR		Total Vertical Depth: Plug Back Total Depth:
	GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)		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:
		feet depth to:w/sx cmt.
	_ Original Total Depth:	······································
Deepening Re-perf.	Conv. to EOR Conv. to SWD	Defilie a Florid Management Dise
Plug Back	Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
		Chloride content: ppm Fluid volume: bbls
Commingled F	Permit #:	
Dual Completion F	Permit #:	Dewatering method used:
SWD F	Permit #:	Location of fluid disposal if hauled offsite:
EOR F	Permit #:	Operator Name:
GSW F	Permit #:	License #:
		Quarter Sec TwpS. R East West
Spud Date or Date Reach Recompletion Date	ned TD Completion Date or Recompletion Date	QuarterSec.  TwpS.  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:		