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 # 33120
Name: Rhodes, Derek Leon dba Rhodes Well Service
Address 1: 4990 WISCONSIN RD
Address 2:
City: BRONSON State: KS Zip: 66716 + 3091
Contact Person: Derek Rhodes
Phone: (620) 363-1093
CONTRACTOR: License # 33120
Name: Rhodes, Derek Leon dba Rhodes Well Service
Wellsite Geologist: Floyd Bishop
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: Rhodes Well Service
Well Name: WEF 20
Original Comp. Date: 12/1/1980 Original Total Depth: 423
☐ 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 #: E27813
☐ GSW Permit #:

| 3/22/2023 | 3/23/2023 | 3/27/2023 |
|---|---|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No.: 15-037-20619-00-01
Spot Description:
__ - NW - SE - NE Sec. 6 Twp. 29 S. R. 22 ☑ East ☐ West
3501 Feet from ☐ North / ☑ South Line of Section
1048 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
GPS Location: Lat: ____ *(e.g. xx.xxxxx)*, Long: ____ *(e.g. -xxx.xxxxx)*
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Crawford
Lease Name: WEF Well #: 20
Field Name: Walnut SE
Producing Formation: Bartlesville
Elevation: Ground: 928 Kelly Bushing: 0
Total Vertical Depth: 423 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 395 w/ 50 sx cmt.

**Drilling Fluid Management Plan**
*(Data must be collected from the Reserve Pit)*
Chloride content: 0 ppm Fluid volume: 60 bbls
Dewatering method used: Evaporated
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:** David Befort **Date:** 04/04/2023

*Page Two*

Operator Name: Rhodes, Derek Leon dba Rhodes Well Service Lease Name: WEF Well #: 20

Sec. 6 Twp. 29 S. R. 22 ☑ East ☐ West County: Crawford

**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 ☐ Yes ☑ No
*(Attach Additional Sheets)*

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☐ Yes ☑ No

Geologist Report / Mud Logs ☐ Yes ☑ No

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

| Name | Top | Datum |
|---|---|---|
| Bartlesville | 395 | 423 |

CASING RECORD ☑ New ☐ 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 |
|---|---|---|---|---|---|---|---|
| Surface | 9.5 | 6.25 | 15 | 20 | portland | 5 | na |
| Production | 5.375 | 2.375 | 5 | 395 | portland | 50 | na |
| | | | | | | | |

ADDITIONAL CEMENTING / SQUEEZE RECORD

| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
|---|---|---|---|---|
| ____ Perforate<br>____ Protect Casing<br>____ Plug Back TD<br>____ 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: 3/30/2023

Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☑ Other *(Explain)* pending injection well

| Estimated Production Per 24 Hours | Oil | Bbls. | Gas | Mcf | Water | Bbls. | Gas-Oil Ratio | Gravity |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease
*(If vented, Submit ACO-18.)*

METHOD OF COMPLETION: ☑ Open Hole ☐ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)*

PRODUCTION INTERVAL:

| Top | Bottom |
|---|---|
| 395 | 423 |
| | |

| 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)* |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

TUBING RECORD: Size: Set At: Packer At:

**Mail to: KCC - Conservation Division, 266 N. Main, Suite 220, Wichita, Kansas 67202**

| | |
|---|---|
| Form | ACO1 - Well Completion |
| Operator | Rhodes, Derek Leon dba Rhodes Well Service |
| Well Name | WEF 20 |
| Doc ID | 1707219 |

Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | Number of Sacks Used | Type and Percent Additives |
|---|---|---|---|---|---|---|---|
| Surface | 9.5 | 6.25 | 15 | 20 | portland | 5 | na |
| Production | 5.375 | 2.375 | 5 | 395 | portland | 50 | na |
| | | | | | | | |
| | | | | | | | |