

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	Blake Exploration, LLC
Well Name	ATKISSON 1
Doc ID	1569066

All Electric Logs Run

Dual Comp Porosity
Micro
Sonic
Dual Induction

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 2192

Date	3-31-21	Sec.	6	Twp.	7	Range	20	County	Rooks	State	KS	On Location		Finish	12:30
------	---------	------	---	------	---	-------	----	--------	-------	-------	----	-------------	--	--------	-------

Lease A+Kisson Well No. 1 Location Danary Hwy/24 5N TO HRD Owner 1W

Contractor S.T.P.
Type Job Surface
Hole Size 12 1/4 T.D. 2210
Csg. 8 5/8 Depth 220
Tbg. Size _____ Depth _____
Tool _____ Depth _____

Charge To Blake Exploration
Street _____
City _____ State _____

Cement Left in Csg. 10' Shoe Joint _____
Cement Amount Ordered 150 80/20 3 1/4 2 1/4
Meas Line _____ Displace 13 BC

EQUIPMENT

Pumptrk	No. <u>20</u>	Cementer	<u>Craig</u>	Common	<u>120</u>
		Helper		Poz. Mix	<u>30</u>
Bulktrk	No. _____	Driver	<u>Tony</u>	Gel.	<u>3</u>
Bulktrk	No. <u>9</u>	Driver	<u>Doug</u>	Calcium	<u>6</u>

JOB SERVICES & REMARKS

Remarks: _____
Rat Hole _____
Mouse Hole _____
Centralizers _____
Baskets _____
D/V or Port Collar _____
Sand _____
Handling 159
Mileage _____

FLOAT EQUIPMENT

Guide Shoe _____
Centralizer _____
Baskets _____
AFU Inserts _____
Float Shoe _____
Latch Down _____

Pumptrk Charge Surface
Mileage 50

Signature [Signature]
Tax _____
Discount _____
Total Charge _____

Thanks

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 2210

Date	Sec.	Twp.	Range	County	State	On Location	Finish
4/6/2021	6	7	20	Rooks	Kansas		9:15 am

Location Damer 9.5 N 1 W Ninto

Lease <u>Atkisson</u>	Well No. <u>1</u>	Owner
Contractor <u>STP Drilling</u>		To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Type Job <u>plug</u>		
Hole Size <u>7 7/8</u>	T.D. <u>3747</u>	Charge To <u>Blake Exploration</u>
Csg.	Depth	Street
Tbg. Size <u>Drillpipe</u>	Depth <u>3692</u>	City
Tool	Depth	State
Cement Left in Csg.	Shoe Joint	The above was done to satisfaction and supervision of owner agent or contractor.
		Cement Amount Ordered <u>290 69% 4% gel 1/4 flo seal</u>

Meas Line	Displace
EQUIPMENT	
Pumptrk <u>20</u> No.	Cementer Helper <u>David</u>
Bulktrk <u>14</u> No.	Driver <u>Tom</u>
Bulktrk	Driver

Common	<u>175</u>
Poz. Mix	<u>115</u>
Gel.	<u>10</u>
Calcium	
Hulls	
Salt	
Flowseal	<u>75 #</u>
Kol-Seal	
Mud CLR 48	
CFL-117 or CD110 CAF 38	
Sand	
Handling	<u>300</u>
Mileage	

JOB SERVICES & REMARKS	
Remarks:	
Rat Hole <u>30 sks</u>	
Mouse Hole	
Centralizers	
Baskets	
D/V or Port Collar	
<u>3692' - 50 sks</u>	
<u>1825' - 50 sks</u>	
<u>1075' - 100 sks</u>	
<u>275' - 50 sks</u>	
<u>40' - 10 sks</u>	
<u>Rat hole 30 sks</u>	
<u>Cement did circulate</u>	

FLOAT EQUIPMENT	
Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
Float Shoe	
Latch Down	
<u>1-Dry hole plug</u>	
Pumptrk Charge <u>plug</u>	
Mileage <u>30</u>	

X Signature [Signature]

Thanks

Tax	
Discount	
Total Charge	



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Blake Exploration LLC

6-7s-20w Rooks KS

201 S Main
PO BOX 150
Bogue KS 67625+0150
ATTN: Mike Davignon

Atkisson #1

Job Ticket: 66921

DST#: 1

Test Start: 2021.04.03 @ 01:07:00

GENERAL INFORMATION:

Formation: **Lower Topeka**
Deviated: **No** Whipstock: **ft (KB)**
Time Tool Opened: 07:56:27
Time Test Ended: 12:08:32

Test Type: **Conventional Bottom Hole (Initial)**
Tester: **Spencer J Staab**
Unit No: **84**

Interval: **3309.00 ft (KB) To 3350.00 ft (KB) (TVD)**
Total Depth: **3350.00 ft (KB) (TVD)**
Hole Diameter: **7.88 inches** Hole Condition: **Fair**

Reference Elevations: **2196.00 ft (KB)**
2189.00 ft (CF)
KB to GR/CF: **7.00 ft**

Serial #: 8875

Inside

Press@RunDepth: **287.65 psig @ 3312.00 ft (KB)**

Capacity: **psig**

Start Date: **2021.04.03**

End Date: **2021.04.03**

Last Calib.: **2021.04.03**

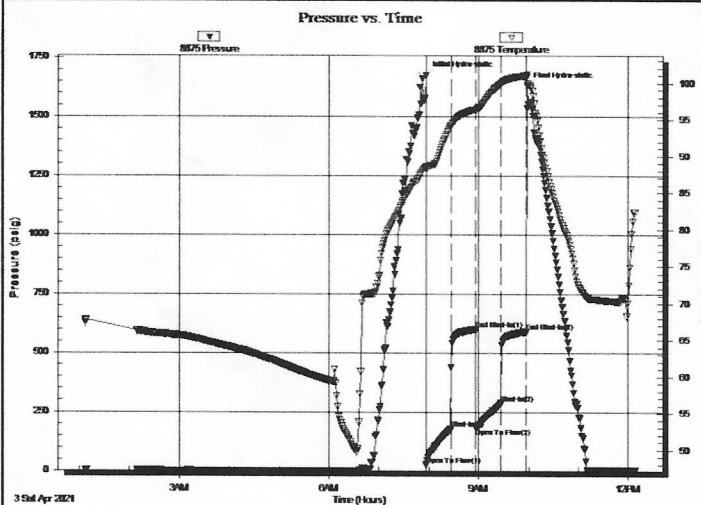
Start Time: **01:07:00**

End Time: **12:08:32**

Time On Btm: **2021.04.03 @ 07:56:22**

Time Off Btm: **2021.04.03 @ 09:58:02**

TEST COMMENT: 30-IF-BOB 11 mins; Built to 14"
30-ISI-No Return
30-FF-Built to 11 1/2"
30-FSI-No Return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1676.35	88.65	Initial Hydro-static
1	24.15	88.16	Open To Flow (1)
31	178.42	94.19	Shut-In(1)
61	600.73	96.41	End Shut-In(1)
61	183.41	96.31	Open To Flow (2)
91	287.65	100.03	Shut-In(2)
121	591.13	100.98	End Shut-In(2)
122	1631.37	100.92	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
250.00	Water 100%W	2.44
340.00	MW 30%M 70%W	4.82

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

Trilobite Testing, Inc

Ref. No: 66921

Printed: 2021.04.03 @ 12:20:46

Spencer
785-259-0056



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Blake Exploration LLC

6-7s-20w Rooks KS

201 S Main
PO BOX 150
Bogue KS 67625+0150
ATTN: Mike Davignon

Atkisson #1

Job Ticket: 66922

DST#: 2

Test Start: 2021.04.03 @ 21:15:00

GENERAL INFORMATION:

Formation: **Toronto-LKC A**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 23:57:27

Time Test Ended: 02:42:52

Test Type: Conventional Bottom Hole (Reset)

Tester: Spencer J Staab

Unit No: 84

Interval: **3375.00 ft (KB) To 3425.00 ft (KB) (TVD)**

Reference Elevations: 2196.00 ft (KB)

Total Depth: 3425.00 ft (KB) (TVD)

2189.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 7.00 ft

Serial #: 8875

Inside

Press@RunDepth: 19.89 psig @ 3378.00 ft (KB)

Capacity: psig

Start Date: 2021.04.03

End Date:

2021.04.04

Last Calib.: 2021.04.04

Start Time: 21:15:00

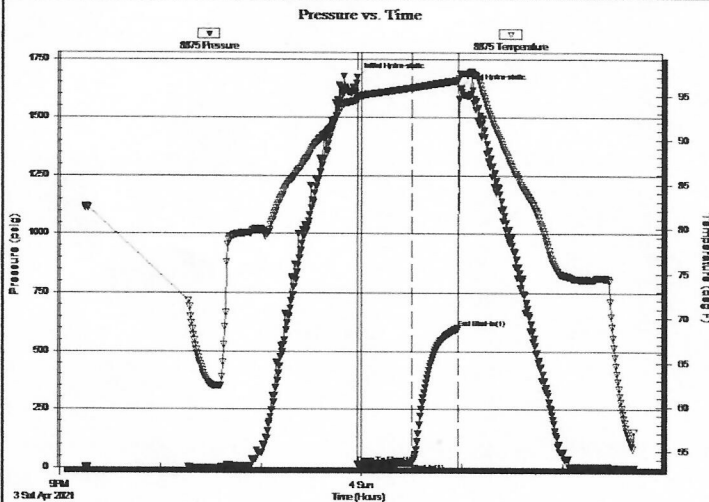
End Time:

02:42:52

Time On Btm: 2021.04.03 @ 23:57:22

Time Off Btm: 2021.04.04 @ 00:58:47

TEST COMMENT: 30-IF-Very Weak Surface Blow
30-ISI-No Return
Pulled Tool



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1671.75	94.86	Initial Hydro-static
1	16.55	94.40	Open To Flow (1)
33	19.89	95.86	Shut-In(1)
61	598.35	96.71	End Shut-In(1)
62	1626.04	97.44	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	Mud 100%M	0.02

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Blake Exploration LLC

6-7s-20w Rooks KS

201 S Main
PO BOX 150
Bogue KS 67625+0150
ATTN: Mike Davignon

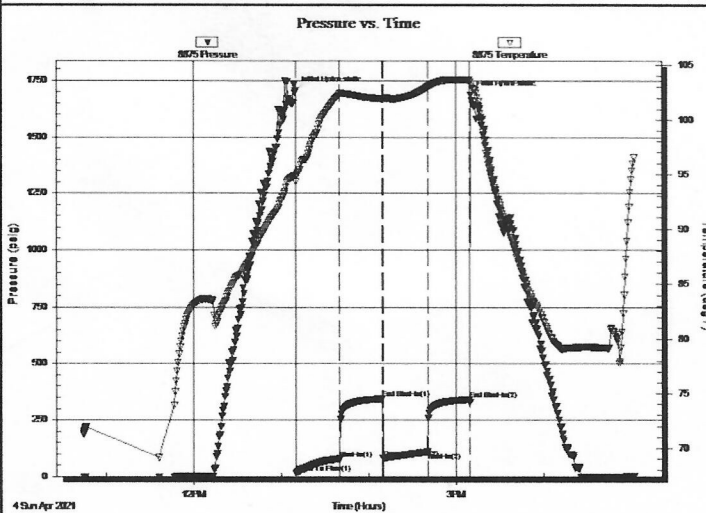
Atkisson #1
Job Ticket: 66923 DST#: 3
Test Start: 2021.04.04 @ 10:45:00

GENERAL INFORMATION:

Formation: LKC C	Test Type: Conventional Bottom Hole (Reset)
Deviated: No Whipstock ft (KB)	Tester: Spencer J Staab
Time Tool Opened: 13:10:07	Unit No: 84
Time Test Ended: 17:02:52	Reference Elevations: 2196.00 ft (KB)
Interval: 3440.00 ft (KB) To 3470.00 ft (KB) (TVD)	2189.00 ft (CF)
Total Depth: 3470.00 ft (KB) (TVD)	KB to GR/CF: 7.00 ft
Hole Diameter: 7.88 inches Hole Condition: Fair	

Serial #: 8875 Outside	Capacity: psig
Press@RunDepth: 109.61 psig @ 3441.00 ft (KB)	Last Calib.: 2021.04.04
Start Date: 2021.04.04 End Date: 2021.04.04	Time On Btm: 2021.04.04 @ 13:10:02
Start Time: 10:45:00 End Time: 17:02:52	Time Off Btm: 2021.04.04 @ 15:10:27

TEST COMMENT: 30-IF-Surface to 7"
30-ISI-No Return
30-FF-Surface to 4 1/2"
30-FSI-No Return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1705.20	94.93	Initial Hydro-static
1	15.36	94.32	Open To Flow (1)
31	79.44	102.39	Shut-In(1)
60	344.21	101.91	End Shut-In(1)
60	81.36	101.89	Open To Flow (2)
91	109.61	103.03	Shut-In(2)
120	340.90	103.68	End Shut-In(2)
121	1686.82	103.52	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
100.00	MCW 10%M 90%W	0.49
100.00	MW 40%M 60%W	1.24
2.00	Clean Oil 100%O	0.03

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Blake Exploration LLC
201 S Main
PO BOX 150
Bogue KS 67625+0150
ATTN: Mike Davignon

6-7s-20w Rooks KS

Atkisson #1

Job Ticket: 66924

DST#: 4

Test Start: 2021.04.04 @ 22:15:00

GENERAL INFORMATION:

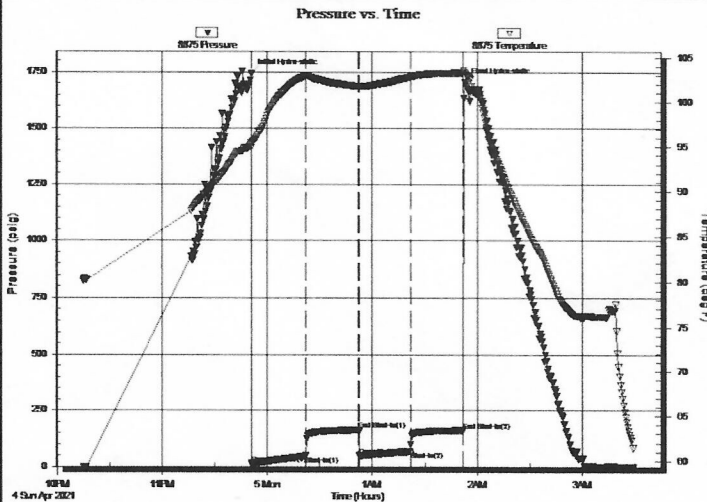
Formation: **LKC D**
 Deviated: **No** Whipstock: **ft (KB)**
 Time Tool Opened: **23:50:52**
 Time Test Ended: **03:29:32**
 Interval: **3470.00 ft (KB) To 3489.00 ft (KB) (TVD)**
 Total Depth: **3489.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**
 Test Type: **Conventional Bottom Hole (Reset)**
 Tester: **Spencer J Staab**
 Unit No: **84**
 Reference Elevations: **2196.00 ft (KB)**
2189.00 ft (CF)
 KB to GR/CF: **7.00 ft**

Serial #: 8875

Outside

Press@RunDepth: **68.36 psig @ 3471.00 ft (KB)**
 Start Date: **2021.04.04** End Date: **2021.04.05**
 Start Time: **22:15:00** End Time: **03:29:32**
 Capacity: **psig**
 Last Calib.: **2021.04.05**
 Time On Btm: **2021.04.04 @ 23:50:47**
 Time Off Btm: **2021.04.05 @ 01:52:57**

TEST COMMENT: 30-IF-Surface to 2"
 30-ISI-No Return
 30-FF-Surface to 1 1/2"
 30-FSI-No Return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1742.28	95.47	Initial Hydro-static
1	13.17	94.93	Open To Flow (1)
32	46.89	102.93	Shut-In(1)
62	163.06	101.76	End Shut-In(1)
62	48.52	101.76	Open To Flow (2)
91	68.36	102.81	Shut-In(2)
122	161.97	103.27	End Shut-In(2)
123	1705.74	103.27	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
119.00	SMCW 5%M 95%W	0.59

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)