KOLAR Document ID: 1706575

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

CONFIDENTIAL WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #		API No.:
Name:		Spot Description:
Address 1:		SecTwpS. R
Address 2:		Feet from North / South Line of Section
City: State:	Zip:+	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 ☐ Gas ☐ DH ☐ EOR		Elevation: Ground: Kelly Bushing:
OG GSW		Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)		Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):		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:
Well Name:		feet depth to:w/sx cmt.
Original Comp. Date: Original		· ·
Deepening Re-perf. Conv. to	·	Drilling Fluid Management Plan
	o GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:		Chloride content:ppm Fluid volume:bbls
		Dewatering method used:
		Location of fluid disposal if hauled offsite:
		20041011 01 Italia disposa il Italia di Ottorio.
		Operator Name:
		Lease Name: License #:
Spud Date or Date Reached TD	Completion Date or	Quarter Sec TwpS. R
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:		