

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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# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071

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

No. **3238**

Cell 785-324-1041

Date <b>1-12-23</b>	Sec.	Twp.	Range	County <b>Ellis</b>	State <b>Ks</b>	On Location	Finish <b>2:30 pm</b>
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Location **VICTORIA LN 1E**

Lease <b>BOB &amp; MARIE</b>	Well No. <b>3</b>	Owner 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.
Contractor <b>DISCOVERY 2</b>		
Type Job <b>PTA</b>		

Hole Size <b>7 7/8</b>	T.D. <b>3560</b>	Charge To <b>C B G OIL LLC</b>
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Csg.	Depth	Street
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Tbg. Size	Depth	City	State
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Tool	Depth	The above was done to satisfaction and supervision of owner agent or contractor.
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Cement Left in Csg.	Shoe Joint	Cement Amount Ordered <b>280M 60/40 4% g</b>
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Meas Line	Displace	<b>1/4 # Flowseal</b>
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<b>EQUIPMENT</b>		Common <b>170</b>
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Pumptrk <b>17</b> No.	Cementer Helper	<b>Bill</b>	Poz. Mix <b>110</b>
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Bulktrk No.	Driver	<b>NICK</b>	Gel. <b>10</b>
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Bulktrk <b>9</b> No.	Driver	<b>COPY</b>	Calcium
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<b>JOB SERVICES &amp; REMARKS</b>		Hulls
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Remarks:	Salt
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Rat Hole <b>30</b>	Flowseal <b>75#</b>
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Mouse Hole <b>15</b>	Kol-Seal
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Centralizers	Mud CLR 48
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Baskets	CFL-117 or CD110 CAF 38
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D/V or Port Collar	Sand
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<b>3438</b>	<b>50A</b>	Handling <b>290</b>
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<b>1125</b>	<b>50A</b>	Mileage
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<b>600</b>	<b>75A</b>	<b>FLOAT EQUIPMENT</b>
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<b>250</b>	<b>50A</b>	Guide Shoe <b>1 5/8 Dry Hole plug</b>
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<b>40</b>	<b>10A</b>	Centralizer
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		Baskets
--	--	---------

		AFU Inserts
--	--	-------------

		Float Shoe
--	--	------------

		Latch Down
--	--	------------

--	--	--

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		Pumptrk Charge <b>plug</b>
--	--	----------------------------

		Mileage <b>15 min</b>
--	--	-----------------------

		Tax
--	--	-----

		Discount
--	--	----------

		Total Charge
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X Signature  Thanks



## DRILL STEM TEST REPORT

Prepared For: **CG Oil ,Inc**

2550 Aibase Rd

Victoria ,KS 67671

ATTN: Roger Fisher

### **Bob & Marie #3**

### **31-13-16w Ellis,KS**

Start Date: 2023.01.11 @ 11:50:00

End Date: 2023.01.11 @ 18:31:44

Job Ticket #: 69985                      DST #: 1

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2023.01.12 @ 15:55:03



**TRILOBITE TESTING, INC**

# DRILL STEM TEST REPORT

CG Oil ,Inc  
 2550 Aibase Rd Victoria ,KS 67671  
 ATTN: Roger Fisher

**31-13-16w Ellis,KS**  
**Bob & Marie #3**  
 Job Ticket: 69985 **DST#: 1**  
 Test Start: 2023.01.11 @ 11:50:00

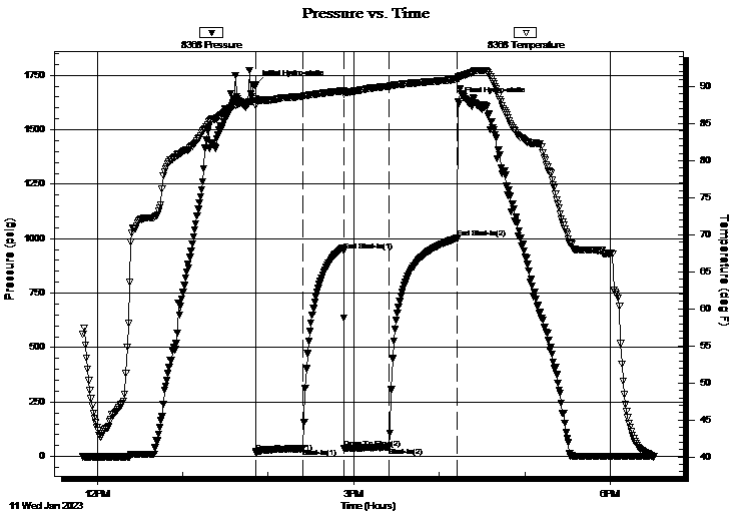
## GENERAL INFORMATION:

Formation: **Arbuckle**  
 Deviated: No Whipstock: ft (KB)  
 Time Tool Opened: 13:51:18  
 Time Test Ended: 18:31:44  
 Interval: **3406.00 ft (KB) To 3485.00 ft (KB) (TVD)**  
 Total Depth: 3485.00 ft (KB) (TVD)  
 Hole Diameter: 7.88 inches Hole Condition: Fair  
 Test Type: Conventional Bottom Hole (Initial)  
 Tester: Terrance  
 Unit No: 75  
 Reference Elevations: 1941.00 ft (KB)  
 1933.00 ft (CF)  
 KB to GR/CF: 8.00 ft

**Serial #: 8368** **Inside**  
 Press@RunDepth: 41.97 psig @ 3412.00 ft (KB) Capacity: 8000.00 psig  
 Start Date: 2023.01.11 End Date: 2023.01.11 Last Calib.: 2023.01.11  
 Start Time: 11:50:01 End Time: 18:31:44 Time On Btm: 2023.01.11 @ 13:51:15  
 Time Off Btm: 2023.01.11 @ 16:12:58

TEST COMMENT: IF-30-2 Inches  
 IS-30-NO return  
 FF-30-Surface blow  
 FS-45-No return

## PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1705.17	88.39	Initial Hydro-static
1	18.93	87.47	Open To Flow (1)
34	36.66	88.69	Shut-In(1)
62	945.41	89.42	End Shut-In(1)
62	37.69	88.99	Open To Flow (2)
94	41.97	90.05	Shut-In(2)
142	1001.27	90.96	End Shut-In(2)
142	1628.59	91.27	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
50.00	mud	0.43

## Gas Rates

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



**TRILOBITE  
TESTING, INC.**

# DRILL STEM TEST REPORT

CG Oil, Inc  
2550 Aibase Rd Victoria, KS 67671  
ATTN: Roger Fisher

**31-13-16w Ellis, KS**  
**Bob & Marie #3**  
Job Ticket: 69985 **DST#: 1**  
Test Start: 2023.01.11 @ 11:50:00

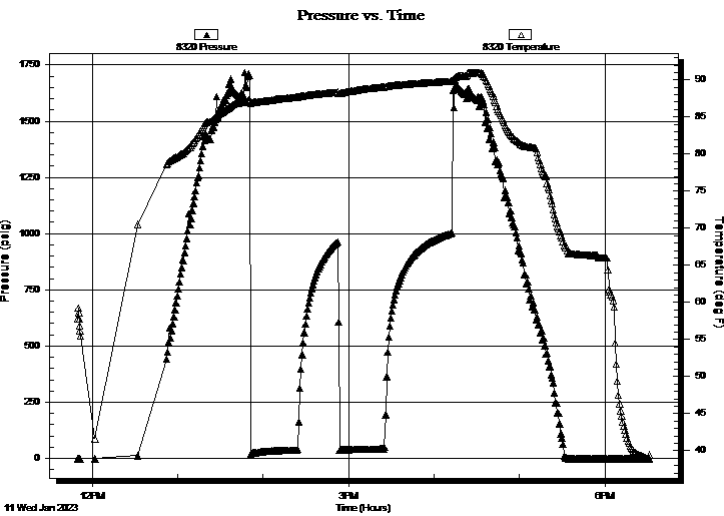
## GENERAL INFORMATION:

Formation: **Arbuckle**  
 Deviated: No Whipstock: ft (KB)  
 Time Tool Opened: 13:51:18  
 Time Test Ended: 18:31:44  
 Interval: **3406.00 ft (KB) To 3485.00 ft (KB) (TVD)**  
 Total Depth: 3485.00 ft (KB) (TVD)  
 Hole Diameter: 7.88 inches Hole Condition: Fair  
 Test Type: Conventional Bottom Hole (Initial)  
 Tester: Terrance  
 Unit No: 75  
 Reference Elevations: 1941.00 ft (KB)  
 1933.00 ft (CF)  
 KB to GR/CF: 8.00 ft

## Serial #: 8320 Outside

Press@RunDepth: psig @ 3412.00 ft (KB) Capacity: 8000.00 psig  
 Start Date: 2023.01.11 End Date: 2023.01.11 Last Calib.: 1899.12.30  
 Start Time: 11:50:05 End Time: 18:31:14 Time On Btm:  
 Time Off Btm:

TEST COMMENT: IF-30-2 Inches  
 IS-30-NO return  
 FF-30-Surface blow  
 FS-45-No return



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

## Recovery

Length (ft)	Description	Volume (bbl)
50.00	mud	0.43

## Gas Rates

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



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

**TOOL DIAGRAM**

CG Oil ,Inc

**31-13-16w Ellis,KS**

2550 Aibase Rd

Victoria ,KS 67671

**Bob & Marie #3**

Job Ticket: 69985

**DST#: 1**

ATTN: Roger Fisher

Test Start: 2023.01.11 @ 11:50:00

## Tool Information

Drill Pipe:	Length: 3376.00 ft	Diameter: 3.79 inches	Volume: 47.11 bbl	Tool Weight:	2500.00 lb
Heavy Wt. Pipe:	Length: ft	Diameter: inches	Volume: - bbl	Weight set on Packer:	25000.00 lb
Drill Collar:	Length: 30.00 ft	Diameter: 2.25 inches	Volume: 0.15 bbl	Weight to Pull Loose:	60000.00 lb
			<u>Total Volume:</u> - bbl	Tool Chased	ft
Drill Pipe Above KB:	31.00 ft			String Weight: Initial	48000.00 lb
Depth to Top Packer:	3406.00 ft			Final	48000.00 lb
Depth to Bottom Packer:	ft				
Interval between Packers:	79.00 ft				
Tool Length:	110.00 ft				
Number of Packers:	2	Diameter: 6.88 inches			

Tool Comments:

## Tool Description

**Length (ft) Serial No. Position Depth (ft) Accum. Lengths**

Change Over Sub	1.00			3376.00	
Shut In Tool	5.00			3381.00	
Hydraulic tool	5.00			3386.00	
Jars	5.00			3391.00	
EM Tool	3.00			3394.00	
Safety Joint	3.00			3397.00	
Packer	5.00			3402.00	31.00 Bottom Of Top Packer
Packer	4.00			3406.00	
Stubb	1.00			3407.00	
Perforations	5.00			3412.00	
Recorder	0.00	8368	Inside	3412.00	
Recorder	0.00	8320	Outside	3412.00	
Change Over Sub	1.00			3413.00	
Drill Pipe	63.00			3476.00	
Change Over Sub	1.00			3477.00	
Perforations	5.00			3482.00	
Bullnose	3.00			3485.00	79.00 Bottom Packers & Anchor
<b>Total Tool Length:</b>	<b>110.00</b>				





**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

## FLUID SUMMARY

CG Oil ,Inc

**31-13-16w Ellis,KS**

2550 Aibase Rd      Victoria ,KS 67671

**Bob & Marie #3**

Job Ticket: 69985

**DST#: 1**

ATTN: Roger Fisher

Test Start: 2023.01.11 @ 11:50:00

### Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 50.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.19 in<sup>3</sup>

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4500.00 ppm

Filter Cake: 1.00 inches

### Recovery Information

Recovery Table

Length ft	Description	Volume bbl
50.00	mud	0.426

Total Length: 50.00 ft      Total Volume: 0.426 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

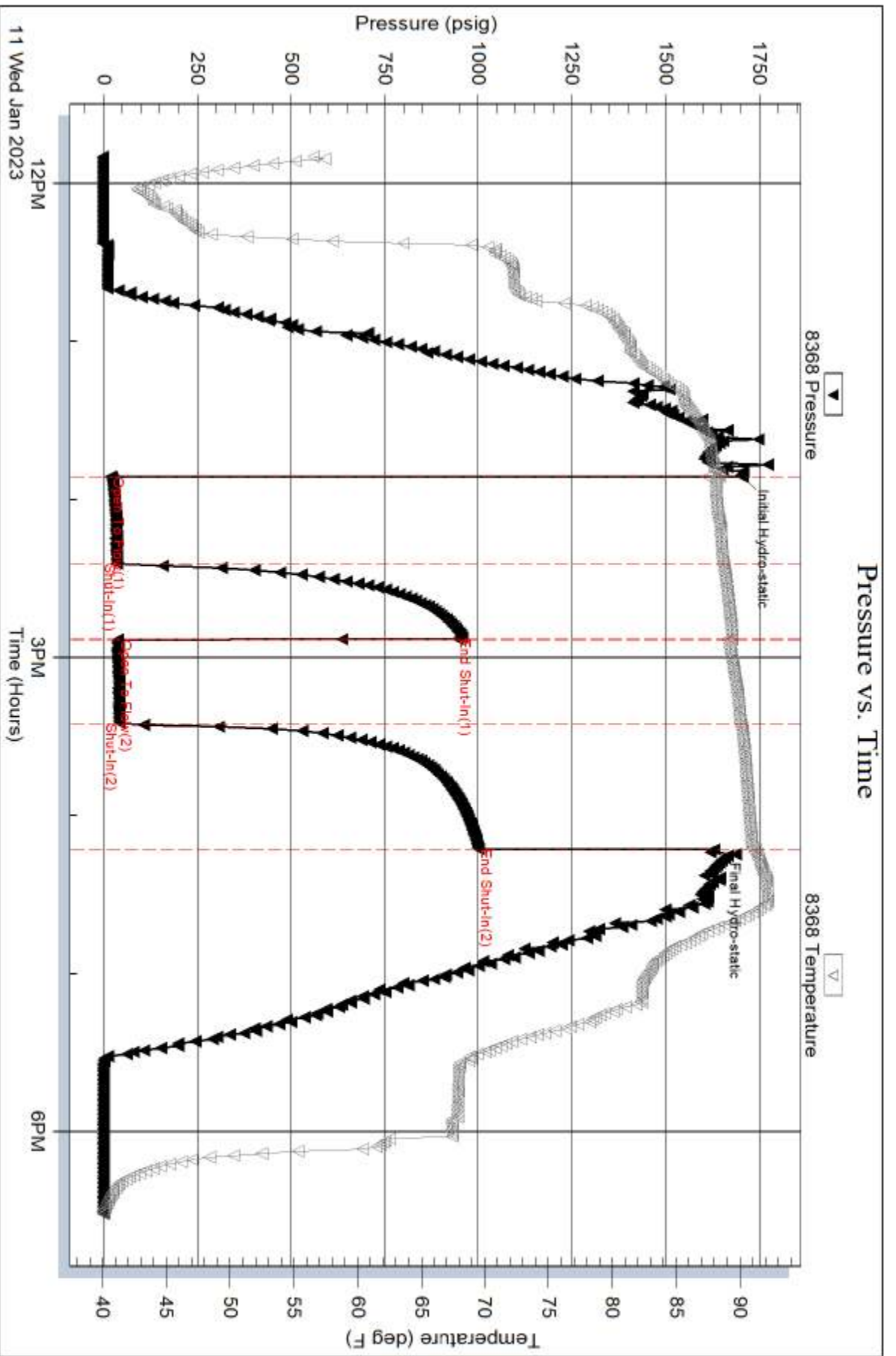
Serial #: 8368

Inside

CG Oil, Inc

Bob & Marie #3

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 69985

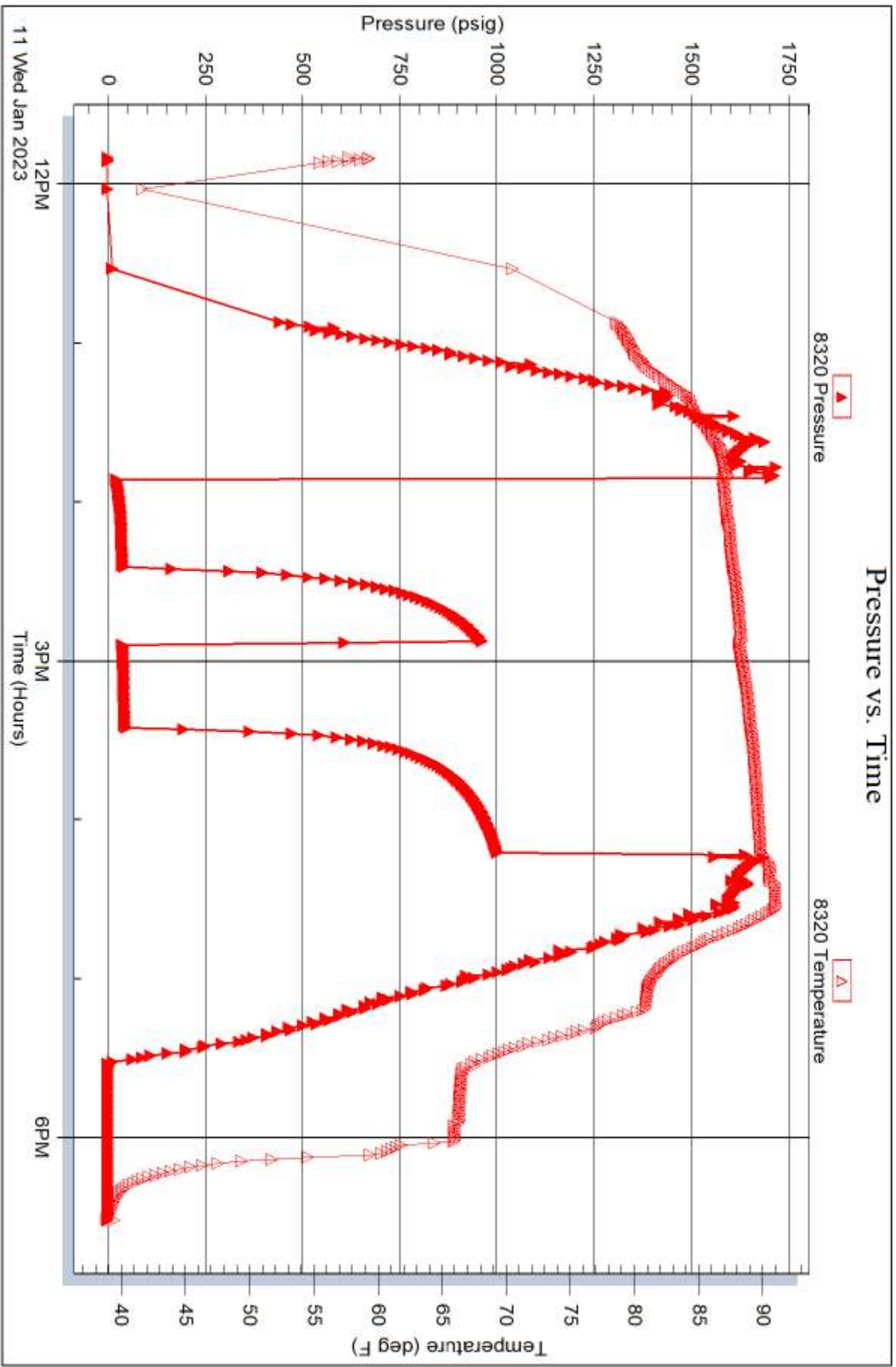
Printed: 2023.01.12 @ 15:55:03

Serial #: 8320

Outside CG Oil, Inc

Bob & Marie #3

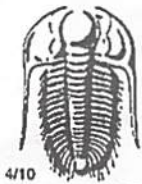
DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 69985

Printed: 2023.01.12 @ 15:55:04



# TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

## Test Ticket

NO. **69985**

Well Name & No. Bob & Marie #3 Test No. 1 Date \_\_\_\_\_  
 Company CG Oil, Inc. Elevation 1941 KB 1933 GL \_\_\_\_\_  
 Address 2550 Airbase Rd Victoria, KS 67671  
 Co. Rep / Geo. Roger Fisher Rig Discovery 2  
 Location: Sec. 31 Twp 13 Rge. 16 Co. Ellis State KS

Interval Tested 3404-3445 Zone Tested Arbockle  
 Anchor Length 79 Drill Pipe Run ~~3316~~ 3316 Mud Wt. 9  
 Top Packer Depth 3401 Drill Collars Run 30 Vis 50  
 Bottom Packer Depth 3404 Wt. Pipe Run \_\_\_\_\_ WL 9.2  
 Total Depth 3445 Chlorides 4500 ppm System LCM 1.5#

Blow Description IF-30-2 inches  
ISI-30-NO Return  
RF-30-Surface Blow  
FSI-45-NO Return

Rec	Feet of	%gas	%oil	%water	%mud
<u>50</u>	<u>Mud</u>			<u>100</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 50 BHT 91 Gravity \_\_\_\_\_ API RW \_\_\_\_\_ @ \_\_\_\_\_ °F Chlorides \_\_\_\_\_ ppm

(A) Initial Hydrostatic <u>1705</u>	<input checked="" type="checkbox"/> Test 1800	T-On Location <u>8:30</u>
(B) First Initial Flow <u>19</u>	<input type="checkbox"/> Jars _____	T-Started <u>11:50</u>
(C) First Final Flow <u>34</u>	<input checked="" type="checkbox"/> Safety Joint _____	T-Open <u>2:18 14:18</u>
(D) Initial Shut-In <u>945</u>	<input type="checkbox"/> Circ Sub _____	T-Pulled <u>4:30 16:30</u>
(E) Second Initial Flow <u>38</u>	<input type="checkbox"/> Hourly Standby _____	T-Out <u>6:35 18:35</u>
(F) Second Final Flow <u>42</u>	<input type="checkbox"/> Mileage <u>@ 11X 2</u> 38.50	Comments _____
(G) Final Shut-In <u>1001</u>	<input type="checkbox"/> Sampler _____	
(H) Final Hydrostatic <u>1629</u>	<input type="checkbox"/> Straddle _____	

Initial Open <u>30</u>	<input type="checkbox"/> Shale Packer _____	<input checked="" type="checkbox"/> EM Tool _____
Initial Shut-In <u>30</u>	<input type="checkbox"/> Extra Packer _____	<input type="checkbox"/> Ruined Shale Packer _____
Final Flow <u>30</u>	<input type="checkbox"/> Extra Recorder _____	<input type="checkbox"/> Ruined Packer _____
Final Shut-In <u>45</u>	<input type="checkbox"/> Day Standby _____	<input type="checkbox"/> Extra Copies _____
	<input type="checkbox"/> Accessibility _____	Sub Total <u>0</u>
	Sub Total <u>1838.50</u>	Total <u>1838.50</u>

Approved By \_\_\_\_\_ Our Representative Terrence Wickham

Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.



Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513

Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Susan K. Duffy, Chair  
Dwight D. Keen, Commissioner  
Andrew J. French, Commissioner

Laura Kelly, Governor

June 19, 2023

Ron Schmidtberger  
C G Oil, Inc.  
2550 AIRBASE RD  
PO BOX 207  
VICTORIA, KS 67671-0207

Re: ACO-1  
API 15-051-27070-00-00  
BOB AND MARIE 3  
NE/4 Sec.31-13S-16W  
Ellis County, Kansas

Dear Ron Schmidtberger:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 01/05/2023 and the ACO-1 was received on June 16, 2023 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department

# FRANKS Oilfield Service

♦ 815 Main Street Victoria, KS 67671 ♦ 24 Hour Phone (785) 639-7269  
 ♦ Office Phone (785) 639-3949 ♦ Email: franksoilfield@yahoo.com

TICKET NUMBER 0830

LOCATION Victoria

FOREMAN Rich

## FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-6-22		Bobo-Moic #3	31	13	14	Ellis

CITY	STATE	ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER

JOB TYPE Surf HOLE SIZE 12 1/4 HOLE DEPTH 1072 CASING SIZE & WEIGHT 8 3/4" 23"  
 CASING DEPTH 1072 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Drilling casing 1072 depth. Displacement 145 bbl. Displaced by 115 bbl of water.

Thanks for service

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
PLUMZ	1	PUMP CHARGE		
10001	15	MILEAGE		
10003	20.35			
25004	450 sacks	12 1/4" 23" casing cement		
40009	1	8 3/4" 23" casing cement		
50006	1	2 1/4" casing cement		
			SALES TAX	
			ESTIMATED	
			TOTAL	

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.