

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 Recompletion Date _____ 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)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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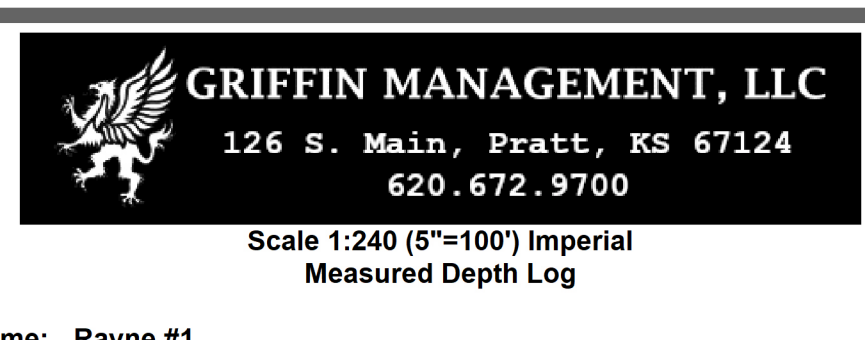
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	RAYNE 1
Doc ID	1587426

Tops

Name	Top	Datum
Heebner	3896	-1893
Brown Lime	4068	-2065
Lansing	4085	-2082
Stark	4388	-2385
B/KC	4471	-2468
Pawnee	4538	-2535
Cherokee	4574	-2571
Viola	4621	-2618
Simpson Shale	4756	-2753



Scale 1:240 (5"=100') Imperial Measured Depth Log

Well Name: Rayne #1
API: 15-151-22523
Location: SE SW SW
License Number: 33936
Spud Date: 8/07/2021
Surface Coordinates: 330' FSL & 990' FWL
Region: Pratt Co.
Drilling Completed: 8/14/2021

Bottom Hole Coordinates: 1998'
Ground Elevation (ft): 1998'
Logged Interval (ft): 3800'
Formation: Ordovician
Type of Drilling Fluid: Mud-Co. Ch

OPERATOR

Company: Griffin Management, LLC
Address: 126 S. Main, Pratt, KS 67124-0347

GEOLOGIST

Name: Eli J. Felts
Company: Griffin Management, LLC
Address: efelts@griffinmgt.com, 316.765.4070

Formation Tops

Table with columns: SAMPLE TOPS, LOG TOPS. Lists well names and depths for various geological units like Heebner, Brown Lime, Lansing, etc.

Drilling Report

Murfin Drilling, Rig #104
Tool Pusher: Scotty Piland
Cell # 620-639-1843
8/7/21 Spud @ 2:30 PM
8/8/21 Drilling @ 400'
8/9/21 Drilling @ 2120'
8/10/21 Drilling @ 3025'
8/11/21 Drilling @ 3840'
8/12/21 DST #1 - Lansing F Zone
8/13/21 Rig Repairs (Compressor & Turbo)
8/14/21 RTD @ 4 AM (4835' RTD)
8/15/21 Finish CTCH & TOOH

Problems

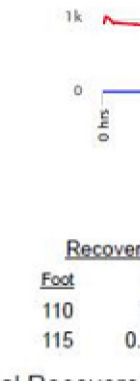
Generator going out sporadically throughout first few days. (Murfin sent replacement 8/11 & swapped. Picked up and circulated @ 4307' due to power loss from generator swap.)

Pipe Setting

8.625" 23# @ 261' w/ 350 sxs.
5.5" 15.5# @ 4825' w/ 150 sxs.

ROCK TYPES

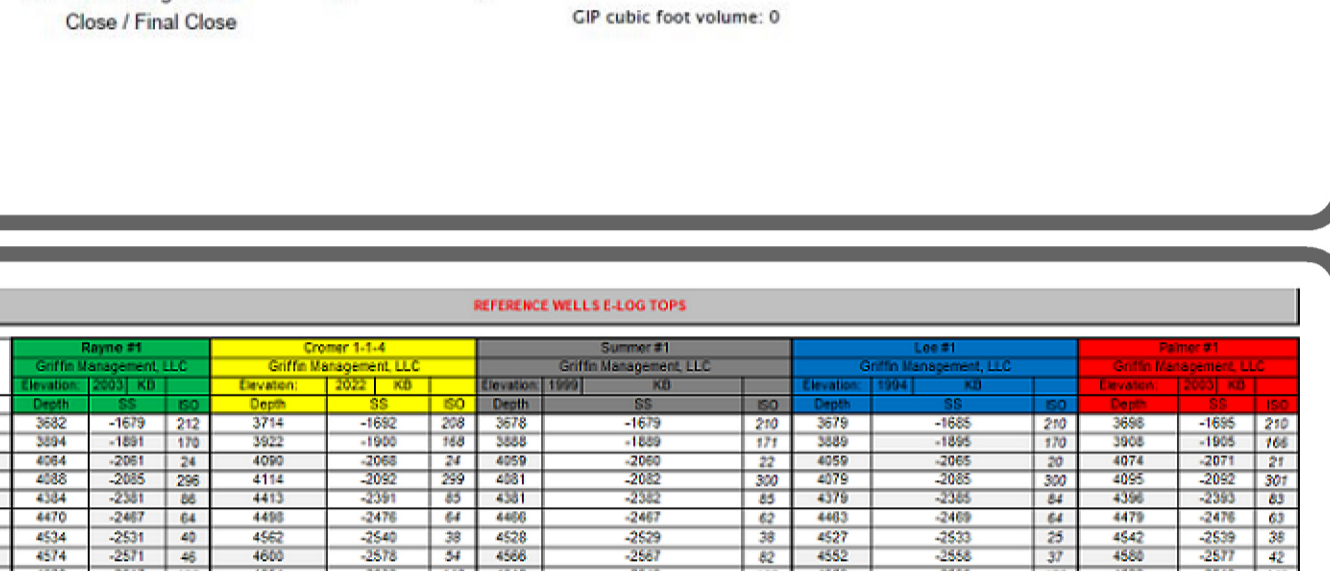
Legend for rock types: Anhy, Brec, Cht, Cyst, Coal, Congl, Dol-cream, Dol, Gyp, Igne, Granite 2, Granite, Lmst tan, Lmst, Meta, Quartz, Salt, Shale 2, Shale 1, Schol, Shgy, Siltst, Sll, Tss



Company: Charles N. Griffin
Lease: Rayne #1
SEC: 33 TWN, 29S R4G, 15W
County: PRATT
State: Kansas

DATE August 12 2021

DST #1 Formation: Lansing, Test Interval: 4267' - 4307' "F" zone
Time On: 05:15:08/12 Time Off: 14:08:08/12
Time On Bottom: 07:58:08/12 Time Off Bottom: 10:28:08/12



Recovered data table with columns: Foot, BBLs, HMCW (trace O), SLMCW, Gas %, Oil %, Water %, Mud %

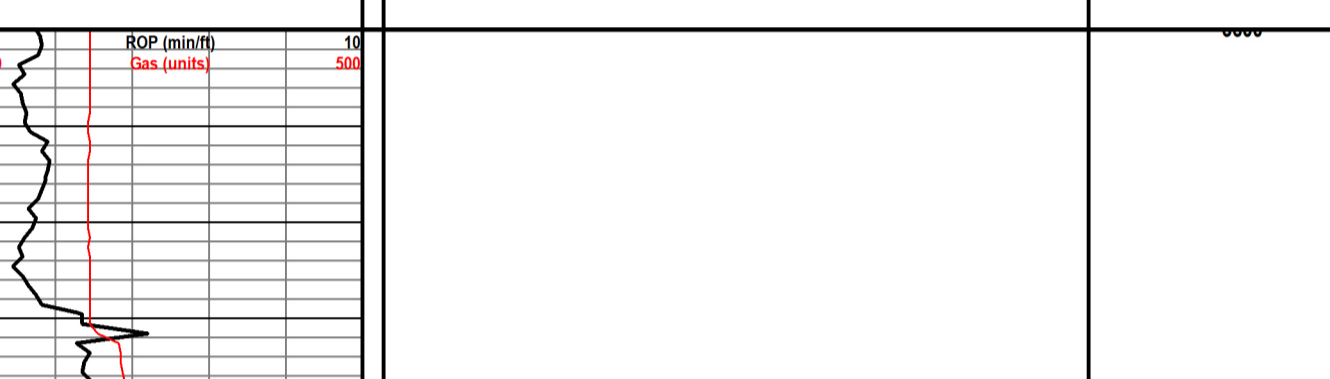


Table with columns: FORMATION, Well #1, Well #2, Well #3, Well #4, Well #5, Well #6, Well #7, Well #8, Well #9, Well #10

Main log section with columns: Lithology, Rate of Penetration (ROP), Geological Descriptions, DSTs/MudSurveys, etc. Includes detailed text descriptions of rock layers like Heebner Shale, Lansing, Brown Lime, etc.

Mud-Co. (#7) Depth: 4648' Wt: 9.7 Frac: 10.4 Cost: \$11,849 Bottoms Up - 45 Mins



Company: Charles N. Griffin
Lease: Rayne #1

SEC: 33 TWN: 29S RNG: 15W
 County: PRATT
 State: Kansas
 Drilling Contractor: Murfin Drilling
 Company, Inc - Rig 104
 Elevation: 1998 GL
 Field Name: Turkey Creek Camp
 Pool: Infield
 Job Number: 504
 API #: 15-151-22522-00-00

Operation:
 Uploading recovery &
 pressures

DATE
 August
12
 2021

DST #1 Formation: Lansing , Test Interval: 4267 - Total Depth: 4307'
"F" zone 4307'
 Time On: 05:15 08/12 Time Off: 14:08 08/12
 Time On Bottom: 07:58 08/12 Time Off Bottom: 10:28 08/12

Electronic Volume
 Estimate:
 241'

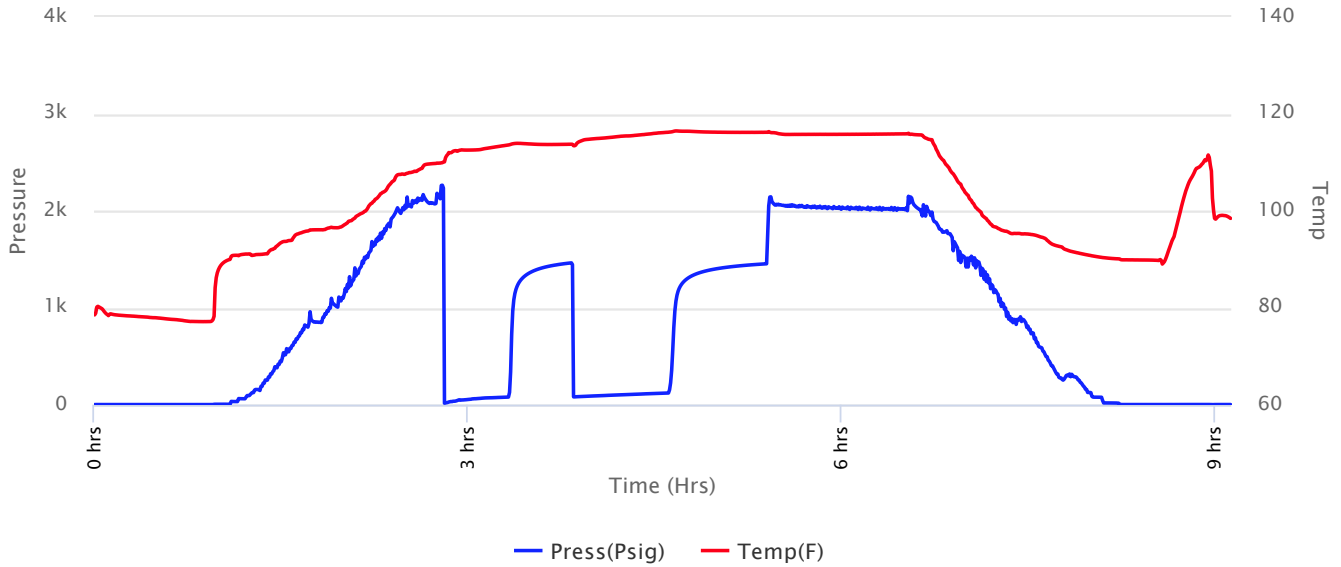
1st Open
 Minutes: 30
 Current Reading:
 7.9" at 30 min
 Max Reading: 7.9"

1st Close
 Minutes: 30
 Current Reading:
 0" at 30 min
 Max Reading: 0"

2nd Open
 Minutes: 45
 Current Reading:
 7.3" at 45 min
 Max Reading: 7.3"

2nd Close
 Minutes: 45
 Current Reading:
 0" at 45 min
 Max Reading: 0"

Inside Recorder





Company: Charles N. Griffin
Lease: Rayne #1

SEC: 33 TWN: 29S RNG: 15W
 County: PRATT
 State: Kansas
 Drilling Contractor: Murfin Drilling Company, Inc - Rig 104
 Elevation: 1998 GL
 Field Name: Turkey Creek Camp
 Pool: Infield
 Job Number: 504
 API #: 15-151-22522-00-00

Operation:
 Uploading recovery & pressures

DATE
 August
12
 2021

DST #1 Formation: Lansing , "F" zone Test Interval: 4267 - 4307' Total Depth: 4307'

Time On: 05:15 08/12 Time Off: 14:08 08/12
 Time On Bottom: 07:58 08/12 Time Off Bottom: 10:28 08/12

Recovered

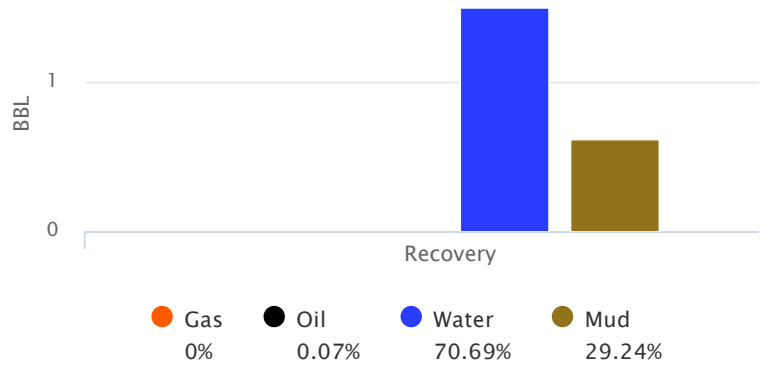
<u>Foot</u>	<u>BBLs</u>	<u>Description of Fluid</u>	<u>Gas %</u>	<u>Oil %</u>	<u>Water %</u>	<u>Mud %</u>
110	1.5653	HMCW (trace O)	0	.1	65.9	34
115	0.5628972	SLMCW	0	0	84	16

Total Recovered: 225 ft
 Total Barrels Recovered: 2.1281972

Reversed Out
NO

Initial Hydrostatic Pressure	2124	PSI
Initial Flow	15 to 79	PSI
Initial Closed in Pressure	1463	PSI
Final Flow Pressure	81 to 121	PSI
Final Closed in Pressure	1453	PSI
Final Hydrostatic Pressure	2094	PSI
Temperature	117	°F
Pressure Change Initial Close / Final Close	0.7	%

Recovery at a glance



GIP cubic foot volume: 0



Company: Charles N. Griffin
Lease: Rayne #1

SEC: 33 TWN: 29S RNG: 15W
County: PRATT
State: Kansas
Drilling Contractor: Murfin Drilling
Company, Inc - Rig 104
Elevation: 1998 GL
Field Name: Turkey Creek Camp
Pool: Infield
Job Number: 504
API #: 15-151-22522-00-00

Operation:
Uploading recovery &
pressures

DATE
August
12
2021

DST #1 **Formation: Lansing ,** **Test Interval: 4267 -** **Total Depth: 4307'**
 "F" zone **4307'**
Time On: 05:15 08/12 Time Off: 14:08 08/12
Time On Bottom: 07:58 08/12 Time Off Bottom: 10:28 08/12

BUCKET MEASUREMENT:

1st Open: Surface blow building to 7 1/2"

1st Close: No BB

2nd Open: Surface blow building to 7"

2nd Close: No BB

REMARKS:

Tool Sample: 0% Gas .5% Oil 89.5% Water 10% Mud

Ph: 6.5

Measured RW: .1 @ 91 degrees °F

RW at Formation Temp: 0.079 @ 117 °F

Chlorides: 61,000 ppm

QUALITY WELL SERVICE, INC.

7736

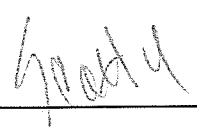
Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410
Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	8-7-21	Sec.	33	Twp.	29S	Range	15W	County	PRATT	State	KI	On Location	Finish
Lease	RAYNE		Well No.		*1		Location						
Contractor	MURFIN D&S, RIG # 104						Owner						
Type Job	SURFACE						To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Hole Size	12 1/4		T.D.		263'		Charge To						
Csg.	8 5/8 23"		Depth		261'		Griffin						
Tbg. Size			Depth				Street						
Tool			Depth				City		State				
Cement Left in Csg.			Shoe Joint		20'		The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line			Displace		15.4		Cement Amount Ordered 300 5/8 Common						
EQUIPMENT							2 1/2" CEL 3 1/2" CL 1/2" PS USCO 275 5/8						
Pumptrk	8	No.					Common 275 5/8						
Bulktrk	12	No.					Poz. Mix						
Bulktrk		No.					Gel. 517 #						
Pickup		No.					Calcium 776 #						
JOB SERVICES & REMARKS							Hulls						
Rat Hole							Salt						
Mouse Hole							Flowseal 139 #						
Centralizers							Kol-Seal						
Baskets							Mud CLR 48						
D/V or Port Collar							CFL-117 or CD110 CAF 38						
Run 6 BH's 8 5/8 23" CSG SET D 261'							Sand						
START CSG CSG ON Bottom Hook up to							Handling 296						
CSG & BREAK CIRCL W/ RIG							Mileage 251 7400						
START Pumping 10 BH's H2O							FLOAT EQUIPMENT						
START N 1/2" Pump 275 5/8 Common							Guide Shoe						
2 1/2" CEL 3 1/2" CL 1/2" PS D 14.8"/cwt							Centralizer						
START DISO							Baskets						
Pls h down 15.4 BHM							AFU Inserts						
Close VALVE ON CSG							Float Shoe						
CIRCL CNT TO PT							Latch Down						
							SERVICE Spv 1 EA						
							LMV 25						
THANK YOU							Pumptrk Charge SURFACE						
PLEASE CALL AGAIN							Mileage 50						
TODD MIKE HUDSON													
<input checked="" type="checkbox"/> Signature													
							Tax						
							Discount						
							Total Charge						



785-953-0222

TICKET NUMBER 325 K-C
 LOCATION Hogaton Ks
 FOREMAN Walt Dinkel

FIELD TICKET & TREATMENT REPORT
 CEMENT

Ks

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-14-21		Rayne #1	33	29 S	15 W	Pott
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Charles N. GRIFFIN			803-820	JASON A.		
MAILING ADDRESS			801-851	CORY D.		
P.O. Box 347						
CITY	STATE	ZIP CODE				
Pott	Ks	67124				

JOB TYPE Production HOLE SIZE 7 7/8 HOLE DEPTH 4835' CASING SIZE & WEIGHT 5 1/2 15.5
 CASING DEPTH 4829' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.2 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 31' Slime
 DISPLACEMENT 114.2 DISPLACEMENT PSI 800 MIX PSI _____ RATE 6 BPM @ 800'

REMARKS: Safety meeting, Rig up on Martin 104 circ casing on bottom
Mix 30 SKs in All.
Pump 5 BBL H₂O, 500 gal mud Flush, then mixed 150 SKs HP-OWC Cement
Clear Pump + Lines, Displace 114.5 BBL H₂O @ 800 #, Landed Plug @ 1500 #
release Pressure, Float Held.

*Thank You
 Walt + Crew*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
	1	PUMP CHARGE	2800.00	2800.00
	60	MILEAGE	7.15	429.00
	8.46	Ten Mileage Delivery	17.5	883.30
	180 SKs	HP-OWC	25.00	4500.00
	910 #	Kalson	1.50	450.00
	300 gal	mud Flush	1.65	325.00
	1	5 1/2 AFW Float Shoe	585.00	585.00
	1	5 1/2 Latchdown Plug Assy	400.00	400.00
	7	5 1/2 - Centralizers	81	567.00
				10,939.30
		Less 25% Disc		2,734.83
				8,204.47
		SALES TAX		
		ESTIMATED TOTAL		

AUTHORIZATION [Signature] TITLE VP DATE 9/14/21

I acknowledge that the payments 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.