

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
--	---

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
---	--	------------------------------------

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:	
----------------	-------	---------	------------	--



WoCo Drilling, LLC

Drillers Log

Spoon #2

Sec 32 T28 R15E

1485 FS / 165 FW Wilson Co. Tex

TD: 1093

Surface Info	1001-06 Slt: br w/ ss: br-tan, m, micaceous Frbl g d $\phi$ . sub-rnk
Set 40' 7"	Fair odor, gl
w/ 10 sx on	1006-12 SS: AA br some tan stn
4/18/2023	1012-17 SS: Brn, m, Frbl, sltly micaceous, great porosity, oil bleed
Cement Circ to top	on ditch no floor, NFO, Good odor
	1017-22 SS: AA oil bleed on ditch still no floor on FO

1025 just blot

1022-25 SS: Brn-Tan, m, sub angular, Frb great  $\phi$ , gl odor  
 NFO, no gas bubble, fr floor, oil bleed  
 1025-28: AA

~~1028-30~~

1028-31 AA poor floor

1031-36 SS: AA w/ SA: br

1036-40 Sandy br Slt: SS: AA

1040-44 SS: Brn, m, angular, sltly, micaceous, sub-Dense,  
 Good  $\phi$ , NFO, no bleed, dull floor, gl odor

1044-48 AA poor floor

~~1044-48~~ 1048-52 SS: AA w/ ss: Blk, F-M, Frbl & angular  
 sub-Frbl, Show of tan, black oil, Good Odor, blk pcs have  
 good bright floor

1052-58 SS: Blk, F-M, sub-Rnk, Frbl, Good odor, Fair bleed,  
 Fair Blk oil stn, pr floor, gas bubbles

str → 1058-61 SS AA w/ secte bright ylw floor, ~~pr~~ great odor  
 bright ylw floor gas bubbles, NFO

1061-65 AA w/ secte for floor

1065-68: SH: Grg  
1080-73 SH: Drkr Grg  
1078-77 SH Lt Grg  
1077-85 AA  
1073 TD iMIL

Completed 4-16-23

Front A Bent Section

Woco Drilling LLC.

1485 FSL  
105 FWL

APC 15205-28534

Surface Date: 4-14-23  
Surface Length: 51  
Hole Diameter: 5-836  
Producer: Steven A. Lewis O.I.

Transmission 5-571X  
Spice

Lease: Sporn

32 285 15E  
Wilson

Well # 1

Formation	Depth	Description	Formation	Depth	Description
Soil	0-4		Lime	771	839
Lime	4-19		Shale	<del>771-839</del> 826	
Shale	19-80		Lime	876-877	
Lime	16-130		Shale	877-883	
Shale	131-308		Shale	883-925	
BLE Lime	208-273		Lime	925-930	
Lime	273-283		Lime	930-953	
Shale	283-304		Shale	953-995	
Lime	304-382		Sand	995-1001	Diluted
Lime Bit	382-394		Sand	1001-1004	O.I. Shale
Lime	394-418		Sand	1004-1006	O.I. Shale
Back Lime Bit	418-424		Sand	1006-1012	O.I. Shale
Lime	424-428		Sand	1012-1017	Oil & Shale
Lime	428-438		Sand	1017-1022	Free Shale Oil
Lime	438-443		Sand	1022-1025	Free Oil
Lime	443-469		Sand	1025-1028	Free Oil
Lime	469-481		Sand	1028-1032	Oil
Lime	481-512		Sand	1032-1036	Oil
Shale	512-534		Sand	1036-1040	Oil
Lime	534-536		Sand	1040-1044	Oil
Shale	536-544		Sand	1044-1048	Oil
Lime	544-548		Sand + Gas	1048-1052	Free Shale Oil
Shale	548-563		Shale	1052-1058	Free Oil
Lime	563-598		Shale	1058-1061	
Shale	598-605		Shale	1061-1068	
Shale	605-610		Lime	1068-1072	
Lime	610-617		Shale	1072-1077	
Shale	617-720		Lime	1077-1085	
Lime	720-741				
Shale	741-771				

770 1055