KOLAR Document ID: 1591494

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 #	API No.:
Name:	Spot Description:
Address 1:	
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.xxxxx) (e.gxxx.xxxxx)
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	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
•	If Alternate II completion, cement circulated from:
Operator:	•
Well Name:	feet depth to: sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	·
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec. Twp. S. R. East West
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:						

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Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	rpS	S. R	Eas	st West	County:					
	l, flowing an	d shut-in pres	sures, wh	ether shut-in pre	ssure reached	static	level, hydrostat	ic pressures, bo		val tested, time tool erature, fluid recovery,
Final Radioactivi files must be sub							gs must be emai	led to kcc-well-l	ogs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests (Attach Addit		1		Yes No		Lo		n (Top), Depth a		Sample
Samples Sent to	Geological	Survey		Yes No		Name			Тор	Datum
Cores Taken Electric Log Run Geologist Report List All E. Logs F	t / Mud Log	s		Yes No Yes No Yes No						
			Rej	CASING	RECORD [Nev		on, etc.		
Purpose of St	tring	Size Hole Drilled		Size Casing let (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	CEMENTING /	SQUE	EEZE RECORD		'	
Purpose: Perforate		Depth Top Bottom	Тур	pe of Cement	Cement # Sacks Used Type and Percent Additives					
Protect Ca										
Plug Off Z										
Did you perform Does the volume Was the hydraul	e of the total	base fluid of the	hydraulic	fracturing treatment		-	Yes S? Yes Yes	No (If No, s	kip questions 2 ar kip question 3) Il out Page Three	
Date of first Produ Injection:	ction/Injectio	n or Resumed Pi	roduction/	Producing Meth	od:		Gas Lift O	ther <i>(Explain)</i>		
Estimated Product Per 24 Hours		Oil	Bbls.		Mcf	Water			Gas-Oil Ratio	Gravity
DISPO	OSITION OF	GAS:		N	METHOD OF CO	MPLET	ΓΙΟΝ:			ON INTERVAL:
Vented		Used on Lease		Open Hole		Dually (Submit A		nmingled	Тор	Bottom
,	ed, Submit AC							·		
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)	
TUBING RECORI	D: S	size:	Set A	: -	Packer At:					

Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	BREANNA #1
Doc ID	1591494

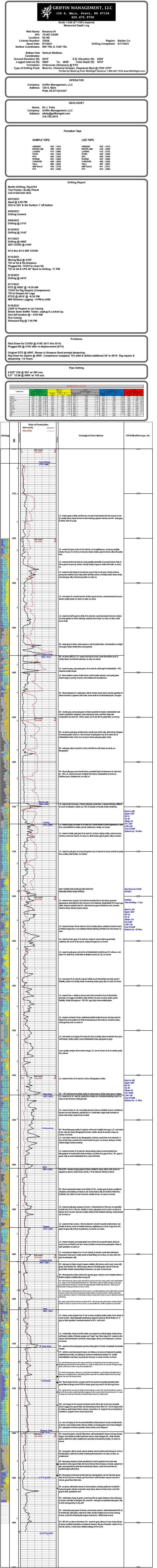
Tops

Name	Тор	Datum
Heebner	3932	-1912
Brown Lime	4100	-2080
Lansing	4122	-2102
Stark	4420	-2400
B/KC	4504	-2484
Pawnee	4570	-2550
Cherokee	4608	-2588
Viola	4687	-2667
Simpson Shale	4811	-2791

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Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Type and Percent Additives
Surface	12.25	8.625	23	262	Common	2% Gel, 3% CC
Production	7.875	5.5	17	4906	Pro C	10% salt 2% gel, 5# Koseal



QUALITY WELL SERVICE, INC. Federal Tax I.D. # 481187368

7763

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

	T- 1 -	г .	1		F				
Sec.	Twp. Range	County	State	On Location	Finish				
Date 9-7-21 5-	305 15W	BARBER		1 11-111 55	1 = 1. /2=/				
$\mathcal{O}_{\mathcal{O}}(\mathcal{O}_{\mathcal{O}})$	Nell No. 1 6 R. G 4 104	Location (20			1 E to/30				
Contractor MURAN DIN) K(1) 104	Owner S To Quality W	to 2nd Cott	HE WALL W:	SMO				
Type Job 400+413	TD 12/21	——— You are here	eby requested to ren	t cementing equipment vner or contractor to d	it and furnish				
Hole Size 12/4	T.D. 263' Depth 262'	Charge	C = CC	viiei oi contractor to d	O WOIK as listed.				
Csg. 95/8 Z31	- 	To To	70,4+,N						
Tbg. Size	Depth	Street							
Tool	Depth Shoe Joint 25	City		State					
Cement Left in Csg.	 			and supervision of owner	agent or contractor.				
Meas Line EQUIP	Displace /5.2	<u> </u>	ount Ordered 37	1					
	MENI	21/62	31. CC 1/2 '	PJ USEO Z	80 S				
Pumptrk D		Common	<u> </u>		1				
Bulktrk / Z		Poz. Mix	=2 / H						
Bulktrk		_ l	526 # 720 #						
Pickup		Calcium	790'						
JOB SERVICES	6 & REMARKS	Hulls			-				
Rat Hole		Salt	1/1/2 竹		-				
Mouse Hole		Flowseal	140 **						
Centralizers		Kol-Seal							
Baskets		Mud CLR 48							
D/V or Port Collar		CFL-117 or	CFL-117 or CD110 CAF 38						
Kn 65/ 35/6 2	3 PCS6 SET D	Sand	Sand						
START CSG CSG ON	Botton	Handling							
	BEEN COCUDIO	Mileage 25	Mileage 25 / 752 S						
STATT PUMPING H	<u>2</u> 5		FLOAT EQUIPMENT						
STAU MK YOMD Z	BOSK Comon	Guide Shoe	Guide Shoe						
21. CEL 31. CL 12"PI	d 14. BY/CAL	Centralizer	Centralizer						
STALL DISP		Baskets	Baskets						
PUG DUS 15.5	2 361s total	AFU Inserts	AFU Inserts						
Close Value on BS	6 150 th	Float Shoe	Float Shoe						
Good Cice that J	73	Latch Down	Latch Down						
CIRC CMT TO PI	T	63016	S.DV 1	Ea					
		LMV	25'						
THANK YOU		Pumptrk Ch	Pumptrk Charge Suitaus						
PLEASE CALL DO	Air	Mileage 5	Mileage 52						
Ton Mike	KichAzd			Tax					
	1			Discount					
Signature	1.1		·	Total Charge					
					Taylor Printing, Inc.				

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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

				y's cen 620-727-			
Sec.	Twp. Range	County	State	On Location	Finish		
Date 9-18-21 5	30S 15W	BARDEZ	Kı				
A A	Vell No.	Location Cooff	Ki Sto 110	h 1 E to 1304			
Contractor Murfin De	G EG #104	Owner S		Earned Wisia	M)		
Type Job 5/2 LS		You are her	Vell Service, Inc. eby requested to rent	cementing equipmen	t and furnish		
Hole Size 7 7/8	T.D. 45,0	cementer a	nd helper to assist ow	mer or contractor to de	work as lister		
Csg. 5/2 15.5	Depth 400B	Charge G	ir tha		·		
Tbg. Size	Depth	Street					
Tool	Depth	City		State			
Cement Left in Csg.	Shoe Joint 20 50	The above w	as done to satisfaction a	nd supervision of owner	agent or contrac		
Meas Line	Displace 116.34.	Cement Am	ount Ordered 1753	POC 21.62	4		
EQUIPA	MENT	101.5914	5/ Kolseal 6	1. CIGA . 25% CAIR	.251/sx PS		
Pumptrk & No.		Cassmon	<u>175 %</u>				
Bulktrk 15 No.		Poz. Mix					
Bulktrk No.		Gel. 32	94				
Pickup No.		Calcium					
JOB SERVICES	& REMARKS	Hulls					
Rat Hole 30 55			4#				
Mouse Hole	· · · · · · · · · · · · · · · · · · ·		44"				
Centralizers 1-2-3-4-5-6	~7	Kol-Seal	373 ⁴				
Baskets		Mud CLR 48	3 500 GL				
D/V or Port Collar		CFL-117 or	GB440-CAF 38- CI	LA 99"			
Kully # 5/2 155 °CS	6 SET 2 4909	Sand CC-	19 Gal C41	P41#			
SMOT USG CSG ON BOOK		Handling	217				
	The wolfer	Mileage 2	5/5425				
Doe Bill & Ga Wirig	·		りと FLOAT EQUIPM	ENT			
STAR ROMANIE 10 Bbs. HZ 121	SHIMF DBSIS HZO	Guide Shee	HIM IE	A			
P106 2-14018 309		Centralizer	Centralizer 7 EM				
MX Pump 195 & Pro (Baskets	Baskets				
SHUT DOWN WAShyptek 41	PELENE STULD P	Nh AFU Inserts					
STAT DISP W121/KCL		Float Shoe	Float Shoe / EA				
LIST PS 650 100 BH	Latch Down	Latch Down EA					
5/26 17 carch 4/2	SEWICE	SOV I ED					
Psi up () (1602 #		Liwi 2	5				
KELEASE HELD 12 !	36 Back	Pumptrk Cha	arge <u>i</u> S				
6000 Cic + 420 -10	3	Mileage 5	0				
TAMLYUN				Tax			
PEDE CALL AGAIN	TOOD BEAPI			Discount			
Signature - 10				Total Charge			