

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)</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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CEMENT TREATMENT REPORT

Customer:	MJT Enterprises	Well:	Beets WW7-I	Ticket:	EP10204
City, State:	Osawatomie, KS	County:	MI, KS	Date:	8/25/2023
Field Rep:	Mike Taylor	S-T-R:	31-16-22	Service:	Longstring

Downhole Information		Calculated Slurry - Lead		Calculated Slurry - Tail	
Hole Size:	5 5/8 in	Blend:	Thixo 1# PS	Blend:	
Hole Depth:	720 ft	Weight:	13.70 ppg	Weight:	ppg
Casing Size:	2 7/8 in	Water / Sx:	8.90 gal / sk	Water / Sx:	gal / sk
Casing Depth:	710.45 ft	Yield:	1.83 ft ³ / sk	Yield:	ft ³ / sk
Tubing / Liner:	in	Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.
Depth:	ft	Depth:	ft	Depth:	ft
Tool / Packer:		Annular Volume:	0.0 bbls	Annular Volume:	0 bbls
Tool Depth:	ft	Excess:		Excess:	
Displacement:	4.11 bbls	Total Slurry:	22.16 bbls	Total Slurry:	0.0 bbls
		Total Sacks:	68 sks	Total Sacks:	0 sks

TIME	RATE	PSI	STAGE BBLs	TOTAL BBLs	REMARKS
1:00 PM			-	-	on location, held safety meeting
			-	-	
			-	-	waited for rig to run casing and move off location
			-	-	
2:00 PM			-	-	rigged up
	4.0		-	-	established circulation
	4.0		-	-	mixed and pumped 200# Bentonite Gel followed by 4 bbls fresh water
	4.0		-	-	mixed and pumped 68 sks Thixo cement w/ 1# Phenoseal per sk, cement to surface
	4.0		-	-	flushed pump clean
	1.0		-	-	pumped 2 7/8" rubber plug to casing TD w/ 4.11 bbls fresh water
	1.0		-	-	pressured to 900 PSI, well held pressure for 30 min MIT
			-	-	released pressure to set float valve
	4.0		-	-	washed up equipment
			-	-	
3:00 PM			-	-	left location
			-	-	
			-	-	
			-	-	
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			-	-	
			-	-	
			-	-	

CREW		UNIT	SUMMARY		
Cementer:	Casey Kennedy	931	Average Rate	Average Pressure	Total Fluid
Pump Operator:	Devin Katzer	238	3.1 bpm	- psi	- bbls
Bulk:	Drew Beckwith	246			
H2O:	Keith Detwiler	124			



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 Paola, KS 66071
 P:913-557-9083
 F:913-557-9084

info@evansenergydevelopment.com
 www.evansenergydevelopment.com

WELL LOG

M.J.T. Enterprises

Beets #WW7-I

API #15-121-31782-00-00

July 05, 2023- August 25, 2023

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
6	soil & clay	6
5	lime	11
6	shale	17 black
9	lime	26
3	shale	29
1	lime	30
11	shale	41
13	lime	54
6	shale	60 red 59-60
1	lime	61
8	shale	69 red 61-62
7	sandstone	76 2 gpm, 50% shale 73-76
6	shale	82
13	lime	95 brown 82-84
16	shale	111
5	sandstone	116
11	shale/sandstone	127 70/30
65	shale	192
8	lime	200
1	shale	201
7	lime	208
1	shale	209
2	lime	211
30	shale	241
1	lime	242
3	shale	245
7	lime	252
21	shale	273
13	lime	286
2	shale	288
1	lime	289
15	shale	304
2	lime	306
4	lime/shale	310 70/30
4	lime	314
1	shale	315
15	lime	330
6	shale	336

25	lime	361
3	shale	364
3	lime	367
3	lime/shale	370 50/50
3	shale	373
3	lime	376 BKC
24	shale	400
8	sandstone	408 odor/gas
7	sandy shale	415 30% sand
69	shale	484
3	shale/lime	487 15% lime
4	sandstone	491 no oil bleed
56	shale	547
6	lime	553
6	shale	559
4	brown lime	563 hard
16	shale	579
2	coal	581
4	shale	585
3	brown lime	588 hard
5	white lime	593
4	oil sand	597 heavy bleed
3	shale/sand	600 60/40
9	shale	609
3	brown lime	612 hard
9	shale	621
4	shale/lime	625 70/30
6	shale	631
1	lime	632
10	shale	642
7	shale/lime	649 70/30
21	shale	670
2.75	oil sand	672.75
0.5	shale	673.25
0.25	oil sand	673.5
0.5	sand/shale	674 50/50 laminated swirl
0.25	oil sand	674.25 light bleed with gas
1.25	shale	675.5
2	brown sand/shale	677.5 50/50
2.5	broken sand	680 30/70 shale
40	shale	720

Set 22.65' of 7" surface with 9 7/8" bit, 6 sacks of cement.

Drilled TD 720' with 5 5/8" bit. Set 710.5' of 2 7/8" 8 round, including 3 centralizers and 1 float shoe.

Core Times

	<u>Minutes</u>	<u>Seconds</u>
671	1	30
672		59
673		50
674		48
675		49
676		50
677		42
678	1	9
679		40
680		49
681	1	0
682		55
683		55
684		58
685	1	6
686		55
687		59
688		46
689		55
690		53