## KOLAR Document ID: 1768267

Confiden	tiality Re	quested:
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	<ul> <li>DESCRIPTION</li> </ul>	VOF WELL	& LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
OilWSWSWD GasDHEOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
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
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/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)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
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 TwpS. R East West
Recompletion Date Reached TD Recompletion Date of 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 III Approved by: Date:				

### KOLAR Document ID: 1768267

Operator Name:	Lease Name: Well #:
Sec TwpS. R East 🗌 West	County:

Page Two

**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 (Attach Additional Sh	acate)	Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample	
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum	
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	Yes ☐ No Yes ☐ No Yes ☐ No							
		Rep	CASING ort all strings set-c		] Ne	w Used rmediate, productio	on, etc.			
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Datum Type and Percent Additives 3) the ACO-1) Gravity INTERVAL: Bottom	
[			ADDITIONAL	CEMENTING /	SQU	EEZE RECORD				
Purpose:	Depth Top Bottom	Туре	e of Cement	# Sacks Use	d		Type and	Percent Additives		
Protect Casing Plug Back TD Plug Off Zone										
<ol> <li>Did you perform a hydra</li> <li>Does the volume of the</li> <li>Was the hydraulic fracture</li> </ol>	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three		
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er Bb	ls.	Gas-Oil Ratio	Gravity	
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	ON INTERVAL:	
Vented Sold (If vented, Subn	Used on Lease		Open Hole		-	·	mingled	юр		
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)		
TUBING RECORD:	Size:	Set At:		Packer At:						

Form	ACO1 - Well Completion
Operator	Horton, John
Well Name	MILLER 29
Doc ID	1768267

# Casing

	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	28	20	Portland	10	0
Production	5.625	2.875	6.5	755	OWC	75	Elite



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Custom	ere Ho	rton Oil	Com	any, LLC	Well:	Miller #29	Ticket:	EP11410
						MG, Ks	Date:	11/15/2023
			110, 113	Service:	Longstring			
Field Re	ib: Jo	nn Hort	on		S-T-R:			
Downho	le Info	rmation			Calculated Slu	rry - Lead	Calcu	lated Slurry - Tail
Hole Siz	ze:	5 7/8 in	12			Thick Set Cement	Blend:	
Hole Dep	th:	759 ft	25 8		Weight:	13.6 ppg	Weight:	PPg
Casing Siz	e:	2 7/8 in			Water / Sx:	9.0 gal / sx	Water / Sx:	gal / sx
asing Dept	th:	755 ft			Yield:	1.75 ft <sup>3</sup> / sx	Yield:	ft <sup>3</sup> / sx
ubing / Line	era	in			Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.
Dept		ft			Depth:	ft	Depth:	ft
ool / Packe					Annular Volume:	bbis	Annular Volume:	0 bbls
Tool Dept splacemen		ft			Excess:	22 E hhla	Excess: Total Slurry:	0.0 bbls
spracemen		4.6 bb		TOTAL	Total Slurry:	23.5 bbls 75 sx	Total Sacks:	0 sx
IME RAT	E		BLs		REMARKS			
	-		-		Safety Meeting:			
					TD 5 7/8" well bore = 759',	2 7/8" 10rd tubing set @ 755'		
			20	19. A.	Rig up to 2 7/8" tubing, Br	eak circulation w/ 2bbl fresh water		
					Pump ( 200# ) gel flush ah	ead of cement		
					Mixed 75sx Thick Set Cem	ent w/ 1# pheno seal/sx @ 13.6#/g	al, yield 1.75 = 23.5bbl slurry	
			1.		Shut down, wash out pum	p & lines		
				-	Stuff 2 plugs			
	-			•	Displace plugs to seat w/			
				•	and the second	00psi, Bump plugs to 1000psi		
	-				Shut in @ 700psi	urface, Annulus standing full of ce	ment	
					Job Complete, Rig down	unace, Annulus standing full of ce	ment	
					vou vompiete, rug uvun	and the second second second		
	2					NEW PARTY AND A STREET	ALLES THE PARTY AND A	
		100						
				Par States				
				and the second second				
	(	REW			UNIT		SUMMARY	
Cemente	North ST	Kevin M			1004	Average Rate	Average Pressure	Total Fluid
ump Operato	a financia	Broker W			1203	0.0 bpm	- psi	- bbis
			10.0					

ftv: 16-2022/08/12 mplv: 438-2023/11/14 Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513

Andrew J. French, Chairperson Dwight D. Keen, Commissioner Annie Kuether, Commissioner

March 29, 2024

John Horton Horton, John PO BOX 314 SEDAN, KS 67361-0314

Re: ACO-1 API 15-125-32547-00-00 MILLER 29 NW/4 Sec.33-33S-14E Montgomery County, Kansas

Dear John Horton:

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 11/13/2023 and the ACO-1 was received on March 28, 2024 (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** 



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

Laura Kelly, Governor