KOLAR Document ID: 1768266

Confident	tiality Re	equested:
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 HIST	ORY - DESC	RIPTION OF W	VELL & 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.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:
	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 #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East _ West
Spud Date or Date Reached TD Completion Date or 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 III Approved by: Date:

KOLAR Document ID: 1768266

Operator Nam	ie:			Lease Name:	Well #:
Sec	Twp	S. 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 Sheets)		Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample
			⁄es 🗌 No	1	Name	Э		Тор	Datum
Samples Sent to Geological Survey Cores Taken Electric Log Run Geologist Report / Mud Logs 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	Type and Percent Additives
[ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose:	Depth Top Bottom	Depth Type Top Bottom		# Sacks Use	d		Type and	e and Percent Additives	
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the Was the hydraulic fracture 	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.	ls. Gas Mcf		Water Bbls. Gas-Oil Ratio		Gravity		
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	DN INTERVAL: Bottom
Vented Sold (If vented, Subn	Used on Lease		Open Hole Perf.		Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)		•	юр	
Shots Per Perforation Perfo Foot Top Bot			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 28
Doc ID	1768266

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	28	20	Portland	10	0
Production	5.625	2.875	6.5	739	OWC	75	Elite



* * *

*

Gustomer Horton Oil Company LLC		Well:	Miller #28	Ticket:	EP11351			
			361 County:	MG, Ks	Date:	11/11/2023		
Field Rep: John Horton S-T-R:							Service:	Longstring
FIL	eiu kep.	501111	onton					
Dov	wnhole li	nformati	ion		Calculated Slu	rry - Lead	Calculat	ed Slurry - Tail
Ho	Hole Size: 5 7/8 in Blend: Thick Set Cement		Blend:					
Hole	Depth:	74	5 ft		Weight:	13.6 ppg	Weight:	ppg
Casi	ng Size:	2 7/8	8 in		Water / Sx:	9.0 gal / sx	Water / Sx:	gal / sx
Casing	Depth:	739	9 ft		Yield:	1.75 ft ³ / sx	Yield:	ft ³ / sx
Tubing	/ Liner: in Depth: ft Packer:			Annular Bbls / Ft.: Depth:	bbs / ft.	Annular Bbls / Ft.:	bbs / ft.	
					ft	Depth:	ft	
				Annular Volume:	bbis	Annular Volume:	0 bbls	
	Depth:		ft		Excess:		Excess:	0.0.444
Displace	ement:	1.1.1	bbls	and the second	Total Slurry:	23.5 bbls	Total Slurry:	0.0 bbls 0 sx
	DATE	DCI	STAGE	TOTAL		75 sx	Total Sacks:	U JA
TIME	RATE	PSI	BBLs	BBLs	REMARKS Safety Meeting:			
						2 7/8" 10rd tubing set @ 739'		
		a start of the start		and a second and	10 5 //6 Well Dore - /45,	2 110 Tord tubing set @ res		
					Rig up to 2 7/8" tubing Br	eak circulation w/ 2bbl fresh w		
					and the state of the	eak circulation w/ 2bbl fresh w		
					Pump (200#) gel flush ah	ead of cement	ater	
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem	ead of cement ent w/ 1# pheno seal/sx @ 13.0		
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem Shut down, wash out pum	ead of cement ent w/ 1# pheno seal/sx @ 13.0	ater	
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem Shut down, wash out pum Stuff 2 plugs	ead of cement ent w/ 1# pheno seal/sx @ 13.0 p & lines	ater	
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem Shut down, wash out pum Stuff 2 plugs Displace plugs to seat w/	ead of cement ent w/ 1# pheno seal/sx @ 13.0 p & lines 4.4bbl fresh water	ater	
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem Shut down, wash out pum Stuff 2 plugs Displace plugs to seat w/	ead of cement ent w/ 1# pheno seal/sx @ 13.0 p & lines	ater	
					Pump (200#) gel flush ah Mixed 75sx Thick Set Cem Shut down, wash out pum Stuff 2 plugs Displace plugs to seat w/ 4 Final pumping pressure 50 Shut in @ 700psi	ead of cement ent w/ 1# pheno seal/sx @ 13.0 p & lines 4.4bbl fresh water	6#/gal, yield 1.75 = 23.5bbl slurry	
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	100000						
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	CREW			UNIT		SUMMAR	1
Comentari			State She	1004	Average Rate	Average Pressure	Total Fluid
Cementer:		A. San Realization					- bbls
Pump Operator:	Alan M	1		1201	0.0 bpm	- psi	- DDIS
Bulk #1:	A CONTRACTOR OF THE OWNER			1214			
Bulk #2:		Cond.					

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 15-125-32545-00-00 MILLER 28 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 11/8/2023 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