

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](mailto: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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# QUALITY WELL SERVICE, INC.

7872

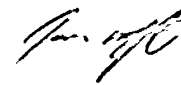
Federal Tax I.D. # 481187368

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

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1- -22	30	29S	15W	PRATT	Ks		
Lease	OLIVIA	Well No.	1	Location	C20FT K, .6 S W 1 S 11th		
Contractor	MURFIN DRILLING RIG # 124			Owner	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.		
Type Job	SURFACE			Charge To	GRIFFIN		
Hole Size	12 1/4	T.D.	252'	Depth	251'		
Csg.	85/B	Depth					
Tbg. Size	Depth		Street				
Tool	Depth		City State				
Cement Left in Csg.	Shoe Joint		25'	The above was done to satisfaction and supervision of owner agent or contractor.			
Meas Line	Displace		14.45	Cement Amount Ordered 400 sl Common			
<b>EQUIPMENT</b>				2% FEL 3% CL 1/2" PS USED 265 SC			
Pumptrk	9	No.		Common	265		
Bulktrk	12	No.		Poz. Mix			
Bulktrk		No.		Gel.	4GR		
Pickup		No.		Calcium	747"		
<b>JOB SERVICES &amp; REMARKS</b>				Hulls			
Rat Hole				Salt			
Mouse Hole				Flowseal 132'			
Centralizers				Kol-Seal			
Baskets				Mud CLR 48			
D/V or Port Collar				CFL-117 or CD110 CAF 38			
Run to H's 95/823" CSG SET				Sand			
START CSG ON BOTTOM				Handling 235			
HOOK UP TO CSG & BREAK CIRC. WITHIN				Mileage 25 / 7125			
START PUMPING H2O				<b>FLOAT EQUIPMENT</b>			
START MIX' PUMP 265 sl Common				Guide Shoe			
2% FEL 3% CL 1/2" PS @ 14.8"/CAL				Centralizer			
START DISO				Baskets			
PLUG DOWN				AFU Inserts			
CLOSE VALVE ON CSG				Float Shoe			
14.5 RATE AT 150"				Latch Down			
CIRCUIT THIS JOB				SERVICE STOP ? FEEL			
CIRCUIT TO PIT				LMD 25'			
				Pumptrk Charge SURFACE			
				Mileage 50			
THANK YOU							
PLEASE CALL AGAIN TOMORROW							
Signature: Richard Johnson							
				Tax			
				Discount			
				Total Charge			



# QUALITY WELL SERVICE, INC.

7873

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

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-27-22	30	29S	1SW	PRATT	Ks		
Lease <i>Olivia</i>	Well No. <i>1</i>		Location				
Contractor <i>Muefin Dalg Rig #104</i>	Owner						
Type Job <i>5/2 LS</i>	To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Hole Size <i>7 7/8</i>	T.D. <i>4898</i>						
Csg. <i>5/2</i>	Depth <i>4892.98</i>	Charge To <i>Griffin</i>					
Tbg. Size	Depth	Street					
Tool	Depth	City State					
Cement Left in Csg.	Shoe Joint <i>21.16</i>	The above was done to satisfaction and supervision of owner agent or contractor.					
Meas Line	Displace <i>115.95</i>	Cement Amount Ordered <i>175 x ProC 2 1/2 EL 10% SALT</i>					
EQUIPMENT		<i>5 1/2 Kolseal 6% C16A .25% CAIP 2 1/2 x 2</i>					
Pumptrk <i>8</i> No.		Common <i>175</i>					
Bulktrk <i>10</i> No.		Poz. Mix					
Bulktrk No.		Gel. <i>329 #</i>					
Pickup No.		Calcium					
JOB SERVICES & REMARKS		Hulls					
Rat Hole <i>3 3/4</i>	Salt <i>964 #</i>						
Mouse Hole	Flowseal <i>44 #</i>						
Centralizers <i>1-2-3-4-5-6-7</i>	Kol-Seal <i>375 #</i>						
Baskets	Mud CLR 48 <i>500 GAL</i>						
D/V or Port Collar	CFL-117 or CD-110-CAF-38 <i>C16A 99 #</i>						
<i>Run 4 1/2 5/2 # CSG SETD</i>	Sand <i>CC-19 GAL CAIP 41 #</i>						
<i>START CSG CSG ON Bottom # TAG</i>	Handling <i>217</i>						
<i>Hook up to CSG &amp; BREAK CIRC W/ RIG</i>	Mileage <i>25 / 5425</i>						
<i>DROP BALL # CIRC W/ RIG</i>	<i>5 1/2</i> FLOAT EQUIPMENT						
<i>START Pumping 12 3/4 H<sub>2</sub>O 12 3/4 LMT 12 3/4 H<sub>2</sub>O</i>	Guide:Shoe <i>4 1/2 M 1 EA</i>						
<i>Plug R-Hole 3 3/4</i>	Centralizer <i>7 EA</i>						
<i>Mix! Pump 145 x Pro C @ 14.8% GAL</i>	Baskets						
<i>SHUT DOWN wash &amp; tak &amp; RELEASE 5/2 LD</i>	AFU Inserts						
<i>START Disp w/ 2 1/2 KLL</i>	Float Shoe <i>1 EA</i>						
<i>LIFT PSI 100 gals wt 600'</i>	Latch Down <i>1 EA</i>						
<i>Land 016 115.9 out 1300'</i>	SERVICE SEWN <i>1 EA</i>						
<i>PSI up CSG 1700'</i>	LMV <i>25</i>						
<i>RELEASE H<sub>2</sub>O 3/4 gals Back</i>	Pumptrk Charge <i>LS</i>						
<i>6000' CIRC thru 203</i>	Mileage <i>50</i>						
<i>THANK YOU</i>							
<i>PLEASE CALL AGAIN TODD MUEK: NATHAN</i>							
X Signature <i>[Signature]</i>							
	Tax						
	Discount						
	Total Charge						





GRIFIN MANAGEMENT, LLC  
126 S. Main, Pratt, KS 67124  
620.672.9700

Scale 1:240 (5"=100') Imperial  
Measured Depth Log

Well Name: Olivia #1  
API: 15-151-22541  
Location: E2 SE SE NE  
License Number: 33936  
Spud Date: 1/21/2022  
Surface Coordinates: Longitude: -98.9944399  
Latitude: 37.4930589  
Bottom Hole Vertical Wellbore  
Coordinates: Ground Elevation (ft): 2035' K.B. Elevation (ft): 2040'  
Logged Interval (ft): 3900' To: 4900' Total Depth (ft): 4900'  
Formation: Ordovician (Simpson) @ RTD  
Type of Drilling Fluid: Mud-Co. Chemical Drispac - Displaced 2861'-2905' ~700 BBS  
Region: Pratt, KS  
Drilling Completed: 1/26/2022  
Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: Griffin Management, LLC  
Address: 126 S. Main  
Pratt, KS 67124

GEOLOGIST

Name: Eli J. Felts  
Company: Griffin Management, LLC  
Address: 126 S. Main  
Pratt, KS 67124  
efelts@griffinmgmt.com

Drilling Report

1/21/2022  
Spud @ 4:45 PM  
1/22/2022  
Drilling @ 310'  
1/23/2022  
Drilling @ 2360'  
1/24/2022  
Drilling @ 3260'  
1/25/2022  
Drilling @ 4375'  
1/26/2022  
Drilling @ 4815'  
RTD @ 9 AM  
Short Trip  
Start Logging @ 6:30 PM to 9:30 PM  
1/27/2022  
Run Casing  
Plug Down @ 12:30 PM  
Release Rig @ 4:30 PM

Problems

Short Trip @ 4900'. Pulled 67 Stands in 3.5 Hours  
No Cores or DSTs

Pipe Setting

8.625" 23# Set @ 252' w/ 265 sxs.  
5.5" 15.5# Set @ 4890' w/ 175 sxs.

ROCK TYPES

- |      |      |      |     |      |      |       |           |     |     |      |           |         |          |      |      |       |        |      |         |             |            |         |       |      |                  |        |    |      |
|------|------|------|-----|------|------|-------|-----------|-----|-----|------|-----------|---------|----------|------|------|-------|--------|------|---------|-------------|------------|---------|-------|------|------------------|--------|----|------|
| Anhy | Bent | Brec | Cht | Cylt | Coal | Congl | Dol-cream | Dol | Gyp | Igne | Granite 2 | Granite | Lmst tan | Lmst | Meta | Mrlst | Quartz | Salt | Shale 2 | Sh - maroon | Shale grey | Shale 1 | Shcol | Shgy | Siltstone - grey | Siltst | Ss | Till |
|------|------|------|-----|------|------|-------|-----------|-----|-----|------|-----------|---------|----------|------|------|-------|--------|------|---------|-------------|------------|---------|-------|------|------------------|--------|----|------|

