

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: Murfin Drilling	Well: Miller #1-29	Ticket: WP 2581
City, State: Oakley KS	County: Rooks KS	Date: 3/25/2022
Field Rep: John G	S-T-R: 29-63-19W	Service: 2 Stage

Downhole Information		Calculated Slurry - Lead		Calculated Slurry - Tail	
Hole Size:	7.875 in	Blend:	HLD	Blend:	H-Con
Hole Depth:	3712 ft	Weight:	14.8 ppg	Weight:	12 ppg
Casing Size:	5 1/2 in	Water / Sx:	6.5 gal / sx	Water / Sx:	13.5 gal / sx
Casing Depth:	3707 ft	Yield:	1.81 ft³ / sx	Yield:	2.56 ft³ / sx
Tubing / Liner:	in	Annular Bbls / Ft.:	0.0309 bbs / ft.	Annular Bbls / Ft.:	0.0309 bbs / ft.
Depth:	ft	Depth:	ft	Depth:	ft
Tool / Packer:		Annular Volume:	0.0 bbls	Annular Volume:	0 bbls
Tool Depth:	1742 ft	Excess:		Excess:	
Displacement:	87.7 bbls	Total Slurry:	47.0 bbls	Total Slurry:	136.7 bbls
		Total Sacks:	175 sx	Total Sacks:	300 sx

TIME	RATE	PSI	BBLs	TOTAL BBLs	REMARKS
2:58p					Arrived on location
3:06p					Safety meeting
3:18p					Rig up
7:06p					Casing on bottom and dropped ball
7:16p					Circulated mud
8:09p	3.0	270.0	6.0	6.0	Water ahead
8:10p	6.0	480.0	12.0	17.0	Mud flush
8:13p	5.4	440.0	10.0	27.0	Water behind
8:17p	5.8	600.0	47.0	74.0	Mixed cement @ 14.8 ppg
8:33p				74.0	Shut down wash up pump and load LD plug
8:43p	6.0	300.0	48.0	120.0	Begin water displacement
8:50p	6.0	600.0	41.0		Begin mud displacement
9:05p		1,100.0			Plug down with 600 psi lift pressure took to 1100 psi
9:08p					Released pressure/plug held
9:10p					Dropped bomb waited 15 minutes
9:26p	2.0	780.0	0.8		Opened tool @ 760 psi
9:30p					Circulated hole with rig pump
10:32p	4.0	200.0	6.0		Water ahead
10:36p	3.0	150.0	13.8		Mixed cement @ 12.0 ppg for cat hole
10:37p					Plug down
10:39p	3.0	15.0	6.8		Mixed cement @ 12.0 ppg for mouse hole
10:41p					Plug down
10:42p	6.3	400.0	116.2		Mixed cement @ 12.0 ppg
11:04p					Shut down wash up pump and load 2nd stage plug
11:12p	6.3	600.0	42.0		Begin displacement
11:21p		1,100.0			Plug down with 600 psi lift pressure took to 1100 psi
11:24 AM					Released pressure/plug held

CREW		UNIT	SUMMARY		
Cementor:	Josh	73	Average Rate	Average Pressure	Total Fluid
Pump Operator:	John	208	4.6 bpm	487 psi	348 bbls
Bulk #1:	Charlie	242			
Bulk #2:	Jose V	194-230			