KOLAR Document ID: 1779424

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
VVELL F	HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #		API No.:
Name:		Spot Description:
Address 1:		
Address 2:		Feet from North / 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:
	SWD	Elevation: Ground: Kelly Bushing:
	EOR	Total Vertical Depth: Plug Back Total Depth:
OG CM (Coal Bed Methane)	GSW	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 fo		If yes, show depth set: Feet
Operator:		If Alternate II completion, cement circulated from:
		feet depth to:w/sx cmt.
Well Name:		
Original Comp. Date: 0	5 T	
	Conv. to EOR Conv. to SWD	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Perm	nit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Perm	nit #:	Dewatering method used:
SWD Perm	nit #:	Location of fluid disposal if hauled offsite:
EOR Perm	nit #:	Operator Name:
GSW Perm	nit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or		Quarter Sec Twp S. R East West
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:		