KOLAR Document ID: 1783364

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 #	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: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (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:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) 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
•	If Alternate II completion, cement circulated from:
Operator:	•
Well Name:	feet depth to: 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)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
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. 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:							

KOLAR Document ID: 1783364

Page Two

Operator Name:	:						_ Lease	Name: _				W	/ell #:	
SecTw	vp	S. R.		East	t 🗌 W	/est	Count	ty:						
open and closed and flow rates if	d, flowing a gas to sur rity Log, Fir	and shu face tes nal Logs	t-in pressu st, along w s run to ob	ures, who vith final otain Geo	ether sh chart(s ophysic	hut-in pre). Attach cal Data a	ssure rea extra she and Final I	ached state eet if more Electric L	ic leve	, hydrosta e is needed	tic pressures d.	s, botton	n hole tempe	val tested, time tool erature, fluid recovery, v. Digital electronic log
Drill Stem Tests Taken Ye (Attach Additional Sheets)			Yes No					Log Formation (Top), De			Datum	Sample		
Samples Sent to Geological Survey				es [No		Nam	ne				Тор	Datum	
Cores Taken Electric Log Rur Geologist Repoi	rt / Mud Lo	gs			′es [′es [′es [No No No								
				Rep			RECORD			Used ate, producti	on. etc.			
Purpose of S	tring	Size Hole Siz			ize Casing et (In O.D.)		Weight Lbs. / Ft.		Setting Depth		Type of Cement		# Sacks Used	Type and Percent Additives
					4.0.0		OFNENT	-110 / 00		DE00DD				
Purpose:		De	epth	Typ				ks Used	JEEZE	RECORD	Typo	and Pare	cont Additivos	
Perforate		тур	Type of Cement			13 03eu	Type and Percent Additives							
Plug Off Z	Zone													
 Did you perforn Does the volum Was the hydrau 	ne of the tota	al base fl	luid of the h	ydraulic fr	acturing					Yes Yes Yes	☐ No (If N	lo, skip c	questions 2 an question 3) t Page Three (·
Date of first Produ	uction/Injecti	ion or Re	esumed Pro	duction/		ucing Meth	nod:	ing	Gas Li	ft 🗆 C	other (Explain)			
		Bbls.	Flowing Gas		Mcf	Water			Bbls.		s-Oil Ratio	Gravity		
Per 24 Hours	8													
DISPOSITION OF GAS: Vented Sold Used on Lease				METHOD OF Open Hole Perf.			Duall	COMPLETION: Dually Comp. Commingled (Submit ACO-5) Commingled			PRODUCTION INT		ON INTERVAL: Bottom	
(If vent	ted, Submit A	.CO-18.)						(, (848)				
Shots Per Foot	Perfora Top		Perfora Botto		Bridge Typ		Bridge P Set At			Acid,	Fracture, Sho		nting Squeeze Material Used)	Record
TUBING RECOR	RD:	Size:		Set At:			Packer At:							

Form	ACO1 - Well Completion
Operator	Kraft Oil Company LLC
Well Name	VANNOCKER-FEE 8
Doc ID	1783364

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.75	8.625	20	40	Portland	30	0
Production	6.75	4.5	11	1210	Portland	150	0