KOLAR Document ID: 1788547

Confidentiality Requested:

Yes No

## Kansas Corporation Commission Oil & Gas Conservation Division

## CONFIDENTIAL WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #		API No.:	
Name:		Spot Description:	
Address 1:		SecTwpS. REas	t  West
Address 2:		Feet from North / South Line of Section	
City: State: Zip:+		Feet from	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.x	xxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84	
Purchaser:		County:	
Designate Type of Completion:		Lease Name: Well #:	
New Well Re-Entry	Workover	Field Name:	
☐ Oil ☐ WSW ☐ SWD		Producing Formation:	
Gas DH EOR		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	al Total Depth:		
Deepening Re-perf. Conv. to	o EOR Conv. to SWD	Drilling Fluid Management Plan	
Plug Back Liner Conv. t	o GSW Conv. to Producer	(Data must be collected from the Reserve Pit)	
Committee Down the		Chloride content: ppm Fluid volume:	bbls
		Dewatering method used:	
		Location of fluid disposal if hauled offsite:	
		Location of hala disposar in hadioa choice.	
		Operator Name:	
		Lease Name: License #:	
Spud Date or Date Reached TD	Completion Date or	Quarter Sec TwpS. R Eas	t 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 Approved by: Date:		