KOLAR Document ID: 1658383

Сс	onfiden	tiality R	equested:
	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

		DECODIDEIO		
WELL	HISTORY	- DESCRIPTIO	N OF WELL	& LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / 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:
Oil WSW SWD 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 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)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
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 TwpS. R East _ West
Recompletion Date Reached TD Completion Date of 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:						

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Operator Nam	ne:			Lease Name:	Well #:
Sec	Twp	S. R	East West	County:	

Page Two

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		<u> </u>	/es 🗌 No	1		L	og Forn	nation (Top), De	pth and	d Datum	Sample	
(Attach Additional Sheets)			(N	lame)			Тор	Datum	
Samples Sent to Geological Survey Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:			∕es ∟ Νο ∕es □ Νο ∕es □ Νο ∕es □ Νο	1								
			Rep	CASI ort all strings	NG RECO		Nev		duction, etc.			
Purpose of String		ze Hole Drilled	Si	ze Casing et (In O.D.)		Weight _bs. / Ft.		Setting Depth	Type o Cemei		# Sacks Used	Type and Percent Additives
Purpose:		Depth	Turo	ADDITIO e of Cement		NTING / S		EEZE RECC		and Pa	ercent Additives	
Perforate	Тор	Bottom	тур	e of Cement	#0				туре	anu re	Acent Additives	
Protect Casing Plug Back TD Plug Off Zone												
 Did you perform a h Does the volume of Was the hydraulic fractional first Production 	the total base acturing treat	e fluid of the hy ment informat	ydraulic fi ion subm	acturing treat	emical disclo		stry?	Gas Lift	No (If	No, skip No, fill c	o questions 2 an o question 3) out Page Three o	
Estimated Production Per 24 Hours	1	Oil B	bls.	Gas	Mcf	,	Water Bbls. Gas-Oil Ratio Gravity				Gravity	
DISPOSIT	TION OF GAS	S:			METHO		F COMPLETION:				PRODUCTION INTERVAL: Top Bottom	
Vented So	old Use	ed on Lease		Open Hole	Perf.		Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)			100		
Shots Per Foot	Perforation Top	Perforat Bottor		Bridge Plug Type		e Plug t At		,	Acid, Fracture, Sho (Amount ar		enting Squeeze of Material Used)	Record
TUBING RECORD:	Size:		Set At:		Packer	At:						

Form	ACO1 - Well Completion
Operator	Colt Energy Inc
Well Name	SLAY 12
Doc ID	1658383

Casing

	Size Hole Drilled	Size Casing Set		Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11.25	8.625	24	40	Portland	14	None

					Colt En	ergy Driller's	Log					
Lease: Slay Well No. Well Locat			tion: 1335'	FNL & 2805'	FEL	Sec. 27	Twp. 26S Rr			ng. 14E		
API #: 15-2	207-29858		Type: Oil		County: W	/oodson		State: KS	Spud Da	ate: 7/15/2	2 Total D)epth: 1336'
Driller: De	vin Bernste	en	Surface Ca	asing		Bit Re	ecord			Cor	ing Record	
Crew: Dar	n Foust		Bit Size:	11.25"	Туре	Size	Start	End	Core #	Size	Star	End
			Casing Size:	8.625"	PDC	11.25"	0	40	1			
Start Rig H	rs: 21017		Casing Length:	40'	PDC	6.75"	40	1336	2			
End Rig Hr	s:		Cement used:	14 sx					3			
Total Rig H	lrs:		Cement Type:	Portland					4			
From	То		Formation		From	То		Formation			Pipe Tal	У
0	20	Overburg	len/clay							1	1	.9
20	223	Shale								2	2	0
223	475	Limeston	e							3	2	1
475	561	Shale	Shale							4	2	2
561	660	Limeston	e							5	2	.3
660	665	Coal								6	2	.4
665	770	Limeston	e							7	2	.5
770	850	Limeston	e							8	2	.6
850	975	Shale								9	2	.7
975	995	Limeston	e							10	2	.8
995	1025	Shale								11	2	.9
1025	1045	Limeston	е							12	3	0
1045	1275	Shale and	d coal							13	3	1
1275	1300	Sandston	e							14	3	2
1300	1336	Shale								15	3	3
										16	3	4
										17	3	5
										18	3	6
										Total: Did	not run cas	ing

Cement o	r Acid Field Report
Ticket No.	6619
Foreman	Russell macoy
-	

Camp	EVICE F	5

EUREKA, (620) 58		CEN	IENTING & ACID	SERVICE,	LLC			Evicka	mccoy
Date	Cust. ID #	Leas	e & Well Number		Section	Township	Range	County	State
7-29-22	1003	Slay	± 12		21	26	14	woodson	KS
Customer				Safety	Unit #		river	Unit #	Driver
Colt E	NERY	INC.		Meeting	///		NNON		
Mailing Address				Rm	112		neas		
P. O. B	ox 38B			SFAM	128	K V	ssell		
City		State	Zip Code	1					
TOLA		Ks	66749						
Job Type P.T.A. New well Hole Depth Slurry Vol. Tubing Casing Depth Hole Size 6344 Slurry Wt. Drill Pipe 4'' Casing Size & Wt. N.A. Cement Left in Casing Water Gal/SK Other									
				(3 7	O SUFALC			KS TOTA	[
GOD CE	ment T	o Surface	<u>.</u>	TH	ANK YO	U 1	1 4 04 3	AS 1014	

APT 15-207-29858-00-00

810 E 7TH PO Box 92 EUREKA, KS 67045

Bussell men

Cada	Ofre on Unite	Dependention of Department on Complete	II. I Dates	Triful
Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-101		Pump Charge		
c-107	25	Mileage		
C-203	122	sk's 60/40 Pozmix		
C-206	400*	Gel = 48 mixed w cement		
C-206	500#	Gel Spacer		
C-214	40#	cottonseed Hullis mixed wheel		
C-108A		Ton mileage		
			Sales Tax	
Authorization by wes Title corRep Total				

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.