KOLAR Document ID: 1659611

Confiden	tiality Re	quested:
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

Name:	Spot Description:				
Address 2:	Feet from North / South Line of Section Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner:				
City: Zip: + Contact Person:	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.xxxxx) (e.gxxx.xxxxx) Datum: NAD27 NAD83 WGS84				
Wellsite Geologist:					
Purchaser:	County:				
Designate Type of Completion:	Lease Name: Well #:				
New Well Re-Entry Workover	Field Name:				
	Producing Formation:				
	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)				
Commingled Desmit #:	Chloride content: ppm Fluid volume: bbls				
Commingled Permit #: 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:					

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Operator Name:	Lease Name: Well #:
Sec TwpS. 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 (Attach Additional Sheets)		Y	es 🗌 No			og Formatio	n (Top), Depth	and Datum	Sample	
			és 🗌 No	Ν	lame	e		Тор	Datum	
Samples Sent to Geological Survey Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:			ies No ies No ies No							
		Repo	CASING I] Ne	w Used rmediate, productio	on, etc.			
Purpose of String	Size Hole Drilled		ze Casing tt (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
			ADDITIONAL	CEMENTING /	SQU	EEZE RECORD				
Purpose: Perforate	Depth Top Bottom			# Sacks Used		Type and Percent Additives				
Protect Casing Plug Back TD Plug Off Zone										
 Did you perform a hydra Does the volume of the is Was the hydraulic fractu Date of first Production/Inj 	total base fluid of the h ring treatment informa	nydraulic fra tion submit	acturing treatment	al disclosure regis	-	Yes Yes Yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three		
Injection:			Flowing	Pumping		Gas Lift 🗌 O	ther <i>(Explain)</i>			
Estimated Production Oil Bbl Per 24 Hours		Bbls.	. Gas Mcf			Water Bbls. Gas-Oil Ratio Gravity				
DISPOSITION OF GAS:			METHOD OF (ON INTERVAL:	
Vented Sold Used on Lease (If vented, Submit ACO-18.)			Open Hole Perf.		Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)		Top Bottom			
Shots Per Perforation Perforation Foot Top Bottom			Bridge Plug Bridge Plug Type Set At		g Acid, Fracture, Shot, Cementin (Amount and Kind of Ma					
TUBING RECORD:	Size:	Set At:		Packer At:						

Form	ACO1 - Well Completion
Operator	Owens Oil Company, LLC
Well Name	JONES C 12
Doc ID	1659611

Casing

		Size Casing Set		Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11	7	20	43	Portland	10	na
Production	5.875	2.875	6.5	1030	Econobon d	125	na



CEMENT	TRE	ATMEN	IT REPO	ORT						
Customer: Owens Oil Company				pany	Well:		Jones C 12	Ticket:	EP4354	
City, State: Yates Center, KS			County:		CF, KS	Date:	4/14/2022			
Field Rep: Bryson Owens					S-T-R:		14-23-16	Service:	Longstring	
-										
					Calculated Si			Calc Blend:	ulated Slurry - Tail	
Hole Size: 57/8 in			Blend: Weight:	13.61	obond	Weight:	ppg			
Hole Depth: 1042 ft			Water / Sx:	gal / sx						
Casing Size: 2 7/8 in Casing Depth: 1030 ft			Yield:		12 gal / sx 56 ft ³ / sx	Water / Sx: Yield:	ft ³ / sx			
	Tubing / Liner: in Depth: ft Tool / Packer:		Annular Bbls / Ft.:	and the second			bbs / ft.			
			Depth:	ft		Annular Bbis / Ft.: Depth:	ft			
Tool / Pa			Annular Volume:	0.0 bbls	bbls	Annular Volume:	0 bbls			
Tool I	Depth:		ft		Excess:			Excess:		
Displace	ment:	5.96	bbls		Total Slurry:	34.73	bbls	Total Slurry:	0.0 bbls	
		The last	STAGE	TOTAL	Total Sacks:	125	sx	Total Sacks:	0 sx	
TIME	RATE	PSI	BBLs	BBLs	REMARKS					
12:00 PM			-	-	on location, held safety	meeting				
				-	waited for rig to pull dril	ll steel and	run casing			
				-						
3:00 PM					established circulation	4 De				
	4.0			-			Gel followed by 4 bbls fre			
	4.0			•	mixed and pumped sks Thixo cement with 1# PhenoSeal per sk, cement to surface					
	4.0 1.0				flushed pump clean					
	1.0				pumped 2 - 2 7/8" rubber plugs to casing TD with 5.96 bbls fresh water **plugs landed 2 bbls into displacement - pressured to 2000 PSI - held pressure**					
	1.0				released pressure, bumped again, no movement, released pressure; shut in casing					
	4.0				washed up equipment					
4:00 PM					left location					
				_						
		CREW			UNIT			SUMMAR		
Cementer: Casey Kennedy		931		Average Rate	Average Pressure	Total Fluid				

Pump Operator:

Bulk:

H2O:

Nick Beets

Devin Katzer Keith Detwiler 239

193

110

-

psi

3.0 bpm

•

bbls



True Enterprise 1326 North Main Street LeRoy, KS 66857

(620) 964-2514

620-625-3607

SOLD TO: Scott Owens Scott Owens 1274 202 Road Yates Center, KS 66783

True Enterprise, 1326 North Main, LeRoy, KS 66857 Please Remit To: Slm. Sld.By Cust.# Order # Type P.O.# Terms O36070 Store 122351 House SLT Jones 12 Last Day of This Month s. of LeRoy Extended Price Price Description Quantity UM Item # 18.25 182.50 10.000 EA CL203 PORTLAND CEMENT 182.50 Taxable: 13.69 Tax: 0.00 Non-Tax: Walke 196.19 Total: Received by: