

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 # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

New Well  Re-Entry  Workover

Oil  WSW  SWD

Gas  DH  EOR

OG  GSW

CM (Coal Bed Methane)

Cathodic  Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Deepening  Re-perf.  Conv. to EOR  Conv. to SWD

Plug Back  Liner  Conv. to GSW  Conv. to Producer

Commingled Permit #: \_\_\_\_\_

Dual Completion Permit #: \_\_\_\_\_

SWD Permit #: \_\_\_\_\_

EOR Permit #: \_\_\_\_\_

GSW Permit #: \_\_\_\_\_

Spud Date or Recompletion Date \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or Recompletion Date \_\_\_\_\_

API No.: \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum:  NAD27  NAD83  WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

*(Data must be collected from the Reserve Pit)*

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

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: \_\_\_\_\_

Operator Name: \_\_\_\_\_ Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West County: \_\_\_\_\_

**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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	MARLA #3
Doc ID	1660633

Tops

Name	Top	Datum
Heebner	3914	-1909
Brown Lime	4085	-2080
Lansing	4107	-2102
B/KC	4491	-2486
Pawnee	4568	-2563
Cherokee	4597	-2592
Viola	4638	-2633
Simpson Shale	4804	-2799



Scale 1:240 (5"=100') Imperial  
 Measured Depth Log

Well Name: Marla #3  
 API: 15-007-24415  
 Location: SE NW NE SE of Section 5 - 30S - 15W  
 License Number: 33936  
 Spud Date: 4/23/2022  
 Surface Coordinates: Latitude: 37.461905 Longitude: -98.978409  
 Bottom Hole Coordinates: Vertical Wellbore  
 Ground Elevation (ft): 2000' K.B. Elevation (ft): 2005'  
 Logged Interval (ft): 3800' To: 4850' Total Depth (ft): 4850'  
 Formation: Ordovician Simpson @RTD  
 Type of Drilling Fluid: Mud-Co. Chemical Drispac (Displaced 2830'-54' w/ 700 bbls)  
 Region: Barber County, KS  
 Drilling Completed: 4/27/2022  
 Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

**OPERATOR**

Company: Griffin Management, LLC  
 Address: 126 S. Main  
 Pratt, KS 67124

**GEOLOGIST**

Name: Eli J. Felts  
 Company: Griffin Management, LLC  
 Address: 126 S. Main  
 Pratt, KS 67124

**Drilling Report**

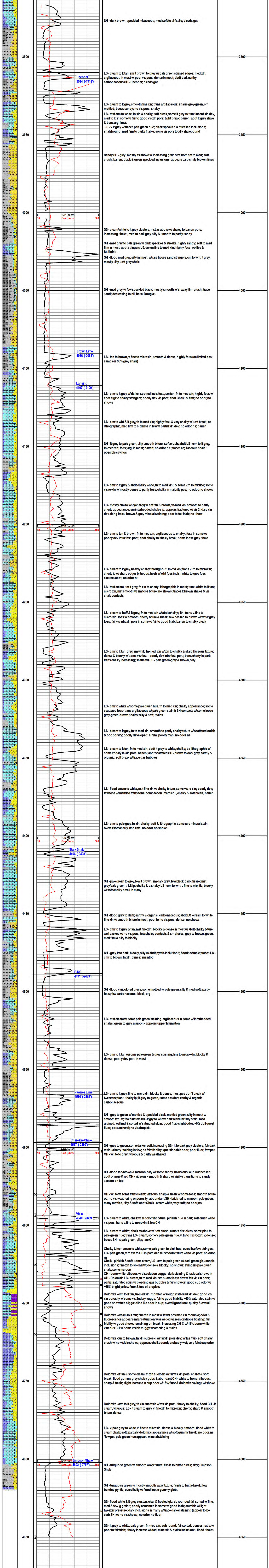
4/23/2022  
 Spud @ 8:45 AM  
 Set Surface Casing & WOC  
 4/24/2022  
 Drilling @ 922'  
 4/25/2022  
 Drilling @ 2740'  
 4/26/2022  
 Drilling @ 3593'  
 Geo on location - Setup iBall Gas Detector  
 4/27/2022  
 Drilling @ 4445'  
 RTD @ ~11 PM @ 4850'  
 4/28/2022  
 MW Wireline Logged  
 7:30 AM to 10:15 AM  
 Run Casing - Plug Down 10:15 PM

**Problems**

No Bit Trips  
 No DSTs

**Pipe Setting**

8.625" 23# Set @ 260' w/400 sxs.  
 5.5" 15.5# Set @ 4849' w/ 175 sxs.



# QUALITY WELL SERVICE, INC.

7953

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410  
Fax 620-672-3663

Rich's Cell 620-727-3409  
Brady's Cell 620-727-6964

Date	4-23-22	Sec.	5	Twp.	30	Range	15	County	BARBER	State	KS	On Location		Finish	
Lease	MARLA	Well No.	3			Location CROFT K. S. TO CATHLAMET E 40' 1072									
Contractor	BILLY <del>AND</del> MICK F. W. DICK							Owner							
Type Job	8 5/8 SURFACE							To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Hole Size	12 1/4			T.D.			260'								
Csg.	8 5/8 23+1/8			Depth			260'								
Tbg. Size				Depth			Street								
Tool				Depth			City State								
Cement Left in Csg.				Shoe Joint			20'								
Meas Line				Displace			15.36								
EQUIPMENT							2 1/2" 3 1/2" 1/2" 1"								
Pumptrk	No.	8					Common 4000								
Bulktrk	No.	7					Poz. Mix								
Bulktrk	No.						Gel. 2% 752"								
Pickup	No.						Calcium 3% 1128"								
JOB SERVICES & REMARKS							Hulls								
Rat Hole							Salt								
Mouse Hole							Flowseal 200"								
Centralizers							Kol-Seal								
Baskets							Mud CLR 48								
D/V or Port Collar							CFL-117 or CD110 CAF 38								
Run 6 1/2" 8 5/8 23+1/8 SET 260'							Sand								
START CSG CSG ON BOTTOM							Handling 435								
Hook up to CSG BREAK CIRC W/ 1/2"							Mileage 25 / 10,375								
Pump into 6 1/2" CIRC							FLOAT EQUIPMENT								
MIX Pump 4000 Common 2 1/2" 3 1/2"							Guide Shoe								
1/2" IS 14.3 1/4"							Centralizer								
DISP 15.4 W/ 1/2"							Baskets								
CAF Direct Circ							AFU Inserts								
take 10' DOWN							Float Shoe								
							Latch Down								
							Service Sp. 10A								
							LMI 25								
							Pumptrk Charge SURFACE								
							Mileage 50								
Thank you							Tax								
MIKE BRADY BOYAN							Discount								
Signature BY TODD SEBASTIAN / JAMES MAYFIELD							Total Charge								

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7945

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Date	Sec.	Twp.	Range	County	State	On Location	Finish	
4-28-22	5	30S	15W	Barber	Ks			
Lease <i>Marla</i>	Well No. <i>3</i>		Location <i>CROFT, 12 S to 4th Ave CHIEF ROAD</i>					
Contractor <i>Martin Drlg</i>	<i>2' G' / 04</i>		Owner <i>.75 mile N: E into</i>					
Type Job <i>5/2 L.S</i>			To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.					
Hole Size <i>7 7/8</i>	T.D.	<i>4851'</i>						
Csg. <i>5/2 15.5</i>	Depth	<i>4849.25</i>						
Tbg. Size	Depth	Charge To <i>Griffin</i>						
Tool	Depth	Street						
Cement Left in Csg.	Shoe Joint	City State						
Meas Line	Displace	The above was done to satisfaction and supervision of owner agent or contractor.						
EQUIPMENT		Cement Amount Ordered <i>175# Pro C 2' GEL 10% SAH</i>						
Pumptrk <i>3</i> No.			<i>5 1/2 Kolocal 1 1/2 C16A 1/4" PS 25% CAIP</i>					
Bulktrk <i>10</i> No.			Common <i>175 #</i>					
Bulktrk No.			Poz. Mix					
Pickup No.			Gel. <i>329"</i>					
JOB SERVICES & REMARKS		Calcium						
Rat Hole <i>375</i>			Hulls					
Mouse Hole			Salt <i>964"</i>					
Centralizers <i>1-2-3-4-5-6-7</i>			Flowseal					
Baskets			Kol-Seal <i>875"</i>					
D/V or Port Collar			Mud CLR 48 <i>500 GAL</i>					
<i>Run H's 5/2 15.5' CSG SET 2</i>			CFL-117-or-6D110-CAF-38 <i>L16A 99'</i>					
<i>START CSG CSG ON BOTTOM &amp; TAG</i>			Sand <i>CC-1 7 GAL CAIP 41" 44"</i>					
<i>Hook into CSG! BREAK CIRC W/ RIG</i>			Handling <i>236</i>					
<i>DROP BALL &amp; CIRC W/ RIG</i>			Mileage <i>25 / 5900</i>					
<i>START Pumping 10 bbl H2O 12 bbl MF D 136 H2O</i>			5/2 FLOAT EQUIPMENT					
<i>START PLOG R-H 375</i>			Guide: Shoe <i>H.M 1 FA</i>					
<i>START Mlk Pump 145 cc ↓ CSG 2 1/4 8 1/2 GAL</i>			Centralizer <i>7 EA</i>					
<i>SUIT ORIN WASH PTK RELEASE 5/2 LN PLOG</i>			Baskets					
<i>START DIS 2% KLL</i>			AFU Inserts					
<i>LEFT PSI 99 out 600'</i>			Float Shoe <i>1 FA</i>					
<i>Load Plog 115.5 1100'</i>			Latch Down <i>1 FA</i>					
<i>PSI @ 1700' Release HELN 3/4 Ball Back</i>			SERVICE COU <i>1 FA</i>					
<i>Good Circ H2O TOB</i>			IMV <i>7c</i>					
<i>THANK YOU</i>			Pumptrk Charge <i>LS</i>					
<i>PLEASE CALL AGAIN</i>			Mileage <i>50</i>					
<i>DDON BRADY BRADY HOTT</i>			Tax					
Signature <i>J. J. X</i>			Discount					
			Total Charge					