KOLAR Document ID: 1789194

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:				
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	Well #:	
New Well Re-Entry Workover		Field Name:		
☐ Oil ☐ WSW ☐ SWD ☐ Gas ☐ DH ☐ EOR ☐ OG ☐ GSW ☐ CM (Coal Bed Methane)		Producing Formation: Kelly Bushing:		
				Total Vertical Depth: Plug Back Total Depth:
		Amount of Surface Pipe Set and Cemented at: Feet		
		Cathodic Other (Core, Expl., etc.):		Multiple Stage Cementing Collar Used? Yes No
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)		
Demoit #		Chloride content:ppm Fluid volume: _	bbls	
_		Dewatering method used:		
		Location of fluid disposal if hauled offsite:		
		·		
		Operator Name:		
		Lease Name: License #:		
Spud Date or Date Reached TD Completion Date or		QuarterSecTwpS. R	_	
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:			