

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 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) (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	Spess Oil Company, a General Partnership
Well Name	L. L. JONES 4
Doc ID	1796124

Perforations

Shots Per Foot	Perforation Top	Perforation Bottom	BridgePlugType	BridgePlugSet At	Material Record
4	4601	4607			ACID-1500 GALLONS
			CIBP Cast Iron Bridge Plug	4837	
			CIBP Cast Iron Bridge Plug	4886	
4	4893	4903			ACID-500 GALLONS
			CIBP Cast Iron Bridge Plug	4910	
4	4934	4948			ACID-500 GALLONS
4	5178	5190			ACID-500 GALLONS
4	5372	5380			ACID-500 GALLONS



del

Kan-Perf Wireline LLC  
PO Box 21  
Ellis, KS 67637 US  
785-259-6843  
office.kanperf@gmail.com



KAN-PERF WIRELINE, LLC  
Ellis, KS

NOV 09 2023

INVOICE

KASSI/O

BILL TO

Spess Oil Company  
200 S Broadway St.  
Cleveland, Oklahoma 74020

INVOICE # 0261  
DATE 10/10/2023  
DUE DATE 11/09/2023  
TERMS Net 30

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
10/10/2023	Truck Rental/Rig Up	LL Jones #4	1	2,200.00	2,200.00T
10/10/2023	Depth Charge Plug		4,837	0.40	1,934.80T
10/10/2023	Cast Iron Bridge Plug	Set 5 1/2" CIBP @ 4837'	1	2,220.00	2,220.00T
10/10/2023	Depth Charge Dump Bailer		4,837	0.29	1,402.73T
10/10/2023	Dump Bailer Run	Dump 2 SX Cement on Plug	1	2,400.00	2,400.00T

Past due invoices may be subject to a 1.5 percent monthly interest charge(18% APR).

SUBTOTAL	10,157.53
DISCOUNT	-7,907.53
TAX	175.50
TOTAL	2,425.50
BALANCE DUE	<b>\$2,425.50</b>

Lease 180626  
 Category 339  
 Check no. 17854  
 Check date 12-5-23  
\$2425.50

*del*

Kan-Perf Wireline LLC  
PO Box 21  
Ellis, KS 67637 US  
785-259-6843  
office.kanperf@gmail.com

KASSI/6



KAN-PERF WIRELINE, LLC  
Ellis, KS

OCT 05 2023

INVOICE

**BILL TO**

Spess Oil Company  
200 S Broadway St.  
Cleveland, Oklahoma 74020

INVOICE # 0260  
DATE 10/04/2023  
DUE DATE 11/03/2023  
TERMS Net 30

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
10/04/2023	Truck Rental/Rig Up	LL Jones #4	1	2,200.00	2,200.00T
10/04/2023	Depth Charge Plug		4,886	0.40	1,954.40T
10/04/2023	Cast Iron Bridge Plug	Set 5 1/2" CIBP @ 4886'	1	2,220.00	2,220.00T
10/04/2023	Depth Charge Perf		4,601	0.25	1,150.25T
10/04/2023	Perforate	4" HEC 6x4 4601-4607	24	65.00	1,560.00T

Past due invoices may be subject to a 1.5 percent monthly interest charge(18% APR).

SUBTOTAL	9,084.65
DISCOUNT	-5,284.65
TAX	296.40
TOTAL	4,096.40
BALANCE DUE	<b>\$4,096.40</b>

339

Lease 180626  
Category \_\_\_\_\_  
Check no. 083510 \$6,521.90  
Check date 10/10/23

*del*

Kan-Perf Wireline LLC  
PO Box 21  
Ellis, KS 67637 US  
785-259-6843  
office.kanperf@gmail.com

KASSI4



KAN-PERF WIRELINE, LLC  
Ellis, KS

OCT 05 2023

INVOICE

**BILL TO**

Spess Oil Company  
200 S Broadway St.  
Cleveland, Oklahoma 74020

INVOICE # 0259  
DATE 10/03/2023  
DUE DATE 11/02/2023  
TERMS Net 30

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
10/03/2023	Truck Rental/Rig Up	LL Jones #4	1	2,200.00	2,200.00T
10/03/2023	Depth Charge Plug		4,910	0.40	1,964.00T
10/03/2023	Cast Iron Bridge Plug	Set 5 1/2" CIBP @ 4910'	1	2,220.00	2,220.00T

Past due invoices may be subject to a 1.5 percent monthly interest charge(18% APR).

SUBTOTAL	6,384.00
DISCOUNT	-4,134.00
TAX	175.50
TOTAL	2,425.50
BALANCE DUE	<b>\$2,425.50</b>

339

Lease 180626  
Category \_\_\_\_\_  
Check no. 083510 # 6,521.90  
Check date 10-10-23