## **CORRECTION #1**

KOLAR Document ID: 1798218

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.: \_\_ Spot Description: \_-\_\_- Sec. \_\_\_\_ Twp. \_\_\_\_S. R. \_\_\_\_ East \Backtriangle West Address 1: Feet from North / South Line of Section Address 2: \_\_\_ \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_+ \_\_ \_ \_ \_ Feet from East / West Line of Section Footages Calculated from Nearest Outside Section Corner: Contact Person: Phone: (\_\_\_\_\_) NE NW SE SW CONTRACTOR: License # \_\_\_\_\_ GPS Location: Lat: (e.g. xx.xxxxx) Datum: NAD27 NAD83 WGS84 Wellsite Geologist: \_\_\_\_ Purchaser: Lease Name: \_\_\_\_\_\_ Well #: \_\_\_\_\_ Designate Type of Completion: Field Name: \_\_\_ New Well Re-Entry Workover Producing Formation: \_\_\_ Oil WSW SWD \_\_\_\_\_ Kelly Bushing: \_\_\_\_ Elevation: Ground:\_\_\_ DH Gas EOR Total Vertical Depth: \_\_\_\_\_\_ Plug Back Total Depth: \_\_\_\_ OG GSW Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_\_ Feet CM (Coal Bed Methane) Multiple Stage Cementing Collar Used? Yes No Cathodic Other (Core, Expl., etc.): If yes, show depth set: \_\_\_\_ If Workover/Re-entry: Old Well Info as follows: If Alternate II completion, cement circulated from: \_\_\_\_\_ Operator: feet depth to:\_\_\_\_\_w/\_\_\_ Well Name: Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_ Deepening Re-perf. Conv. to EOR Conv. to SWD **Drilling Fluid Management Plan** (Data must be collected from the Reserve Pit) Conv. to GSW Conv. to Producer Plug Back Liner Chloride content: \_\_\_\_ \_\_\_\_ppm Fluid volume: \_\_\_\_\_ bbls Permit #: \_\_\_\_\_ Commingled Dewatering method used: \_\_\_\_ **Dual Completion** Permit #: SWD Location of fluid disposal if hauled offsite: Permit #: \_\_\_\_ EOR Operator Name: \_\_\_\_\_ Permit #: \_\_\_\_ GSW \_\_\_\_\_ License #:\_\_\_\_ Spud Date or Date Reached TD Completion Date or \_\_\_\_ Permit #: \_\_\_\_ Recompletion Date Recompletion Date County:

## **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: