

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 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	Anchor Bay Petroleum LLC
Well Name	WEBER 1
Doc ID	1799483

All Electric Logs Run

Dual Induction
Density-Neutron
Micro
Cement Bond





# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 4118

Date	7/11/24	Sec.	11	Twp.	14	Range	20	County	Ellis	State	Kansas	On Location	Finish	3:30pm	
Location								Ellis 55 3E 1/2 S Winto							

Lease	Weber	Well No.	1	Owner	To Quality Oilwell Cementing, Inc.
Contractor				You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Type Job	port collar			Charge To	Anchor Bay
Hole Size		T.D.		Street	
Csg.	5 1/2	Depth		City	
Tbg. Size	2 7/8	Depth		State	
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.		Shoe Joint		Cement Amount Ordered	350 80 QMDC 1/4 flow

Meas Line	Displace			Common	10 gel 185 80 QMDC
<b>EQUIPMENT</b>					
Pumptrk	5	No.		Poz. Mix	
		Cementer	Tim	Gel.	10
Bulktrk	19	No.		Calcium	
		Driver	Corey		
Bulktrk	P.V.	No.			
		Driver	David		

<b>JOB SERVICES &amp; REMARKS</b>					
Remarks:					
Rat Hole				Salt	
Mouse Hole	Plug @ 2785'			Flowseal	75#
Centralizers	circulated Hole @ 2750			Kol-Seal	
Baskets				Mud CLR 48	
D/V or Port Collar	port collar at 1498'			CFL-117 or CD110 CAF 38	
				Sand	
				Handling	350

<b>FLOAT EQUIPMENT</b>					
Mixed 5 gel open port collar mixed 5 more gel followed with 185 SKs to circulate					
Cement did circulate					
used 165 SKs total 10 gel					
Guide Shoe					
Centralizer					
Baskets					
AFU Inserts					
Float Shoe					
Latch Down					

Pumptrk Charge	port collar Job	Tax	
Mileage	21	Discount	
Total Charge			

X Signature *E. Glanman*

*Thanks*

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 4100

Date	6-25-24	Sec.	11	Twp.	14	Range	20	County	Ellis	State	Ks	On Location		Finish	10:15PM
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Location Ellis 5S 4E 1S

Lease	<u>Weber</u>	Well No.	<u>1</u>	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	<u>Discovery 2</u>				
Type Job	<u>Long String</u>				
Hole Size	<u>7 7/8</u>	T.D.		Charge To	<u>Anchor Bay Pet</u>
Csg.	<u>5 1/2</u>	Depth	<u>17 1/2</u>	Street	
Tbg. Size		Depth		City	State
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	

Cement Left in Csg.	<u>44.50</u>	Shoe Joint	<u>44.50</u>	Cement Amount Ordered	<u>18 0/4 Com 1090 Salt</u>
Meas Line		Displace	<u>93</u>	<u>5% Gil 500 gal Flush</u>	

<b>EQUIPMENT</b>				Common	<u>180</u>
Pumptrk	<u>17</u>	No.		Cementer Helper	<u>Bill Nick</u>
Bulktrk		No.		Driver	
Bulktrk	<u>9</u>	No.		Driver	<u>Joe</u>

<b>JOB SERVICES &amp; REMARKS</b>				Hulls	
Remarks:				Salt	<u>14</u>
Rat Hole	<u>30</u>			Flowseal	
Mouse Hole	<u>15</u>			Kol-Seal	<u>750#</u>
Centralizers				Mud CLR 48	<u>500 gal</u>
Baskets				CFL-117 or CD110 CAF 38	
D/V or Port Collar	<u>#69</u>		<u>1545</u>	Sand	
	<u>pipe seat e</u>		<u>3865</u>	Handling	<u>201</u>
	<u>Shoe JT</u>		<u>44.50</u>	Mileage	
	<u>Fn Sect</u>		<u>3820.50</u>		

				<b>FLOAT EQUIPMENT</b>	
	<u>pump 500 gal Flush</u>			Guide Shoe	<u>- 1</u>
	<u>Cement</u>			Centralizer	<u>- 6</u>
	<u>pump plug w/ 93</u>			Baskets	<u>- 2</u>
	<u>Land plug e</u>			AFU Inserts	
	<u>Float Did hold</u>			Float Shoe	<u>- 1</u>
				Latch Down	
				<u>Portcollar</u>	

				Pumptrk Charge	<u>prod string</u>
				Mileage	<u>21</u>
				Tax	
				Discount	
				Total Charge	

X Signature [Signature]

Thanks

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 4030

Date	6/18/24	Sec.	11	Twp.	14	Range	20	County	ellis	State	KS	On Location		Finish	4:45 pm
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Location Ellis 5 1/2 miles 3 east 1/2 S West into

Lease	Weber	Well No.	1	Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Contractor	Discovery				
Type Job	Surface				
Hole Size		T.D.	226	Charge To	Anchor Bay
Csg.	8 5/8	Depth		Street	
Tbg. Size		Depth		City	State
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.	
Cement Left in Csg.		Shoe Joint	15	Cement Amount Ordered	150 80/20 3% cal 2% gel
Meas Line		Displace	13.4		

**EQUIPMENT**

Pumptrk	16	No.	Cementer	Tim	Common	120
			Helper		Poz. Mix	30
Bulktrk	14	No.	Driver	Corey	Gel.	3
			Driver		Calcium	6
Bulktrk	PV	No.	Driver	Nick		

**JOB SERVICES & REMARKS**

Remarks:	Hulls	
Rat Hole	Salt	
Mouse Hole	Flowseal	
Centralizers	Kol-Seal	
Baskets	Mud CLR 48	
D/V or Port Collar	CFL-117 or CD110 CAF 38	
broke circ, hooked up pumped cement	Sand	
circ. displaced 13.4 BBL	Handling	159
	Mileage	

**FLOAT EQUIPMENT**

	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down

Thanks!

Pumptrk Charge	Surface
Mileage	21

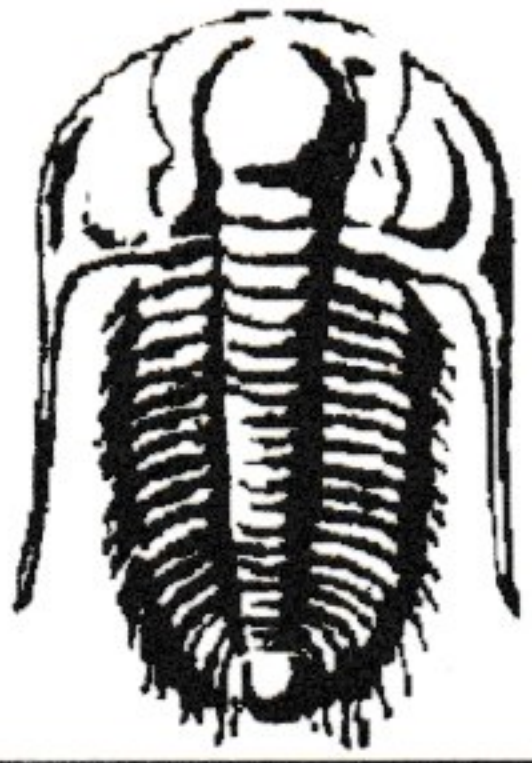
X Signature



Thanks

Tax	
Discount	
Total Charge	





# TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

## Test Ticket

NO. **71426**

Well Name & No. Weber #1 Test No. 1 Date 6-28-24  
 Company Anchor Bay Petroleum, LLC Elevation 2215 KB 2205 GL  
 Address 1952 Victoria Rd Hays, KS 67601  
 Co. Rep / Geo Ed Glassman Rig Southwind  
 Location: Sec. 11 Twp 14 Rge. 20 Co. Ellis State KS

Interval Tested 3447-3545 Zone Tested Toronto to D  
 Anchor Length 98' Drill Pipe Run 3439 Mud Wt. 8.9  
 Top Packer Depth 3442 Drill Collars Run Ø Vis 56  
 Bottom Packer Depth 3447 Wt. Pipe Run N.A. WL 7.2  
 Total Depth 3545 Chlorides 9,800 ppm System LCM 2<sup>nd</sup>

Blow Description IP: 15 min., weak building blow, 1.2 inches  
ISB: 60 min., no blow back  
FP: 45 min., weak building blow, 1.8 inches  
FSB: 60 min., no blow back

Rec	Feet of	%gas	%oil	%water	%mud
<u>20</u>	<u>mud</u>			<u>100</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 20 BHT 108 Gravity \_\_\_\_\_ API RW \_\_\_\_\_ @ \_\_\_\_\_ \*F Chlorides \_\_\_\_\_ ppm

Initial Hydrostatic 1674  Test com.  Ruined Shale Packer \_\_\_\_\_  
 Initial Flow 21 to 29  Jars \_\_\_\_\_  Ruined Packer \_\_\_\_\_  
 Initial Shut-In 677  Circ Sub \_\_\_\_\_  Hotel \_\_\_\_\_  
 Final Flow 26 to 35  Hourly Standby \_\_\_\_\_  EM Tool Successful good  
 Final Shut-In 594  Mileage 440  Accessibility \_\_\_\_\_  
 Final Hydrostatic 1601  Sampler \_\_\_\_\_  Gas Sample \_\_\_\_\_  
 T- On Location 2200  Straddle \_\_\_\_\_  Oversized Hole \_\_\_\_\_  
 Initial Flow 15 T-Started 2345  Shale Packer \_\_\_\_\_  Sub Total \_\_\_\_\_  
 Initial Shut-In 60 T-Open 0200  Extra Packer \_\_\_\_\_  Total \_\_\_\_\_  
 Final Flow 45 T-Pulled 0500  Extra Recorder \_\_\_\_\_  Tool Loaded \_\_\_\_\_ @ \_\_\_\_\_  
 Final Shut-In 60 T-Out 0700  Day Standby \_\_\_\_\_  MP/DST Disc't \_\_\_\_\_

Comments 1148

Approved By [Signature] Our Representative [Signature]

Trilobite Testing Inc. shall not be liable for damage of any kind of property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.



# TRILOBITE TESTING INC.

1515 Commerce Parkway • Hays, Kansas 67601

## Test Ticket

NO. **71427**

Well Name & No. Weber #1 Test No. 2 Date 6-23-24  
 Company Anchor Bay Petroleum, Inc. Elevation 2215 KB 2205 GL  
 Address 1952 Victoria Rd. Hays, KS 67601  
 Co. Rep / Geo Ed Glassman Rig Discovery  
 Location: Sec. 11 Twp 14 Rge. 20 Co. Ellis State KS

Interval Tested 3639-3714 Zone Tested Lens I-K  
 Anchor Length 75 Drill Pipe Run 3630 Mud Wt. 9.0  
 Top Packer Depth 3634 Drill Collars Run 0 Vis 57  
 Bottom Packer Depth 3639 Wt. Pipe Run N.A. WL 6.8  
 Total Depth 3714 Chlorides 9,900 ppm System LCM 2#

Blow Description RFI 30 min., weak surface blow, 1.2 inches  
ISI 30 min., no blow back  
RFI 30 min., no blow  
PSI 30 min., no blow back

Rec	Feet of	%gas	%oil	%water	%mud
<u>10</u>	<u>mud</u>			<u>100</u>	
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 10 BHT 109 Gravity \_\_\_\_\_ API RW \_\_\_\_\_ @ \_\_\_\_\_ \*F Chlorides \_\_\_\_\_ ppm

Initial Hydrostatic 1719  Test com.  Ruined Shale Packer \_\_\_\_\_  
 Initial Flow 23 to 25  Jars \_\_\_\_\_  Ruined Packer \_\_\_\_\_  
 Initial Shut-In 167  Circ Sub \_\_\_\_\_  Hotel \_\_\_\_\_  
 Final Flow 26 to 27  Hourly Standby \_\_\_\_\_  EM Tool Successful good  
 Final Shut-In 63  Mileage 40  Accessibility \_\_\_\_\_  
 Final Hydrostatic 1736  Sampler \_\_\_\_\_  Gas Sample \_\_\_\_\_  
 T- On Location 2200  Straddle \_\_\_\_\_  Oversized Hole \_\_\_\_\_  
 Initial Flow 30 T-Started 2300  Shale Packer \_\_\_\_\_  Sub Total \_\_\_\_\_  
 Initial Shut-In 30 T-Open 0100  Extra Packer \_\_\_\_\_  Total \_\_\_\_\_  
 Final Flow 30 T-Pulled 0300  Extra Recorder \_\_\_\_\_  Tool Loaded \_\_\_\_\_ @ \_\_\_\_\_  
 Final Shut-In 30 T-Out 0500  Day Standby \_\_\_\_\_  MP/DST Disc't \_\_\_\_\_

Comments \_\_\_\_\_

Approved By \_\_\_\_\_ Our Representative sg Chris Hagman

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