KOLAR Document ID: 1800825

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 # 30458
Name: RJM Company
Address 1: PO BOX 256
Address 2:
City: CLAFLIN State: KS Zip: 67525 + 0256
Contact Person: Brian Miller
Phone: (620) 588-3910
CONTRACTOR: License # 99975
Name: COMPANY SERVICING TOOLS
Wellsite Geologist: NA
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: Enterprise Oil Marketing Corp
Well Name: Walsten "E"
Original Comp. Date: 06/02/1970 Original Total Depth: 3552

☐ 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 #:

09/15/2024 — Spud Date or Recompletion Date
— Date Reached TD
09/15/2024 — Completion Date or Recompletion Date

API No.: 15-159-20309-00-02
Spot Description:
_ - NW - SE - SW Sec. 8 Twp. 21 S. R. 6 ☐ East ☑ West
1079 Feet from ☐ North / ☑ South Line of Section
3548 Feet from ☑ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Rice
Lease Name: WALSTEN E Well #: 3
Field Name:
Producing Formation: Conglomerate/Mississippi
Elevation: Ground: 1689 Kelly Bushing: 0
Total Vertical Depth: 3539 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 202 Feet
Multiple Stage Cementing Collar Used? ☑ Yes ☐ No
If yes, show depth set: 221 Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 221 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:** Kelsey Cox **Date:** 10/30/2024

Operator Name: RJM Company Lease Name: WALSTEN E Well #: 3

Sec. 8 Twp. 21 S. R. 6 ☐ East ☑ West County: Rice

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 ☐ Yes ☑ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☐ Yes ☑ No

Geologist Report / Mud Logs ☐ Yes ☑ No

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Conglomerate	3523	kb
Mississippi	3534	kb

CASING RECORD ☑ New ☐ 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
Surface	12.25	8.625	20	202	Common	100	unk
Production	7.875	5.5	15.5	3535	common	180	unk
Liner	7.875	4.5	9.5	3508	common	200	unk

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
☐ Perforate ☐ Protect Casing ☐ Plug Back TD ☐ 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: 10/1/2024

Producing Method: ☐ Flowing ☑ Pumping ☐ Gas Lift ☐ Other *(Explain)*

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS:
☐ Vented ☐ Sold ☐ Used on Lease
(If vented, Submit ACO-18.)

METHOD OF COMPLETION:
☐ Open Hole ☑ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)*

PRODUCTION INTERVAL:

Top	Bottom
3523	3527
3531	3535

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record *(Amount and Kind of Material Used)*
	3523	3527			
	3531	3535			

TUBING RECORD: Size: 2.375 Set At: 3487 Packer At: 3487

Mail to: KCC - Conservation Division, 266 N. Main, Suite 220, Wichita, Kansas 67202

Form	ACO1 - Well Completion
Operator	RJM Company
Well Name	WALSTEN E 3
Doc ID	1800825

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	20	202	Common	100	unk
Production	7.875	5.5	15.5	3535	common	180	unk
Liner	7.875	4.5	9.5	3508	common	200	unk

COPELAND
Acid & Cement

TREATMENT REPORT

Acid Stage No. _____

Date 9/24/2024 District GB F.O. No. C-61136

Company RJM

Well Name & No. WALSTENE #6 SWD

Location _____ Field _____

County RICE State KS

Casing: Size 4 1/2 Type & Wt. 11.6 Set at 3508 ft.

Formation: _____ Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Formation: _____ Perf. _____ to _____

Liner: Size _____ Type & Wt _____ Top at _____ ft Bottom at _____ ft.

Cemented: Yes ▼ Perforated from _____ ft. to _____ ft

Tubing: Size & Wt. _____ Swung at _____ ft

Perforated from _____ ft. to _____ ft

Open Hole Size _____ T.D. _____ ft. P.B. to _____ ft.

Type Treatment	Amt.		Type Fluid	Sand Size	Pounds of Sand
Bkdown		Bbl./Gal.			
		Bbl./Gal.			
		Bbl /Gal			
		Bbl./Gal.			
Flush		Bbl./Gal.			

Treated from _____ ft. to _____ ft. No. ft. 0

from _____ ft. to _____ ft. No. ft. 0

from _____ ft. to _____ ft. No. ft. 0

Actual Volume of Oil / Water to Load Hole: _____ Bbl./Gal.

Pump Trucks. No. Used: Std. 318 Sp _____ Twin _____

Auxiliary Equipment 360

Personnel GREG ROSS

Auxiliary Tools _____

Plugging or Sealing Materials: Type 65/35 POZ 6% GEL 1/2% C-37

_____ Gals. _____ lb.

Company Representative JAY P. Treater GREG C.

TIME	PRESSURES		Total Fluid Pumped	REMARKS
a.m./p.m.	Tubing	Casing		
8:15				ON LOCATION
				11.6# 4 1/2" SET @ 3508'
				BREAK CIRCULATION WITH WATER, TOOK 55 BBLS
				MIX 200 SKS. RINSE PUMP & LINE OUT. RELEASED PLUG
				DISPLACE WITH 55 BBLS, PLUG LANDED. CEMENT DID NOT CIRCULATE
11:00				JOB COMPLETE
				THANK YOU!!!