

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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# McGOWN

## DRILLING, INC.

Mound City, KS  
620.224.7406

Well #				Casing			
<b>Swisher #I-6</b> <b>S&amp;K Oil Production, Inc.</b>				Surface		Longstring	
API #: 011-24733		S-T-R: 18-25S-22E		Size: 7.000 "	Size: 2 7/8 "		
County: Bourbon Co., KS		Date: 10/24/2022		Tally: 21.6 '	Tally: 719.1 '		
				Cement: 5 sx	Bit: 5.875 "		
				Bit: 9.875 "	Date: 10/25/2022		
Top	Base	Formation	Top	Base	Formation		
0	3	Soil & rock	546	547	Lime		
3	8	Lime	547	618	Shale		
8	10	Shale	618	622	Sandy Shale		w/some free sand
10	11	Lime	622	652	Sand		See below
11	18	Shale	652	662	Sandy Shale		
18	28	Lime	662	666	Sandy Shale		Good show
28	31	Shale	666	677	Sandy Shale		
31	48	Lime	677	687	Sand		Good show
48	50	Black Shale	687	688	Sandy Shale		w/black sand
50	54	Lime	688	697	Sandy Shale		
54	60	Shale	697		Shale		
60	78	Lime			Seat Nipple: 653.35		
78	81	Shale					
81	83	Lime			<i>Longstring cemented</i>		
83	97	Shale			<i>S&amp;K Oil Prod.</i>		
97	99	Lime			<i>w/ 84 sxS</i>		
99	130	Shale					
130	135	Lime					
135	235	Shale					
235	254	Lime					
254	265	Shale			<i>Top 634 662 677</i>		
265	270	RedBed			<i>Bottom 644 666 683</i>		
270	295	Shale					
295	297	Lime					
297	337	Shale					
				Sand / Core Detail			
				Core #1:		Core #2:	
337	338	Coal		622	634	Light brown sand w/odor, rainbow to pit	
338	342	Shale				starting at 626, weak bleed to pit after 630'	
342	355	Lime					
355	357	Shale		634	644	Soft brown sand, good odor, good bleed	
357	370	Lime		644	646	Black sand, good odor, weaker bleed	
370	408	Shale		646	652	Black sand, some odor, no bleed, water	
408	423	Lime					
423	436	Shale		662	666	Sandy shale w/sand, good odor, fair bleed	
436	441	Lime		666	677	Sandy shale, no odor, no show	
441	507	Sandy Shale		677	684	Slightly laminated sand, good odor, fair bleed	
507	510	Lime		684	687	Black sand, good odor, fair bleed	
510	546	Shale		687	688	Sandy shale w/black sand, slight odor,	
				<b>Total Depth: 722</b>		no show	



Coleman Hardware LLC.  
 505 Main Street  
 Mound City KS 66056  
 913-795-2895  
 Fax: 913-795-2026

**CUSTOMER COPY**



**INVOICE**

2211-047716 PAGE 1 OF 1

SOLD TO	JOB ADDRESS
S & K OIL C/O STEVE JACKSON 1903 FARRIS ROAD BLUE MOUND KS 66010	S & K OIL C/O STEVE JACKSON 1903 FARRIS ROAD BLUE MOUND KS 66010

ACCOUNT	JOB
20006	0
SOLD ON	11/4/2022 9:48:29 AM
CUST PICKUP	
BRANCH	1000
CUSTOMER PO#	OIL
STATION	C03
CASHIER	SS
SALESPERSON	
ORDER ENTRY	

Thank you for your business!

Quantity	UM	Item	Description	D	T	Price	Per	Amount
18	EA	SOP05454-000	2000 LB. BAGS OF PORTLAND CEMENT		Y	337.9900	EA	6,083.82
18	EA	SOP05454-001	PALLET CHARGE PER PALLET		Y	25.0000	EA	450.00
18	EA	SOP05454-002	WRAPPING CHARGE PER PALLET		Y	5.0000	EA	90.00
1	DP	FRT	Freight		N	91.0000	DP	91.00
-86	EA	SOP05454-001	PALLET CHARGE PER PALLET Return Reason: DNN		Y	20.0000	EA	-1,720.00

Payment Method(s) Buyer: STEVE

Charge to Acct 5,411.64

KST 8.50%	SubTotal	4,994.82
	Sales Tax	416.82
	Deposit	
<b>Please Pay This Amount</b>		<b>5,411.64</b>

Signature STEVE