

Confidentiality Requested:

 Yes NoKANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACO-1
January 2018Form must be Typed
Form must be Signed
All blanks must be FilledWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

API No.: _____

Name: _____

Spot Description: _____

Address 1: _____

____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West

Address 2: _____

____ Feet from North / South Line of Section

City: _____ State: _____ Zip: _____ + _____

____ Feet from East / West Line of Section

Contact Person: _____

Footages Calculated from Nearest Outside Section Corner:

Phone: (_____) _____

 NE NW SE SW

CONTRACTOR: License # _____

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

Name: _____

Datum: NAD27 NAD83 WGS84

Wellsite Geologist: _____

County: _____

Purchaser: _____

Lease Name: _____ Well #: _____

Designate Type of Completion:

Field Name: _____

 New Well Re-Entry Workover

Producing Formation: _____

 Oil WSW SWD

Elevation: Ground: _____ Kelly Bushing: _____

 Gas DH 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: _____ Feet

If Workover/Re-entry: Old Well Info as follows:

If Alternate II completion, cement circulated from: _____

Operator: _____

feet depth to: _____ w/ _____ sx cmt.

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

 Deepening Re-perf. Conv. to EOR Conv. to SWD

Chloride content: _____ ppm Fluid volume: _____ bbls

 Plug Back Liner Conv. to GSW Conv. to Producer

Dewatering method used: _____

 Commingled Permit #: _____

Location of fluid disposal if hauled offsite:

 Dual Completion Permit #: _____

Operator Name: _____

 SWD Permit #: _____

Lease Name: _____ License #: _____

 EOR Permit #: _____Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West GSW Permit #: _____

County: _____ Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

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 DistributionALT 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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives

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 (Explain) _____				
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 (If vented, Submit ACO-18.)		METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4)			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 (Amount and Kind of Material Used)	
TUBING RECORD: Size: Set At: Packer At:						

Form	ACO1 - Well Completion						
Operator	Colt Energy Inc						
Well Name	FITZPATRICK 14						
Doc ID	1701890						

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	11.25	8.625	24	20	Portland	8	None
Production	6.75	4.5	11.6	1042	Thick Set (OWC)	125	2 #/sx Phenoseal

810 E 7TH
PO Box 92
EUREKA, KS 67045
(620) 583-5561



Cement or Acid Field Report
Ticket No. 6924
Foreman David Gardner
Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
1-4-23	1003	Fitzpatrick #14				Allen	KS
Customer Colt Energy Inc.			Safety Meeting DG SF DK	Unit #	Driver	Unit #	Driver
Mailing Address P.O. Box 388				111	Shannon		
				114	Dan		
City Topeka		State KS	Zip Code 666749				

Job Type Longstring Hole Depth 1054' Slurry Vol. 41 Bbl Tubing _____
Casing Depth 1042' Hole Size 6 3/4" Slurry Wt. 13.6* Drill Pipe _____
Casing Size & Wt. 4 1/2" 11.60" Cement Left in Casing 4' S.J. Water Gal/SK _____ Other _____
Displacement 16 1/2 Bbl Displacement PSI 500 Bump Plug to 1000 PSI BPM _____

Remarks: Safety Meeting: Rig up to 4 1/2" casing. Break circulation w/ 5 Bbl fresh water, Pump 500# Gel Flush w/ 80# Hulls, 10 Bbl water spacer @ 5 BPM. Mixed 125 sks Thick Set Cement w/ 2# Phenoseal/sk @ 13.6# /gal, yield 1.84 = 41 Bbl slurry. Wash out pump & lines, Shut down. Release plug. Displace plug to seat w/ 16 1/2 Bbl fresh water. Final pumping pressure of 500 PSI. Bump plug to 1000 PSI. Wait 2 mins. Release pressure. Float held. Close casing in w/ 0 PSI. Good cement returns to surface = 7 Bbl slurry to pit. Annulus standing full of cement. Job complete. Rig down.

Note: First surface hole was crooked, rig moved over. Plug surface hole w/ 15 SKS cement.

Thank You

Authorization by Wes Moots

Title Co/Rep.

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

Colt Energy Driller's Log												
Lease: Fitzpatrick	Well No. 14	Well Location: 1266' FSL & 1167' FWL			Sec. 9		Twp. 24S		Rng. 18E			
API #: 15-001-31759	Type: Oil	County: AL			State: KS	Spud Date: 12/30/22		Total Depth: 1054'				
Driller: Pat Stewart	Surface Casing		Bit Record				Coring Record					
Crew: Dan Foust	Bit Size:	11.25"	Type	Size	Start	End	Core #	Size	Start	End		
	Casing Size:	8.625"	PDC	11.25"	0	20'	1					
Start Rig Hrs: 21300	Casing Length:	20'	PDC	6.75"	20'	1054'	2					
End Rig Hrs: 21335	Cement used:	8 sx					3					
Total Rig Hrs: 35	Cement Type:	Portland					4					
From	To	Formation		From	To	Formation		Pipe Tally				
0	30	Limestone						1	41.55	19	41.55	
30	90	Shale						2	41.55	20	41.55	
90	135	Limestone						3	41.55	21	41.55	
135	220	Shale						4	41.55	22	41.55	
220	330	Limestone						5	41.55	23	41.55	
330	520	Shale						6	41.55	24	41.55	
520	530	Limestone						7	41.55	25	41.20	
530	600	Shale						8	41.20	26		
600	610	Limestone						9	41.35	27		
610	640	Shale						10	41.55	28		
640	680	Limestone						11	41.55	29		
680	930	Shale						12	41.55	30		
930	1054	Sandstone						13	41.55	31		
								14	41.55	32		
								15	41.55	33		
								16	41.55	34		
								17	41.55	35		
								18	41.55	36		
								Total: 1037.85+4' shoe= 1041.85'				