KOLAR Document ID: 1850024

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

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Page Two

Operator Name:				Lease Name:			Well #:	
Sec Twp.	S. R.	Ea	st 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 files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to G	eological Surv	ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
		Re			New Used	ion, etc.		
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	l		
Purpose:		epth Ty Bottom	pe of Cement	of Cement # Sacks Used Type and Percent Additives				
Protect Casii								
Plug Off Zon								
Did you perform a hydraulic fracturing treatment on this well? Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? No (If No, skip questions 2 and 3) No (If No, skip questions 3) No (If No, fill out Page Three of the ACO-1)								
Date of first Production/Injection or Resumed Production/ Injection: Producing Method: Gas Lift Other (Explain)								
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:								
Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled (Submit ACO-4)					Bottom			
,	Submit ACO-18.)							
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At				Record
TUBING RECORD:	Size:	Set /	At:	Packer At:				
. 5213 12.00 10.	5120.		···	. 30.0.71				

Form	ACO1 - Well Completion
Operator	RJ Energy, LLC
Well Name	WOLFE MCADAM 11W
Doc ID	1850024

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	9.875	7	23	40	portland	8	
Production	5.625	2.875	6.5	893	portland	120	

RJ Energy, LLC Drill Log - Cement Log

Lease: Wolf McAdam Start: 3/13/2025 Surface: 7" 40' 8 Sacks

Well# 11W **Finish:** 3/14/2025

API# 15-207-29996 **Longstring:** 2.875 " 893 ' 120 Sacks

Span	Formation	Depth	Notes	Pumped 120 sacks
4	Top Soil	4		and circulated to the top
18	Clay & Gravel	22		using company tools.
52	Shale	74		
25	Lime	99		
83	Shale	182		
100	Lime	282		
44	Shale	326		
145	Lime	471		
-8	Shale	463		
210	Lime	673		
62	Shale	735		
32	Lime	767		
13	Shale	780		
10	Lime	790		
13	Shale	803		
7	Lime	810		
7	Shale	817		
3	Lime	820		
41	Shale	861		
11	Broken Sand	872	Good Show	
28	Shale	900	TD	