KOLAR Document ID: 1854998

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 _ East / _ West Line of Section						
Contact Person:	Footages Calculated from Nearest Outside Section Corner:						
Phone: ()	□NE □NW □SE □SW						
CONTRACTOR: License #	GPS Location: Lat:, Long:						
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)						
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84						
Purchaser:	County:						
Designate Type of Completion:	Lease Name: Well #:						
New Well Re-Entry Workover	Field Name:						
	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)							
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?						
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 Producer	(Data must be collected from the Reserve Pit)						
Described	Chloride content: ppm Fluid volume: bbls						
☐ Commingled     Permit #:	Dewatering method used:						
SWD Permit #:	Location of fluid disposal if hauled offsite:						
EOR Permit #:	Location of fluid disposal if flauled offsite.						
GSW Permit #:	Operator Name:						
	Lease Name: License #:						
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R						
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:

KOLAR Document ID: 1854998

#### Page Two

Operator Name: _				Lease Name:			Well #:		
Sec Twp.	S. R.	E	ast West	County:					
	flowing and shu	ut-in pressures, v	vhether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,	
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 0	Geological 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	es No					
		B	CASING eport all strings set-c		New Used	ion, etc.			
Purpose of Strir		Hole illed	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD				
Purpose:		epth T Bottom	ype of Cement	# Sacks Used	red Type and Percent Additives				
Perforate Protect Casi Plug Back T									
Plug Off Zor									
Did you perform a     Does the volume     Was the hydraulic	of the total base f	fluid of the hydrauli		_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,	
Date of first Product Injection:	tion/Injection or R	esumed Production	Producing Meth	nod:	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity	
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			DN INTERVAL: Bottom	
	Sold Used	I on Lease	Open Hole			mmingled mit ACO-4)	Тор	BOROTT	
,	,			B.11 B1					
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	g Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)				
TUBING RECORD:	: Size:	Set	Δ+-	Packer At:					
TODING RECORD:	. 3126.	Set	n.	i donei Al.					

Form	ACO1 - Well Completion
Operator	Jackson, Dale E & Sue Ellen dba Dale E. Jackson Production Co.
Well Name	TWIN CC FARMS PF1
Doc ID	1854998

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	8.75	6	10	24	Portland	5	None
Production	5.625	2.875	5	156	Portland	22	None

## **CLEAVER FARM & HOME**



Cleaver Farm & Home 2103 South Santa Fe Ave Chanute KS 66720 620-431-6070

### **CUSTOMER COPY**



**ORDER** 

2410-571569

PAGE 1 OF 1

SOLD TO	
Cash Sales CHANUTE KS 66720	

SHIP TO	
Dale Jackson Production Jeremiah Jackson 2251 160th St Mapleton KS 66754 620-363-2180	

ACCT NO. JOB CASH 0 **ENTRY DATE** 10/22/2024 1:45:53 PM **DELIVER ON** 10/29/2024 **BRANCH** 1000 **CUSTOMER PO#** STATION C17 CASHIER **JAKH** SALESPERSON **JAKH ORDER ENTRY** MODIFIED BY **JAKH** 

Account due 10th of month following purchase. 1 1/2% interest per month added.

HAVE DRIVER CALL BEFORE LEAVING TO MAKE SURE OF HELP THERE TO UNLOAD...CUSTOMER WILL UNLOAD... THERE WILL BE PALLETS TO SEND BACK FROM PREVIOUS LOAD. PICKUP CHECK

ltem	Description	DO	rdered	Sold	Remain	UM	Price	Per	Amoun
STD	CEMENT PORTLAND TYPE 1L 94LB MONARCH	N	510		510	EA	14.9100	EA	7,604.10
PALLET	PALLET BLOCKS & QUIK-CRETE		17		17	EA	30.0000	EA	510.00
DFSC	FREIGHT SURCHARGE		24		24	TON	6.0000	EA	144.00
							,		
	0 ()						1		
	10								
	UK74526								
D							SubTotal		8 258 10

Payment Method(s)

SubTotal	8,258.10
Sales Tax	619.73
Deposit	0.00
Please pay this amount	8,877.83

RETURN POLICY - within 30 days only - merchandise must be in saleable condition and accompanied by invoice.

\*\*No refunds on Special Order non-stock items\*\*

8367.83

## **CLEAVER FARM & HOME**



Cleaver Farm & Home 2103 South Santa Fe Ave Chanute KS 66720 620-431-6070

### **CUSTOMER COPY**



#### **ORDER**

2410-571587

PAGE 1 OF 1

Dale Jackson Production Jeremiah Jackson 2251 160th st Mapleton KS 66754 620-363-2180	

ACCT NO. JOB CASH 0 **ENTRY DATE** 10/22/2024 2:05:11 PM **DELIVER ON** 10/29/2024 BRANCH 1000 **CUSTOMER PO#** C17 STATION CASHIER JAKH SALESPERSON **JAKH** ORDER ENTRY MODIFIED BY **JAKH** 

Account due 10th of month following purchase. 1 1/2% interest per month added.

PICKUP PALLETS

ltem	Description	D Ordered	Sold	Remain	UM	Price	Per	Amoun
PALLET	PALLET BLOCKS & QUIK-CRETE	-17		-17	EA	30.0000	EA	-510.00
Payment Method	(s)					SubTotal		-510.00

Sales Tax 0.00 **CHAN 9.50%** Deposit 0.00 Please pay this -510.00 amount

RETURN POLICY - within 30 days only merchandise must be in saleable condition and accompanied by invoice.

<sup>\*\*</sup>No refunds on Special Order non-stock items\*\*

"WARNING"

DANGER - MAY CAUSE BURNS TO EYES AND SKIN. CONTAINS CALCIUM HYDROXIDE WHEN MIXED WITH WATER, SKIN AREAS THAT COME INTO CONTACT WITH PORTLAND CEMENT OR MIXTURES CONTAINING PORTLAND CEMENT, EITHER DIRECTLY OR THROUGH SATURATED CLOTHING, SHOULD BE PROMPTLY WASHED WITH WATER. FAILURE TO DO SO MAY CAUSE SKIN IRRITATION OR POSSIBLE THIRD DEGREE BURNS REACHING DEEP TISSUES WITH LITTLE WARNING, BODY PERSPIRATION OR MOISTURE MAY CAUSE HYDRATION OF DRY CEMENT ALSO RESULTING IN BURNS. IF IRRITATION BEGINS TO INCREASE SEE A PHYSICIAN IMMEDIATELY, IF PORTLAND CEMENT OR A MIXTURE CONTAINING PORTLAND CEMENT GETS IN THE EYE, RINSE IMMEDIATELY AND REPEATEDLY WITH WATER AND SEEK PROMPT MEDICAL ATTENTION. IF INGESTED, CONSULT A PHYSICIAN IMMEDIATELY, DRINK WATER. CONTAINS CRYSTALLINE SILICA; CHRONIC OVEREXPOSURE TO AIRBORNE CRYSTALLINE SILICA HAS BEEN LINKED TO LUNG PROBLEMS, INCLUDING CANCER AND SILICOSIS. USE A NIOSH-APPROVED DUST RESPIRATOR. MATERIAL SAFETY DATA SHEETS AVAILABLE ON REQUEST. KEEP QUT OF REACH OF CHILDREN.

#### **CUSTOMER'S COPY**



DOSTIANC

NO

From THE MONARCH CEMENT COMPANY

AT HUMBOLDT, KANSAS

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked consigned and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each parry at any time interested in all or any of said property, that every service to be performed hereunder, shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, C2) in the applicable motor carrier classification or tariff if this is a rail or any of said property over all or any of said property over all or any of said property over all or any portion of said route to destination, and as to each parry at any time interested in all or any of said property, that every service to be performed hereunder, shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification or tariff if this is a rail or any of said property over all or any portion of said route to destination, if on its route, otherwise to eath or any of said property over all or any portion of said route to destination, if on its route, otherwise to eath or any of said property over all or any portion of said route to destination, if on its route, otherwise to eath or any of said property over all or any of said property over all or any portion of said route to destination, if on its route, otherwise to eath or any of said pro

				00211470
3000114				Subject to Section 7 of conditions, if this shipment is to be delivered to the consigner without recourse on the consignor, the consignor shall sign the following statement.  The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
				(Signature of Consignor)
				If charges are to be prepaid, write or stam here, "To Be Prepaid."
CONSIGNED TO	CLEAVER FARM & HONE 2103 SOUTH SANTA FE			
DESTINATION	CHARUTE KS 66720-3201	L		Received S
				to apply in prepayment of the charges on to property described hereon.
ROUTE				Agent or Cashier
CAR NO./TRAILER NO.		YOUR NO.		(The signature here acknowledges only the amount prepaid.)
Openstity	Description	n	Class or Rate	Charges Advanced:

PACKAGE TYPE IL-PLC CEMENT Pallets: 17 MONARCH PALLETS RETURNED:

		TYPE	SILO	LOADER	HOUR	MINUTE	SCALE			
LBS. GROSS							8			
LBS. TARE  CORRECT NET 48450.000		If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is a carrier's or shipper's weight. NOTE-Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding								
NET		THE I	MONARCI	H CEMENT (	COMPANY			AC 66749	Per	Agent
CERTIFIED SHIPPERS WEIGHTS		Perm	anent post	office address	of shipper,	HUMBO	UMBOLDT, KANSAS 66748 Pe			

SPECIAL INSTRUCTIONS

Quantity

17 PALLETS 1020,000 LB