KOLAR Document ID: 1856473

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

CONFIDENTIAL WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #		API No.:
Name:		Spot Description:
Address 1:		
Address 2:		Feet from North / South Line of Section
City: Sta	te:++	Feet from East / West Line of Section
Contact Person:		Footages Calculated from Nearest Outside Section Corner:
Phone: ()		_ NE NW SE SW
CONTRACTOR: License #		- di o coodiioni. cat, cong
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-E	Entry Workover	Field Name:
		Producing Formation:
☐ Oil ☐ WSW	SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ OG	☐ GSW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	dow	Amount of Surface Pipe Set and Cemented at: Feet
	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 (Data must be collected from the Reserve Pit)
Plug Back Liner	Conv. to GSW Conv. to Produce	Y (Data must be collected from the neserve rit)
Commingled	Permit #:	Chloride content:ppm Fluid volume: bbls
Dual Completion	Permit #:	Dewatering method used:
SWD	Permit #:	Location of fluid disposal if hauled offsite:
EOR	Permit #:	
GSW	Permit #:	Operator Name:
_		Lease Name: License #:
Spud Date or Date Read	hed TD Completion Date or	QuarterSecTwpS. R East West
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:		