

Just

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 31769
Name: Greeley Gas Company
Address: 1301 Pennsylvania Street, Suite 800
City/State/Zip: Denver, Co 80203-5015
Purchaser: _____
Operator Contact Person: Steve Mitchell
Phone: (303) 831-5685 or Cell (303) 570-3000
Contractor: Name: McLean's CP Installation
License: 32775
Wellsite Geologist: _____

Designate Type of Completion:

____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SLOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ☒ Other (Core, WSW, Expl. Cathodic etc.)

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

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
____ Deepening ____ Re-perf. ____ Conv. to Enhr/SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled ____ Docket No. _____
____ Dual Completion ____ Docket No. _____
____ Other (SWD or Enhr.?) ____ Docket No. _____

<u>4-25-2001</u>	<u>4-26-2001</u>	<u>4-28-2001</u>
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 091-22945-0000
County: Johnson
____ SE SE Sec. 8 Twp. 13 S. R. 24 ☒ East ☐ West
321 feet from S / N (circle one) Line of Section
320 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Lenexa Rectifier #1 Well #: #1
Field Name: _____

Producing Formation: _____
Elevation: Ground: 1,118' Kelly Bushing: _____
Total Depth: 250' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40' 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 400 ppm Fluid volume _____ bbls
Dewatering method used _____

Location of fluid disposal if hauled offsite: Agreement filed with Borehole Intent CB-1.

Operator Name: Olathe Aggregate Company
Lease Name: _____ License No.: KS Permit #763
Quarter NW Sec. 16 Twp. 14 S. R. 23 ☒ East ☐ West
County: Johnson Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]
Title: V.P. Technical Services Date: May 18, 2001
Subscribed and sworn to before me this 18th day of May,
2001.
Notary Public: [Signature]
Date Commission Expires: July 17, 2004

KCC Office Use ONLY

____ Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: Greeley Gas Company Lease Name: Lenexa Rectifier #1 Well #: #1
 Sec. 8 Twp. 13 S. R. 24 ☒ East ☐ West County: Johnson

INSTRUCTIONS: Show important tops and base 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. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

SEE ATTACHED LOG

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

Well has been Pre-plugged.
 Neat cement was pumped
 from the top of coke at 60'
 to the surface.

CASING RECORD ☒ New ☐ 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
Surface	14"	8"	Sch. 40 PVC	40'	Neat	32-94# of	Neat Cement

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	Anode Depths -		
	120', 130', 140', 150', 162', 176', 185', 200',		
	215', 230'.		

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. Completion Date: 4-28-2001	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

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____