

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1122397

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

CONFIDENTIAL OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

	-	-	-	-	
WELL HISTORY ·	- C	DESCRIPTION	N OF W	/ELL &	LEASE

OPERATOR: License #		API No. 15			
Name:		Spot Description:			
Address 1:			West		
Address 2:		Feet from North / South Line of a	Sectior		
City: State:	_ Zip:+	Feet from Cast / West Line of S	Sectior		
Contact Person:		Footages Calculated from Nearest Outside Section Corner:			
Phone: ()					
CONTRACTOR: License #		County:			
Name:		Lease Name: Well #:			
Wellsite Geologist:		Field Name:			
Purchaser:					
		Producing Formation:			
Designate Type of Completion:		Elevation: Ground: Kelly Bushing:			
New Well Re-Entry	Workover	Total Depth: Plug Back Total Depth:			
		Amount of Surface Pipe Set and Cemented at:	_ Fee		
Gas D&A ENH		Multiple Stage Cementing Collar Used? Yes No			
	Temp. Abd.	If yes, show depth set:	_ Feet		
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:			
Cathodic Other (Core, Expl., etc.):		feet depth to:w/	sx cmt		
If Workover/Re-entry: Old Well Info as follows	5.				
Operator:		Drilling Fluid Management Plan			
Well Name:		(Data must be collected from the Reserve Pit)			
Original Comp. Date: Original	al Total Depth:	Chloride content: ppm Fluid volume:	hhla		
Deepening Re-perf. Con	v. to ENHR Conv. to SWD				
Con	iv. to GSW	Dewatering method used:			
Plug Back:	Plug Back Total Depth	Location of fluid disposal if hauled offsite:			
Commingled Permit #:		Operator Name:			
Dual Completion Permit #:					
SWD Permit #:		Lease Name: License #:			
ENHR Permit #:		Quarter Sec TwpS. R East	_ Wes		
GSW Permit #:		County: Permit #:			
Spud Date or Date Reached TD Recompletion Date	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
Letter of Confidentiality Received
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date: