

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION



ORIGINAL

Form ACQ-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31794
Name: Anthony L. Gilliland
Address 1: 326 S. 100th Street
Address 2:
City: Edwardsville State: KS Zip: 66111 +
Contact Person: Anthony L. Gilliland
Phone: (913) 441-2728
CONTRACTOR: License # 31538
Name: HAD-A-CALL WELL SERVICE
Wellsite Geologist: None
Purchaser:

Designate Type of Completion:

- ☐ New Well ☐ Re-Entry ☒ Workover
- ☒ Oil ☐ WSW ☐ SWD ☐ SIOW
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
☐ OG ☐ GSW ☐ Temp. Abd.
☐ CM (Coal Bed Methane)
☐ Cathodic ☐ Other (Core, Expl., etc.):

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

Operator: W.R. Gross
Well Name: HOYT "B"2

Original Comp. Date: 4-26-82 Original Total Depth: 2460

- ☐ Deepening ☒ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD
☐ Conv. to GSW

- ☒ Plug Back: 2454 Plug Back Total Depth
☐ Commingled Permit #:
☐ Dual Completion Permit #:
☐ SWD Permit #:
☐ ENHR Permit #:
☐ GSW Permit #:

8-14-13 8-20-13 10-28-13
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 015-22022 - 00 - 01

Spot Description: SE/4 SE/4
SW SE SE SE Sec. 12 Twp. 26 S. R. 4 ☒ East ☐ West
313 Feet from ☐ North / ☒ South Line of Section
408 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- ☐ NE ☐ NW ☒ SE ☐ SW

County: Butler

Lease Name: Bergkamp(Hoyt) Well #: B2

Field Name: El Dorado

Producing Formation: Arbuckle

Elevation: Ground: 1375 Kelly Bushing: 1380

Total Depth: 2460 Plug Back Total Depth: 2454

Amount of Surface Pipe Set and Cemented at: 213 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 2460

feet depth to: 2454 w/ 50

KCC WICHITA

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

DEC 02 2013

RECEIVED

Chloride content: ppm Fluid volume: bbls

Dewatering method used:

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. ☐ East ☐ West

County: Permit #:

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.

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.

Signature: Anthony L. Gilliland

Title: Operator Date: 11-24-13

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: DLg Date: 12/2/13

Operator Name: Anthony L. Gilliland Lease Name: Bergkamp(Hoyt) Well #: B2
 Sec. 12 Twp. 26 S. R. 4 ☒ East ☐ West County: Butler

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 complete copy of all Electric Wire-line 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

Electric Log Submitted Electronically ☐ Yes ☐ No
 (If no, Submit Copy)

List All E. Logs Run:

WORKOVER

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

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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	12-1/4"	8 - 5/8"	24	213	Common	148	3% cc
Production	7 - 7/8"	5 1/2"	14	2460	Common	175	

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
2	2451 -2453	250 gal 7 1/2 % HCL Acid	2451-2453

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run:	
		2 3/8"	2446	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RECEIVED
Date of First, Resumed Production, SWD or ENHR. 8-22-13		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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	
	2		8			

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	2451 - 2453