

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1057028

Form ACO-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 #	API No. 15
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:	
Phone: ()	
CONTRACTOR: License #	County:
Name:	
Wellsite Geologist:	
Purchaser:	-
Designate Type of Completion:	Elevation: Ground: Kelly Bushing:
New Well Re-Entry Workover	Total Depth: Plug Back Total Depth:
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:	Amount of Surface Pipe Set and Cemented at:
Operator:	_
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Deepening Re-perf. Conv. to ENHR Conv. to SWE	Chloride content: ppm Fluid volume: bbls
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	Lease Name: License #:
SWD Permit #:	QuarterSec TwpS. R East 🗌 West
ENHR Permit #: GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date 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

	Side Two	1057028
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	

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 (Attach Additional Sheets)		Yes No]Log Formatic	on (Top), Depth an	d Datum Top	Datum	
Samples Sent to Geolog	gical Survey	Yes No		ame		юр	Datum	
Cores Taken Electric Log Run Electric Log Submitted E (If no, Submit Copy)	Electronically	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASI	NG RECORD	New Used				
		Report all strings s	set-conductor, surface,	intermediate, produc	tion, 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	

ADDITIONAL CEMENTING / SQUEEZE RECORD

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated						ement Squeeze Record of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packe	r At:	Liner R	un:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	ł.	Producing M	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	s.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:			METHOD OF COMPLETIC		ETION:		PRODUCTION INTERVAL:			
Vented Sold Used on Lease			Open Hole	Perf.	Uually (Submit /	Comp. ACO-5)	Commingled (Submit ACO-4)			
(If vented, Sul	bmit ACC)-18.)		Other (Specify)						

Form	ACO1 - Well Completion
Operator	Cholla Production, LLC
Well Name	Kyte-Jording 3-14
Doc ID	1057028

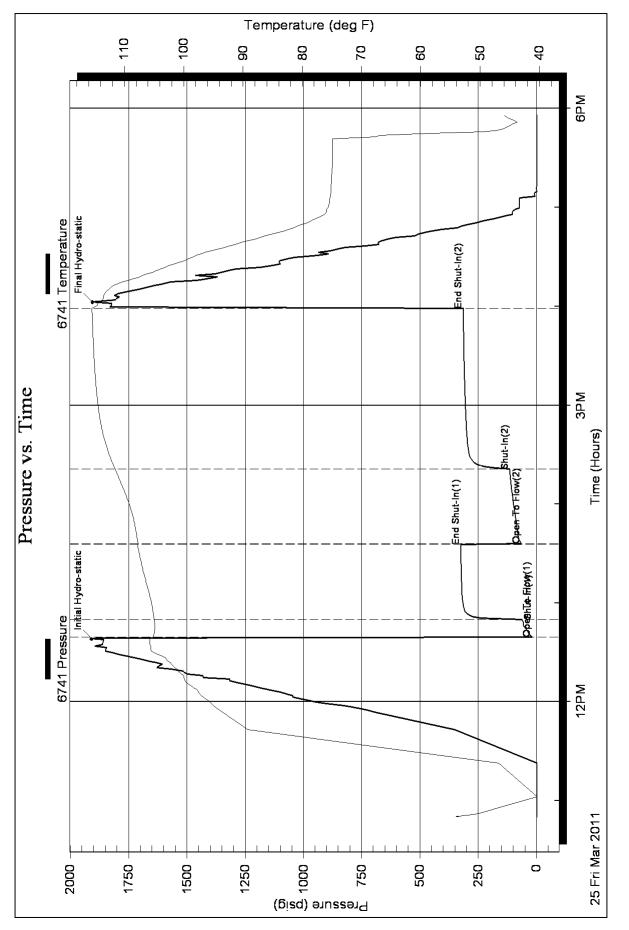
All Electric Logs Run

Dual Induction
Borehole Compensated Sonic
Microlog
Compensated Neutro Density

	DRILL STEM	TES	TREPO	ORT				
RILOBITE	Cholla Production			Ky	Kyte-Jording 3-14			
ESTING , INC	7851 S. Elati St. Ste 201			14	14 2s 30w Decatur Ks			
				Job	Ticket: 04	10758	DST	#:2
	ATTN: Bill Goff			Tes	t Start: 20)11.03.25	5 @ 10:50:00	0
GENERAL INFORMATION:	ł							
Formation:LKC-BDeviated:NoWhipstock:Time Tool Opened:12:39:00Time Test Ended:17:55:30	ft (KB)			Tes	ter: (onal Bottom eutzer Jr.	Hole
Interval:3796.00 ft (KB) To3Total Depth:3840.00 ft (KB) (THole Diameter:7.88 inches Ho				Ref	erence Ele KB t	evations: o GR/CF:	2799.	00 ft (KB) 00 ft (CF) 00 ft
Serial #: 6741 Outside Press@RunDepth: 115.43 psig Start Date: 2011.03.25 Start Time: 10:50:01	End Date: End Time:		2011.03.25 17:55:30	Capacity Last Cali Time On Time Off	b.: Btm: 2		8000. 2011.03. 25 @ 12:38: 25 @ 16:02:	00
			nins.					
Pressure vs.					RESSUR			
000 1700 1200 1000 1200 1000 1200 1000 1		Temperature (deg F)	Time (Min.) 0 1 22 57 58 103 201 205	Pressure (psig) 1906.72 19.65 61.44 324.00 65.43 115.43 313.58 1904.21	107.66	Open T Shut-Ini End Shu Open T Shut-Ini End Shu	vdro-static o Flow (1) (1) ut-In(1) o Flow (2) (2)	
Recovery					Ga	s Rates		
Length (ft) Description	Volume (bbl)	_			Choke (i	nches) Pr	essure (psig)	Gas Rate (Mcf/d)
120.00 mcw - 10% m90% w	0.59	_						
62.00 w cm-40% w 60% m 1.00 oil-100%	0.87	\dashv						
	0.01							
		_						
Trilobite Testina. Inc	Ref. No: 040758					0044.00	.25 @ 20:53	

		DRI	LL STEM TEST REPOR	RT	F	LUID SUMMARY
	RILOBITE ESTING , INC.	Cholla	Production	Kyte-Jord	ing 3-14	
ESTING, INC.		7851 S	B. Elati St. Ste 201		Decatur Ks	
				Job Ticket: (DST#:2
		ATTN:	Bill Goff	Test Start: 2	2011.03.25 @ 10:	50:00
Mud and Cushi	on Information					
Mud Type: Gel Ch			Cushion Type:			deg API
Mud Weight: Viscosity:	9.00 lb/gal 49.00 sec/qt		Cushion Length: Cushion Volume:	ft bbl	Water Salinity:	13000 ppm
Water Loss:	7.20 in ³		Gas Cushion Type:	וממ		
Resistivity:	ohm.m		Gas Cushion Pressure:	psig		
	100.00 ppm 2.00 inches					
Recovery Infor	mation					
-			Recovery Table			
	Lengt ft	th	Description	Volume bbl		
		120.00	mcw-10%m90%w	0.590	5	
		62.00	w cm-40%w 60%m	0.870		
		1.00	oil-100%	0.014	4	
	Total Length:	183	.00 ft Total Volume: 1.474 b	bl		
	Num Fluid Samp	les: 0	Num Gas Bombs: 0	Serial #	:	
	Laboratory Nam		Laboratory Location:			
	Recovery Com	nents:				





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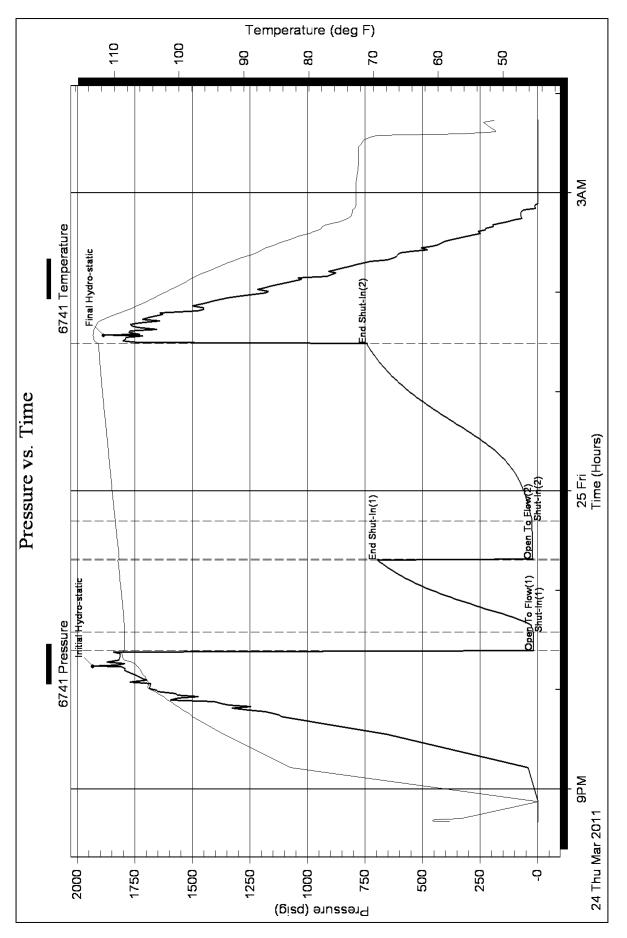
Ref. No: 040758

Trilobite Testing, Inc

an-	RILOBITE	DRILL STEM TES	ORT					
	I RILUDITE	Cholla Production	Ky	Kyte-Jording 3-14				
翻	ESTING , INC	7851 S. Elati St. Ste 201		14	2s 30w I	Decatu	ır Ks	
				Job	Ticket: 04	10757	DST	'#:1
		ATTN: Bill Goff		Tes	t Start: 20)11.03.24	4 @ 20:40:0	0
GENERAL IN	IFORMATION:							
Formation: Deviated: Time Tool Opene Time Test Ended		ft (KB)		Tes	ter: (onal Bottom eutzer Jr.	Hole
Interval: Total Depth: Hole Diameter:	3738.00 ft (KB) To 38 3810.00 ft (KB) (T 7.88 inchesHole			Ref	erence Ele KB t	evations: o GR/CF	2799	.00 ft (KB) .00 ft (CF) .00 ft
Serial #: 674 Press@RunDep Start Date: Start Time: TEST COMM		End Date: End Time:	2011.03.25 03:44:00	Capacity Last Cali Time On Time Off	b.: Btm: 2		8000. 2011.03 24 @ 22:14 25 @ 01:34	:00
	ISI: No blow bac FF: No blow ove FSI: No blow bac Pressure vs. 1	k over 45 mins. er 20 mins. ck over 90 mins.			RESSUR			
2000	6741 Pressure	6741 Temperature	Time	Pressure	Temp			
1760			(Min.) 0	(psig) 1931.67	(deg F) 106.46	Initial H	ydro-static	
1600		- 100	10	1931.07	108.40	· ·	o Flow (1)	
E /	7 11 11		21	18.90	108.42			
			64	694.47 20.41		End Sh Open T	o Flow (2)	
			00 88 195	23.42	109.83	Shut-In	(2)	
		70 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	195 200	737.82 1886.21	112.43 113.26		ut-In(2) /dro-static	
9PM 24 Thu Mar 2011	25 Fri Time (Hours)	ЗАМ						
Recovery				Gas Rates				
Length (ft)	Description	Volume (bbl)			Choke (i	nches) Pr	essure (psig)	Gas Rate (Mcf/d)
10.00	ocm-10%o90%m	0.05						
Trilobite Test		Ref No: 040757					25 @ 08.26	

100		DRI	ILL STEM TEST REPOR	Г	FLUID SUMMARY	
	RILOBITE	Cholla	Production	Kyte-Jording 3-14		
TESTING , INC		7851 S	S. Elati St. Ste 201	14 2s 30w Decatur k	(s	
				Job Ticket: 040757	DST#:1	
		ATTN:	: Bill Goff	Test Start: 2011.03.24 @	20:40:00	
Mud and C	Cushion Information					
Mud Type: Mud Weight: Viscosity: Water Loss: Resistivity: Salinity: Filter Cake:	Gel Chem 9.00 lb/gal 54.00 sec/qt 6.80 in ³ ohm.m 700.00 ppm 2.00 inches		Cushion Type: Cushion Length: Cushion Volume: Gas Cushion Type: Gas Cushion Pressure:	Oil API: ft Water Salini bbl psig	deg API ty: ppm	
	Information					
			Recovery Table			
	Leng ft	th	Description	Volume bbl		
		10.00	ocm-10%o90%m	0.049		
	Total Length:		0.00 ft Total Volume: 0.049 bbl			
	Num Fluid Samp Laboratory Nan		Num Gas Bombs: 0 Laboratory Location:	Serial #:		
	Recovery Com	ments: Sa	ampler Pressure 60, oil 1000ml. mud-2000	0 ml.		





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Ref. No: 040757

Trilobite Testing, Inc

-		-	W.E	S. GH.P.		TI T NUME	ER 30	1794
	NSOLIDATI		thu			LOCATION	Ocilley	-
Qi	Well Services, I	LLC				FOREMAN	Walt D	
O Box 884, Cha	nute, KS 66720	FIEL	DTICKET	& TREA	TMENT REP	PORT		
20-431-9210 or	800-467-8676			CEMEN				
DATE	CUSTOMER#	WELL	NAME & NUME	BER	SECTION	TOWNSHIP	RANGE	COUNTY
3-21-11	2582	Kyte-Jo	aling :	3-14	14	25	300	Decator
Cho 1)	D. A I	·		obulin	TRUCK #	DRIVER	TRUCK #	DRIVER
AILING ADDRES	s Product	ica, Lus		50	463	miles Sh		
7851 5.	Flati St.	5.4.20	a l	31	439	Tim work		
ITY	Flan ST	ATE	ZIP CODE	1/20	127	Cecil R	akac	
Little ton		Cole	80120	1254		- Cerri Is	T'CRI	
OB TYPE SU			214	HOLE DEPTH	1 2.59'	CASING SIZE & V	VEIGHT 85%	- 23#
ASING DEPTH_		ILL PIPE		TUBING			OTHER	
LURRY WEIGHT	Provide and the second s	URRY VOL		WATER gal/s	sk	CEMENT LEFT in	CASING 1.5	-20'
ISPLACEMENT		PLACEMENT	PSI	MIX PSI		RATE 57	RPm	
	c Fety Mag			to eive		Visine.		
	mixed				-2%6			
	Nicologia	D IE	In RR.		Shut in			
	Displaced	- us	7 00C	1201	Jart IL			
		Cene	+ Diel	Cive.				
		CAR BATTA	- Grice					
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			4 2					
							_	
ACCOUNT	QUANITY or I	UNITS	DE	SCRIPTION o	f SERVICES or P	RODUCT	UNIT PRICE	TOTAL
54015	1		PUMP CHARO	F			Al	100 million
5406	50		MILEAGE	26				e -
11045		SV-		A Can	t			
1102	190 534 #			in Ch			1	
11183	356#			toraite				
5407A	8.93		Ta Ma	7.	Delivery		1.31	1
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12vin 3737		ESTIMATED
AUTHORIZTION The Offe	A TITLE Ind Pusher	DATE 3-21-2011

AUTHORIZTION That Volat

TITLE I al Purper

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

sr 28 11 11:1:	2a Consolidated C					
		0		-	30	721
CO.	NSOLIDATED					
	Well Services, LLC			LOCATION	Ockloy	
A Contraction				FOREMAN	Lie It I	mart
Box 884, Cha	nute, NS 00/20	FIELD TICKET & TREA		UKI		11.
	800-467-8676	CEME	N I SECTION	TOWNSHIP	RANGE	COUNTY
DATE		WELL NAME & NUMBER		5		N. 1
3-27-11	2582 Kyt	2-Jenling 3-14	14	1. 2-	300	Decetu
C) 11	Dr. O tu	lic	TRUCK#	DRIVER	TRUCK #	DRIVER
ILING ADDRES	s producerio	ty con	463	milas ski	6. V	
7851 5	Elatert Si	1. 201	439	Jesh Luc	Colo .	
TY III	STATE	ZIP CODE	528-127	Cecil P	erker	
Littet	Cale	\$0120				
B TYPE Pro	1-DV-O HOLE SIZE	TTIS HOLE DEP	TH 4030'	CASING SIZE & V	NEIGHT 44	-14.5th
SING DEPTH	40.291 DRILL PIP	ETUBING			OTHER DY -	2551
	13.8-12.5 SLURRY V	/OL WATER ga	al/sk	CEMENT LEFT in		1.31
PLACEMENT_	641/2 DISPLACE	EMENT PSI MIX PSI			3pm	
MARKS: <	at the Mertin	, Run Floct Eq	up, Cent	14/12 23 4	in 1-3-5	-7-9
-37. Ba	destau 39. D	V tool on TADOF	33. Cur	45 MILL CIL	20 10000	
Puring	1 Foodal 17.	I Flored LUIVAA	FIN SKED	LUC, CLOGI	COV TO MOD	+ Luisas
Troplac	od 22 BBL	Had + 41 BBL mue	1 2.550 7	Landod Y	109 2120	10#
Telon						
1 - 186 6	O FREZZEVE	Floct Hebl				
	DV Tool Cur	4.5 min .			. 75	
O per	DV Tont Cure 20 skalin R.	4.5 min.	sks Elde pe	2.8%641,4	4#Flo-Sac	(
O per	DV Tont Cure 20 skalin R.	4.5 min.	5K5 6942 pa	2, 8% 62 (U	A # Flo-Soc	1 2000 #
O per	DV Torl Cure 30 sks in R. ed Plus & Dis	4.5 min .	sks & 40 pc H_20 2 850	2 8%64 (U # Lond	ect Plus 2	2000 #
Open Mixed reless	DV Torl Cure 30 sks in R. ed Plus & Dis	4.5 min.	sks & 42 pc H20 2 850	2. 8% Leind	ect Plus 2	1 2000 Ht
Open Maryer relessi Comus	DV Torl Cure 30 sks in R. ed Plus & Dis	4.5 min 4.5 min H. MIXed 520- placed 40 BBL	SKS (940 per Hol 2 8:50	Thomas - Thomas	ect Plus 2	2000 #
Open Mined Telessi Comes Account CODE	DV Torl Cur 30 sks in R. ed Plus & Disj of Did Cure	4.5 min. W WIXED 520- placed 40 BBL DESCRIPTION	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
Open Mixed Telessi Comus Account code 5401P	DV Torl Cinc 30 SKS in R. ed Plug & Dis at Did Circ QUANITY or UNITS	4.5 min. Wixed 520- placed 40 B& DESCRIPTION PUMP CHARGE	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
Open Maryen relessi Comun code 5401P 5406	DV Torl Cinc 30 SKS in R. ed Pling & Disj of Did Circ QUANITY or UNITS 1 50	4.5 min WIXED 52C-S placed 4C BBL DESCRIPTION PUMP CHARGE MILEAGE	H20 2 850	Thomas - Thomas	led Plus 2	2000 #
Open Mixed relessi Comus Account code 5401P 5406 1126	DV Torl Cinc 30 sks in R. ed Plug & Dis at Did Circ QUANITY or UNITS 1 50 120 sks	4.5 min. Wixed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
0 pen Maryed Felessi Contra Co	DV Torl Cinc 30 SKS in Ri ed Pling & Disj of Did Circ QUANITY OF UNITS 1 50 120 SKS 550 - SKS	4.5 min. WIXED 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE DILLC 69/40 DE2	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
0 pen Maryen relessi Comu account code 5401P 5406 1126 1126 1131 1118 B	DV Torl Cinc 30 SKS in Ri 20 SKS in Ri 20 Pling & Disj 21 Dia Cinc QUANITY or UNITS 1 50 120 SKS 550 - SKS 3784 #	4.5 min H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE DIC 6/kic poz 1 Bardonita	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
0 pen Mixed reless Comu Comu seless Comu seless Comu seless 10 10 11 11 11 11 11 11 10 7'	DV Torl Cinc 30 SKS in R. ed Plus & Disj of Did Circ QUANITY or UNITS 1 .50 120 SKS .550 - SKS .3784 # 1.38 #	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CILIC bykin poz 1 Bertowitz Flactoritz	H20 2 850	Thomas - Thomas	led Plus 2	2000 H
0 pen Maryen relessi Contra code 5401 P 5406 1126 1126 1128 1107 1107 11446	DV Torl Cinc 30 5ks in R ed Plus & Disj of Did Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 ccl	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CUC Eggio DE2 Eggio DE2 Flaced 4 MUC Elush	Hol 2 850	Thanky RODUCT	led Plus 2	2000 H
0 pex Maryed reless Contra code 5401 P 5406 1126 1126 1128 1107 1107 11446 5407 A	DV Torl Cinc 30 SKS in R. ed Plus & Disj of Did Circ QUANITY or UNITS 1 .50 120 SKS .550 - SKS .3784 # 1.38 #	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CIJC 69/kic poz Elecset Flesset MILEAGE	Hol 2850	Thanky RODUCT	led Plus 2	2000 H
0 pen MAILER FELESSI COME ACCOUNT CODE 5401 P 5406 1126 1126 1126 1127 1107 1107 1107 11446 5402A 4161	DV Torl Cinc 30 5ks in R ed Plus & Disj of Did Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 ccl	4.5 min. H. MIXed 52C- placed 4C BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CLIC 5940 DOZ 1 Baiotosuita Flasse 1 MUCO Flash Ten Malage 41/2 Floot	Holo 2850 Not SERVICES or P Deluses	Thanky RODUCT	led Plus 2	2000 H
0 pex Maryed reless Contres Contres Store 5401 P 5406 1126 1126 1126 1127 1183 1107 11446 5402A 4161 4129	DV Torl Cinc 30 5ks in R ed Plus & Disj of Did Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 ccl	4.5 min. H. MIXed 52C-S placed 4C BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CIJC 69/40 poz 1 Beitosite Flo Sec 1 Mucli Flosh Ten Mileage 41/2 Floct H&Control 1/20	Holo 2850 Not SERVICES or P Deluses	Thanky RODUCT	led Plus 2	2000 H
0 pex Maryed Felessi Contra Contra Contra Contra Contra Contra Star Star Star 126 1126 1126 1126 1126 1127 1188 1107 11446 5402A 4161 4129 4163	DV Torl Cinc 30 5ks in R. 20 5ks in R. 20 Plug & Disj at Dia Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 901 29.29 1 6 1	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CILIC Eggio pozi Beiotosite Flashe Ten Mulage 41/2 Fleet 41/2 Fleet 41/2 Fleet	Holo 2850 Nof SERVICES or P Deluser Shee -5	Thenky RODUCT	led Plus 2	2000 H
0 pen MAILEN Felessi Conte ACCOUNT CODE 5401P 5406 112E 1131 112E 1131 112E 1131 1107' 11446 5402A 4161 4129 4314	DV Torl Cinc 30 5ks in R ed Plus & Disj of Did Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 ccl	4.5 min. H. MIXed 52C placed 4C BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE CIJC bykin poz Elecsel Flessel Ten Milease 41/2 Fleet 41/2 Fleet 41/2 Fleet 41/2 Fleet 41/2 Rester 41/2 Rester 41/2 Rester	Holo 2850 Not SERVICES or P Deluser Shee -5 -5	Thenky RODUCT	led Plus 2	2000 H
0 pex Maryed Felessi Contre Contre Contre Contre Stach 126 1126 1126 1126 1126 1126 1127 1188 1107 1188 1107 11446 54024 4161 4129 4161 4129 4314	DV Torl Cinc 30 5ks in R. 20 5ks in R. 20 Plug & Disj at Dia Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 901 29.29 1 6 1	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE MILEAGE CILIC 69/40 poz 1 Beietosuite Flasar Flasar Hiscarta 1120 Hiscarta 1120 Histarta 1120	Hol 2850 Not SERVICES or P Deluser Shae -5 -5	Thenky RODUCT takes	led Plus 2	2000 H
0 pen MAILEN Felessi Conte ACCOUNT CODE 5401 P 5406 1126 1126 1126 1126 1127 118 B 1107 1107 1107 1107 1107 1107 4161 4129 4161 4129 4314	DV Torl Cinc 30 5ks in R. 20 5ks in R. 20 Plug & Disj at Dia Circ QUANITY or UNITS 1 50 120 5ks 550 - 5ks 3784 # 138 # 500 901 29.29 1 6 1	4.5 min. H. MIXed 520- placed 40 BBL DESCRIPTION PUMP CHARGE MILEAGE MILEAGE MILEAGE CILIC 69/40 poz 1 Beietosuite Flasar Flasar Hiscarta 1120 Hiscarta 1120 Histarta 1120	Holo 2850 Not SERVICES or P Deluser Shee -5 -5	Thenky RODUCT takes	led Plus 2	2000 H
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I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner Sam Brownback, Governor

July 19, 2011

Emily Hundley-Goff Cholla Production, LLC 7851 S ELATI ST STE 201 LITTLETON, CO 80120-8081

Re: ACO1 API 15-039-21129-00-00 Kyte-Jording 3-14 NE/4 Sec.14-02S-30W Decatur County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully, Emily Hundley-Goff