

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1077769

Form ACO-1 August 2013 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:	Footages Calculated from Nearest Outside Section Corner:				
Phone: ()	□NE □NW □SE □SW				
CONTRACTOR: License #	GPS Location: Lat:, Long:				
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-Entry ☐ Workover	Field Name:				
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:	Producing Formation: Elevation: Ground: Kelly Bushing: Feet Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet				
Operator:	If Alternate II completion, cement circulated from: sx cmt.				
Well Name: Original Comp. Date: Deepening Re-perf. Conv. to ENHR Conv. to SWD Plug Back Conv. to GSW Conv. to Producer Commingled Permit #: Dual Completion Permit #:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls Dewatering method used:				
SWD Permit #:	Location of fluid disposal if hauled offsite:				
☐ ENHR Permit #: ☐ GSW Permit #:	Operator Name: License #:				
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	Quarter Sec. Twp. S. R. East West 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						
Geologist Report Received						
UIC Distribution						
ALT I II Approved by: Date:						

Page Two



Operator Name:				Lease N	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
	ow important tops of fo ing and shut-in pressu o surface test, along wi	res, whe	ther shut-in pre	ssure reacl	hed stati	c level, hydrosta	tic pressures, bo			
Final Radioactivity Logilles must be submitted						gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.go	v. Digital	electronic log
Drill Stem Tests Taken Yes (Attach Additional Sheets)			es No		Log Formation (Top), Dept					Sample
Samples Sent to Geol	ogical Survey	Ye	es 🗌 No		Nam	9		Тор	L	Datum
Cores Taken Electric Log Run			Yes No							
List All E. Logs Run:										
			CASING	RECORD	│ Ne	w Used				
		Repo				rmediate, producti	on, etc.			
Purpose of String	Size Hole Drilled		e Casing t (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
Purpose	Depth					EEZE RECORD				
Purpose: Perforate	Top Bottom	Туре	Type of Cement # Sacks Used			Type and Percent Additives				
Protect Casing Plug Back TD										
Plug Off Zone										
Did you perform a hydrau	ilic fracturing treatment or	this well?	?			Yes	No (If No, sk	ip questions 2 ar	nd 3)	
	otal base fluid of the hydra		•		•			ip question 3)		
Was the hydraulic fractur	ing treatment information	submitted	to the chemical of	disclosure reg	gistry?	Yes	No (If No, fil	out Page Three	of the ACC)-1)
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set Specify Footage of Each Interval Perforated					Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth				Depth	
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or ENH	R.	Producing Meth Flowing	nod:	g \square	Gas Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil Bl	bls.	Gas	Mcf	Wate	er Bl	ols.	Gas-Oil Ratio		Gravity
DIODOGITI	ON OF CAC			ACTUOD OF	COMPLE	TION		DDODUGT		
Vented Sold	ON OF GAS: Used on Lease		N Open Hole	NETHOD OF \Box Perf.	Dually	Comp. Con	nmingled	PRODUCTIO	λιν ιίΝ Ι ΕΚ\	/AL:
	(Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)									

JTC Oil, Inc.

Drillers Log

Well Name Russell BSP RL 2

API# 15 15-059-25862-00-00 Cement Amounts Surface Date 12/21/11 20 ft 6.5 <u>3 Sacks</u>

Cement Date 12/29/11

Well Depth 700

Casing Depth 685

Drillers Log

<u>Formation</u>	Drillers Depth	Formation	<u>Depth</u>
top soil	0		
lime	1		
shale	9		
lime	97		
shale	116		
lime	137		
red bed	145		
shale	153		
lime	187		
shale	203		
lime	212		
shale	270		
coal	273		
lime	275		
shale	287		
lime	437		
shale	442		
lime	452		
shale	472		
lime	517		
shale	524		
lime	5551		
shale	566		
top oil sand	596-598 broken		
	598-601 good		
	601-604 v good		
	604-606 v good		
	606-608 v good		
	608-610 good		
	610-612 good		
	612-614 ok		

614-616 broken

616-618 shale

shale

616

#2 oil sand

667-668 sand- no oil

668-669 no oil

669-670 no oil

670-671 no oil

671-674 no oil

shale

670

stop drilling

700

casing pipe

685



TICKET NUMBER LOCATION ON FOREMAN

	nanute, KS 6672 or 800-467-8676		LD HOREI	CEMEN'		OKI		
DATE	CUSTOMER#	WELL NAME & NUMBER			SECTION	TOWNSHIP	RANGE	COUNTY
12/29/11	2579	Russe	し些級	BSP.RLZ	SE 17	18	21:	FR
CUSTOMER	Po-		7		TDLIOK#	7 200/00		
MAILING ADDRE	erjer Res	Ouvees .	Luc.		TRUCK#	DRIVER	TRUCK#	DRIVER
1097	F 6	, X,			506	FREMAO	Safely	ntz.
CITY	3 brand	STATE	ZIP CODE		495	HARBEC	. 0	0
		10000000	66210		369	DERMAS		
	nd Park	KS	-		548	RYASIN		
JOB TYPE LO	ct. I	HOLE SIZE		HOLE DEPTH	695	CASING SIZE & W	IEIGHT 276	EUE
CASING DEPTH		DRILL PIPE		TUBING			OTHER	<u> </u>
SLURRY WEIGH		SLURRY VOL_		WATER gal/sl	·	CEMENT LEFT in	CASING 25"	plue
DISPLACEMENT	, .	DISPLACEMEN		VIIX PSI		RATE 4BP		
REMARKS: C	heck cas	my dep	thin/w.	've Ino	Mixa	Pump 100	of Prom	in
(sel	+lush.	Phix+	ump 17	10 SKS	70/30	Λ .	x (emili)	
2%		Salt 1/2	# phend	Seal /	sk. Cen	und to s	ostoce.	-
Flu	sh pum	p + line	3 clear	1. Di	Splace	22" Rub	berplug	
to	casky	TO W/	4 BBL	Fresh	water.	Pressure ?	1 111	
Roled	ese pros	sure +	o Sex f	load Va	lue, 5 W	it in Cash		
	/							
		4				,		
J7	C Drilling				•	F-ul mad	lee	
	4					· .	•	
ACCOUNT CODE	QUANITY	or UNITS	DES	CRIPTION of	SERVICES or PF	RODUCT	UNIT PRICE	TOTAL
5401			PUMP CHARGE			495		103000
5406		Zomi	MILEAGE			495		8000
5402	-6	87	Casing	Lootac	2			N/C
5407	名Minin	Lord	Ton 1	nilos	,	548		17500
55020		をhv.	80 BB	L Vae	Truck	369		/3500
								735
								,
1127		10 513	70/30	Por Mi	x Cened	<u>′</u>		139700
1118-B	ő	294	Premie	om al				6134
1111	223	5	Gnous	laxed.	Salt			5251
1107 A		55#	Pheus 25'Rul	Seal	,			70 95
4402		1	25'RUL	bber p	luc			2800
				7	O			

7.870 SALES TAX Ravin 3737 ESTIMATED TOTAL AUTHORIZTION_ TITLE_ DATE_

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/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

April 04, 2012

Marcia Littell Enerjex Kansas, Inc. 27 CORPORATE WOODS, STE 350 10975 GRANDVIEW DR OVERLAND PARK, KS 66210

Re: ACO1 API 15-059-25862-00-00 Russell BSP-RL2 SE/4 Sec.17-18S-21E Franklin 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, Marcia Littell