Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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:	SecTwpS. R 🔲 East 🗌 West
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 #	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:
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: Feet Multiple Stage Cementing Collar Used?
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 SWD Conv. to GSW Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec. Twp. S. R. East West
GSW Permit #:	County: Permit #:
Spud Date or Date Reached TD Completion Date or 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

KCC Office Use ONLY		
Letter of Confidentiality Received		
Date:		
Confidential Release Date:		
Wireline Log Received		
Geologist Report Received		
UIC Distribution		
ALT I III Approved by: Date:		

Operator Name:			Lease N	Name:			_Well #:	
Sec Twp	S. R	East West	County	:				
INSTRUCTIONS: Sho time tool open and clos recovery, and flow rate line Logs surveyed. At	sed, flowing and shut s if gas to surface tes	in pressures, whethe st, along with final cha	r shut-in pres	sure reache	d static level,	hydrostatic press	sures, bottom h	nole temperature, flu
Drill Stem Tests Taken (Attach Additional S	heets)	Yes No		Log	Formation	n (Top), Depth ar	d Datum	Sample
Samples Sent to Geolo	ogical Survey	Yes No		Name			Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy)		Yes No Yes No Yes No						
List All E. Logs Run:								
		CASIN Report all strings s	NG RECORD et-conductor, su	New urface, interm	Used ediate, producti	on, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weig	ght	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		, ,			•			
		ADDITION	IAL CEMENTIN	NG / SQUEF	7F RECORD			
Purpose:	Depth Type of Cement # Sack		# Sacks					
Perforate Protect Casing	Top Bottom							
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				
TUBING RECORD:	Size:	Set At:	Packer A	t: L	iner Run:	☐ Yes ☐ No		
Date of First, Resumed F	Production, SWD or ENF	HR. Producing M	Method:	g Ga	s Lift C	other (Explain)		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf	Water	Bl	ols.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF GAS:		METHOD OF	COMPLETION	ON:		PRODUCTIO	ON INTERVAL:
Vented Sold	Used on Lease	Open Hole	Perf.	Dually Co		nmingled mit ACO-4)		
(If vented, Subi	mit ACO-18.)	Other (Specify)		(Gabinit ACC	oudi —	100-4)		

Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	Atwell Family Trust 1
Doc ID	1095791

Tops

Name	Тор	Datum
Anhy.	1988	+ 651
Base Anhy	2012	+ 626
Heebner	3950	-1311
Lansing	3988	-1349
ВКС	4312	-1673
Marmaton	4354	-1715
Pawnee	4439	-1800
Ft. Scott	4494	-1855
Cherokee Sh.	4522	-1883
Miss. Porosity	4612	-1704
LTD	4665	-2026

Summary of Changes

Lease Name and Number: Atwell Family Trust 1

API/Permit #: 15-135-25400-00-00

Doc ID: 1095791

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	10/01/2012	10/03/2012
Field Name		Wildcat
Producing Formation	Mississippian	None
Purchaser's Name		None
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 93875	//kcc/detail/operatorE ditDetail.cfm?docID=10 95791

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