CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1097316

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:	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:
Oil WSW SWD SIOW Gas D&A ENHR SIGW OG GSW Temp. Abd. CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Amount of Surface Pipe Set and Cemented at: Feel Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feel If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name: Lease Name: Quarter Sec TwpS. R Description: County:
Spud Date or Recompletion Date Date Reached TD 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:					

1097316

Operator Name:	:			Lease Name:	Well #:
Sec Tw	/p	S. 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) Samples Sent to Geological Survey Cores Taken Electric Log Run		Yes	No	[Log Formation (Top), D			l Datum	Sample
		☐ Yes ☐ Yes ☐ Yes	No No No		Name	2		Тор	Datum
Electric Log Submitted E (If no, Submit Copy)	liectronically	Yes	No						
List All E. Logs Run:									
				RECORD	Ne				
		Report all	strings set-c	onductor, surface	e, inte	rmediate, production	on, etc.	-	
Purpose of String	Size Hole Drilled	Size Cas Set (In C		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:		Packer	r At:	Liner F	Run:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	λ .	Producing M	1ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD O			OF COMPLE	TION:		PRODUCTION IN	TERVAL:			
Vented Sold Used on Lease		Open Hole Perf. Dually			Comp. Commingled ACO-5) (Submit ACO-4)					
(If vented, Submit ACO-18.)				Other (Specify)						

Summary of Changes

Lease Name and Number: KARLIN 7 API/Permit #: 15-051-26292-00-00 Doc ID: 1097316 Correction Number: 1 Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Additional Type And Percent Additive		60/40-3%cc
Approved By	NAOMI JAMES	Deanna Garrison
Approved Date	10/08/2012	10/17/2012
Cementing Purpose Protect Casing	No	Yes
CementingDepth1_PDF	-	1430-0
CementingDepthBase1		0
CementingDepthTop1		1430
If Alternate II Completion - Cement	3740	1430
Circulated From Number Of Sacks Used for Cementing /		245
Squeezing- Line 1 Perf_Material_1		300 gal - 15% NE

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Perf_Material_2		500 gal - 15% NE
Perf_Material_3		400 gal mud acid - 15%
Production - Oil Gravity		22
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10	//kcc/detail/operatorE ditDetail.cfm?docID=10
Tubing Record - Set At	95700	97316 3732
Tubing Size		2 7/8
Type Of Cement Used for Cementing / Squeezing - Line 1		common