Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1118097

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 Dorth / 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 #	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:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	
	Location of fluid disposal if hauled offsite:
ENHR Permit #: GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East _ West
Recompletion Date Reached TD Recompletion Date of Recompletion Date	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 III Approved by: Date:

	Page Two	
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken (Attach Additional Shee	ets)	Yes No		C C	on (Top), Depth ar		Sample
Samples Sent to Geologic	cal Survey	Yes No	Nam	le		Тор	Datum
Cores Taken Electric Log Run		Yes No				Top Datum # Sacks Type and Percent Additives Used Additives I I I I	
List All E. Logs Run:							
		CASING Report all strings set-o		ew Used	ion etc		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement		
		ADDITIONAL	CEMENTING / SQU	JEEZE RECORD			

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

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No (If No, skip questions 2 and 3) (If No, skip question 3)

No

No

(If No, fill out Page Three of the ACO-1)

Shots Per Foot		PERFORATION Specify For		RD - Bridge F Each Interval		e	A		ement Squeeze Record	Depth
TUBING RECORD:	Siz	re:	Set At:		Packer	r At:	Liner Ru	un:	No	
Date of First, Resumed	Producti	on, SWD or ENHF	} .	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
				1						
	_			Open Hole	METHOD		TION: Comp.	Commingled	PRODUCTION IN	TERVAL:
Vented Sold		Jsed on Lease		Open noie	Fen.	(Submit)		(Submit ACO-4)		
(If vented, Sul	omit ACO	-10.)		Other (Specify)					

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

скет 5 А	CUSTOMER ORDER NO.:	WELL NO.					AM 4:40		PM 5:45	or services, materials, and/or conditions shall	ACTOR OR AGENT)	\$ AMOUNT	2 850 00	322.00	652 05	160 00	21 25	00 00	1 000 00	226 00	250 00	175 00			H. 3860. 83			Course	AGENT)
FIELD SERVICE TICKET 1718 07415 TICKET NO.		1-29	STATE KS	skychi. Phy	scafe	ED 12-17-12	JOB		RELEASED MILES FROM STATION TO WELL	e is delivered). edges that this contract f ional or substitute terms.	NED: (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)	UNIT PRICE														%TAX ON \$ %TAX ON \$	Yes TOTAL	the day	(WELL OWNER OPERATOR CONTRACTOR OR AGENT)
17 Date		110	7	allivan, c	8 -15 S	TRUCK CALLED	ARRIVED AT JOB START OPERATION	FINISH OPERATION	RELEASED MILES FROM	ced or merchandis prees and acknowle ocument. No addit	SIGNED: (WELL OWNE	QUANTITY	240	60	621	/	5	10	16	240	/	1				%TA) %TA)	Thank	ED BY:	OWNER OPERAT
		B. 39	PRAM	E CREW S	0	HRS				ob is commenc indersigned ag i back of this d		UNIT	XS	16	16	54	en.	1010	WL S	4V	13	ER				QUIPMENT		SERVICE ND RECEIVE	(WELL (
Hwy. 61 613 ass 67124 672-1201	NEW D	LEASE	COUNTY	SERVICE CREW	JOB TYPE:	EQUIPMENT#				CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a new difference of Basic Energy Services LP.	6	EQUIPMENT AND SERVICES USED														SERVICE & EQUIPMENT MATERIALS		THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:	
10244 NE Hwy. 61 P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201	7 40	00				# HRS				(This contract m s an agent of the s and conditions f an officer of Ba		IENT AND SE				Self.				000	40							THE AB	
SERVICES PING & WIRELINE	DISTRICT PRAT	Well Sen		STATE		EQUIPMENT#	art.			The second secon		MATERIAL, EQUIPN	101.7 0.2	a come	childer do	comp Plus	1	and ma	Deleg	(ment o	1 the Real	Supreces			DATA:			1111	- Jul 1 m
	21-61.	PRAT			*	# HRS	820 30 X60 20			COI 1 is authorized to pplies includes a			Lolas 1	Co 11 Fak	Calcus	wooder	Quek 2 0	Hear E	Balk	110/ 4h	Ole . C.	Selus			CHEMICAL / ACID DATA			E DI	ORDER NO.
	DATE OF JOB /2 -	CUSTOMER	ADDRESS	СІТҮ	AUTHORIZED BY	EQUIPMENT#	33708- 198	37900		The undersigned products, and/or su		ITEM/PRICE	02100	CC 102	CC 109	CF 153	5 100	2 101	5 113	CE 200	4 500	0			CHI			SERVICE REPRESENTATIVE	FIELD SERVICE ORDER NO

TICKET		CUSTOMER ORDER NO.:	WELL NO 29		CAWAY)	E AM TIME	AM. /: 30	AM 3:00	AM 10'0		for services, materials, and/or conditions shall	RACTOR OR AGENT)	\$ AMOUNT	1,37500	6000	110 40	201 5	41875	43300	1,0000	2000	1,100 00	0000000	175 00	4208	2002	5920	2,5200	10 042	1998					Sector Control	AGENI)
FIELD SERVICE TI				STATE KS	PAROVEZ, CAL	"L.S. W/P.C	LED 1-1-12	T JOB			MILES FROM STATION TO WELL	CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered). The undersigned is authorized to execute this contract as an agent of the customer. As each, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.	(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)	UNIT PRICE	V.C. BERRY															AL CO CA	175 CUB TOIAL		%TAX ON \$	IUIAL		and the	(WELL OWNER OPERATOR CONTRACTOR OF AGENT)
E (Allfu		Esley. N	0-51/2	TRUCK CALLED	ARRIVED AT JOB	START OPERATION	FINISH OPERATION RELEASED	MILES FRO	sed or merchand rees and acknow ocument. No add SIGNED	(WELL OWN	QUANTITY	125-	S	RE	530	1025.	388-	-		0	-	5	R	20	1.37	1-4	01		%T/	%T/			D BY:	DWNEH UPEHA
		M QLDL	R.A.	PRA	SERVICE CREW LE	PE: CNU	# HRS					a job is commenc undersigned agr nd back of this do		TINU	SK	SIX	2-2	10	19	2	42	5 T	EA	EA	GAI	CARL		14	HA	くろ	and and a	SERVICE & EQUIPMENT				D SERVICE AND RECEIVE	(WELL C
1	201	NEW	LEASE	COUNTY	SERVIC	JOB TYPE:	EQUIPMENT#					signed before the ner. As such, the ng on the front al gy Services LP.		S USED							Et n	, 7/ c							,a	13		SERVICE &	MATERIALS			ATERIAL ANI CUSTOMER	
44 NE Hwy. (P.O. Box 8613 Pratt, Kansas 67124 Phone 620-672-1201						HRS					contract must be gent of the custom conditions appeari icer of Basic Ener		AND SERVICES USED				200		1DE	1	BAFFLE	Her JIL				111 5065	GE THE	21-500	CHARGE	HRITE	74				THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY:	
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	n)	DATE OF	- H	ADDRESS	CITY	AUTHORIZED BY	EQUIPMENT#	37586	19959-1	1 10011		The undersiproducts, and/o		ITEM/PRICE REF. NO	ordu	CPIO	CC 10	21 00	11 10	0 700	CF. UP	CFLOOT	CFIRD	761 77	2 704	CC 151	F 180	E 101	rE 205	CEZUC	CE 504	0000			11	SERVICE REPRESENTATIVE	FIELD SERVI

544 TIME ON: 22:45 12-27 544 TIME OFF: 07:27 228 CET CET CET CET CET CET CET CET	TUKe Et. Ticket No. FOT ay Ft. Ticket No. FOT W County Frage KANSAS presentative JAKE FAHRENBRUCH	Result Result Result Result Result Rth ft. Size 6 3/4 in. Rth ft. Size 6 3/4 in.	Imber Cap. Scott P.S.I. Imber Imber P.S.I. P.S.I. Imber Cap. Scott P.S.I.	<u> </u>	Omin, Blow died. in. Blow cheed.	Price Job Other Charges J75 J Insurance	Total Total P.M. Maximum Temperature 1/8 ° F 7883 P.S.I. P.S.I.	27
DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET FILE: bboiley dad	Dol Charge to Teke Effective Pay ZZ S Range ZZ Diamond Representative		ft. Recorder Number ft. Recorder Number ft. Recorder Number ft. Drill Collar Length	6 0.0. 8.0 P.P.M. 4.1/2 X/V in.	1 10 12 11 1	21°601, >99	me Started Off Botton	tes 7.0 (B) thes 1/5 (D) thes 7.0 (E) tes 4.5 (G) /
Company I uka Lacini Revelop	Contractor Minus Conduction March Elevation 1839 KB Formation March Date Der 28, 28 Twp. Date Der 28, 28 Twp. Test Approved By	No. <u> </u>	Top Recorder Depth (Inside) Bottom Recorder Depth (Outside) Below Straddle Recorder Depth Mud Two	Weight <u>STERLING</u> Water Loss <u>Start</u> Chlorides <u>STERLING</u> Serial Number <u>Did Well Flow?</u> Tool Joint Size Main Hole Size 7 7/8 Tool Joint Size	". Weak surber "	Recovered ft. of	7:05 P	Initial Flow Period

Φ etatement or oninion concerning the result of any test. Tools lost or damaged in ar ite ż 2

Recovered It. of Other Charges T.U. Remarks: Excovered ft. of Insurance Insurance Remarks: Excovered ft. of Insurance Insurance Remarks: Excovered ft. of Insurance Insurance Remarks: Excovered ft. of A.M. Insurance Inte Set Packer(s) P.M. Time Started Off Bottom V32 A.M. Initial Hydrostatic Pressure (A) V36 P.S.I. P.S.I. Initial Flow Period V/Y 2 Minutes Y5 P.S.I. Initial Flow Period 2 2 P.S.I. P.S.I. P.S.I. Final Flow Period 2 2 2 P.S.I. P.S.I. P.S.I. <th>Difference The seconder Number Cap. Below Straddle Recorder Depth ft. Recorder Number Cap. Below Straddle Recorder Depth ft. Recorder Number Cap. Mud Type Viscosity P. P. M. Drill Collar Length ft. I.D. 2 7/8 Weight Xerouter Depth The Seconder Number ft. I.D. 2 7/8 Weight Xerouter Depth The Seconder Number ft. I.D. 2 7/8 Weight Xerouter Depth Test Tool Length ft. I.D. 2 7/8 Jars: Make STERLING Serial Number Test Tool Length ft. I.D. 3 1/2 Jars: Make STERLING Serial Number Anchor Length ft. R. Tool Size 3 1/2 Jars: Make STERLING Serial Number Anchor Length ft. R. Tool Size 3 1/2 Jars: Make STAB Tool Joint Size 4 1/2 in. Surface Choke Size 4 1/2 Main Hole Size T Tast Cool Length Anchor Length ft. ft. Tool Size 3 1/2 Sund Velorit Test Coole Size 1 Nothor Length ft. ft. 1/2</th>	Difference The seconder Number Cap. Below Straddle Recorder Depth ft. Recorder Number Cap. Below Straddle Recorder Depth ft. Recorder Number Cap. Mud Type Viscosity P. P. M. Drill Collar Length ft. I.D. 2 7/8 Weight Xerouter Depth The Seconder Number ft. I.D. 2 7/8 Weight Xerouter Depth The Seconder Number ft. I.D. 2 7/8 Weight Xerouter Depth Test Tool Length ft. I.D. 2 7/8 Jars: Make STERLING Serial Number Test Tool Length ft. I.D. 3 1/2 Jars: Make STERLING Serial Number Anchor Length ft. R. Tool Size 3 1/2 Jars: Make STERLING Serial Number Anchor Length ft. R. Tool Size 3 1/2 Jars: Make STAB Tool Joint Size 4 1/2 in. Surface Choke Size 4 1/2 Main Hole Size T Tast Cool Length Anchor Length ft. ft. Tool Size 3 1/2 Sund Velorit Test Coole Size 1 Nothor Length ft. ft. 1/2
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C::02 Minutes 45 (B) 12 P.S.I. to (C) 15 2::47 Minutes 45 (D) 1300 P.S.I. 3:32 Minutes 45 (E) 12 P.S.I. P.S.I. 8:32 Minutes 45 (E) 12 P.S.I. P.S.I. P.S.I.	P.M. Time Started Off Bottom / / / P.S. P.S.
2: 4/7 Minutes 4/5 (D) /30 P.S.I. 3:32 Minutes 4/5 (E) /2 P.S.I. to (F) /7 I 1:32 Minutes 60 (G) /52 P.S.I.	1:02. Minutes 45 (B) 12
8:32 Minutes 45 (E) 12 P.S.I. to (F) 17 3:32 Minutes 60 (G) 152 P.S.I.	2:47 Minutes 45 (D) 130
.32 Minutes 60 (G) 152 P.S.I.	8:32 Minutes 4/5 (E) /2
	:32 Minutes 60 (G) 152
In May ne	

67544 67544 CKET CKET CKET CKET CKET CKET CKET CKET	IAMOND TESTING P.O. Box 157 INGTON, KANSAS 67544 (800) 542-7313 Lease & Well No. Charge to Charge to In. Packer depth In. Anchor Length In. Anchor Length In. (B) (B)	MOND 61 P.O. B(800) 54 MOND 6610N, K MOND 66	IG On Look 17:32 2-2 67544 TIME ON: 22:24 12-3 CKET	Well No. B. Barley 41-29 0 I uko - Carmi Renderment LIC	Ft. Ticket No	Diamond Representative JAKE FAHRENBRUCH	4233 ft. Total Depth 4233 ft.	ft. Size 6 3/4	ц. Size	Recorder Number CCC Cap. 5000 P.S.I.	Recorder Number 1033 Cap. 5750 P.S.I.	Recorder Number Cap. P.S.I.	1/4	2 7/8	e Length <u> </u>	H.	size her 1 in.	blew brocks	hew back.	10the wate 90 clowed	50° E WY 50° Emud		Price Job	Other Charges し きし	Insurance	10 of 11 PH: R. O Total	11:24 A.M. Maximum Temperature 119 °F	1992 P.S.I.	14 P.S.I. to (C) 37 P.S.I.	1273 P.S.I.	4/4 DSIMPSION PSI.	
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	DateSTATESTATESTATE	FLUID LEVEL	No. Shots From Depth To Amount From Cepth To Amount		Depth To North Amount	Quantity Amount Outer Outer	Sub Total Sub Total Total Total Total
LOG-TECH OF KANSAS, INC. 86 SW 10 AVE. GREAT BEND, KANSAS 67530 (620) 792-2167	CHARGE TO: ADDRESS ADDRESS R/A SOURCE NO. LEASE AND WELL NO. LEASE AND WELL NO. NEAREST TOWN SPOT LOCATION SPOT LOCATION CASING SIZE CASING SIZE		Description Description	DEPTH AND OPERATIONS CHAI	Description From Image: Description Image: Description Image: Description I	MISCELLANEOUS Description Service Charge	PRICES SUBJECT TO CORRECTION BY BILLING DEPARTMENT RECEIVED THE ABOVE SERVICES ACCORDING TO THE TERMS AND CONDITIONS SPECIFIED ON THE REVERSE SIDE TO WHICH WE HEREBY AGREE.

TREATMENT REPORT	Date	-16-13	County At State	Legal Description	TREATMENT RESUME	RATE PRESS ISIP	5 Min.	10 Min.	15 Min.	Annulus Pressure	e Total Loady / 5	Treater			Service Log	cuss Safet, Setup, Plant.	KCL - LOACH HOLE	L Pung 86 8813	(, Start, 12 & BI	Etic Acid	17 3BL 2% KCL	oth @ 4321 238 The	", Dieta 1 J	1 . · · · · · · · · · · · · · · · · · ·		8 6 281 2% × 61	10-8131 Aciel	1 7 331 240100	115				
		6	Casing / Depth 21	イムル Formation	FLUID USED	Acid 10 010 ACAFic R		Pad Min	Frac Avg	HHP Used	Flush 50 2% Kc (Gas Volume	SCOH			Rate	ow Loc. Dis	Start 2%	PU/ 24 KC	2 % KCL	10°10 ACN	Piso w/	The Dep	Jab con										
ervices, L.P.	Service	1	Pro H	. of	PERFORATING DATA	size Shots/Ft	From	From To	From	From	From	1 of twist	279463	106	Tubing		900		7		61	-											1 100
energy se	Customer ++ 1011	80	Field Order # Station	Type Job	PIPE DATA	Casing Size Tubing Size	Depth Depth	Volume Volume	Max Press	Well Connection Annulus Vol.	Plug Depth Packer Depth	Customer Representative	Service Units 2844	Driver Names	Time Pressure	0 4							4/30										

Customery Lease Lease Lease Lease Lease Lease Lease Lease Neill # Field Order # Station A A Lease Neill # Type Job Tubing-Size Tubing-Size Shots/FT To / 20 Uype Job Depth Prem To To Outwee Notwee From To A Weil Connection Max Press From To A Weil Connection Amulus Vol. From To A Weil From To To A A Max Pressure Packer Depth From To A Static Casing Tubing To			Date	
Station Station Tubing Size Max Press F Packer Depth F Pressure Pressure F F				
Station DATA Depth Nax Press R Amulus Vol. F Packer Depth F Pressure Pressu		1-29	1/17/1	3
Data Data Tubing Size Nax Press Packer Depth Packer Depth		Casing Depth	County	State
DATA Tubing Size Depth Nax Press Max Press F Packer Depth F Pressure Pressure Pressure Press	. F=	Formation	555	Legal Description 75 12 4
Tubing Size Shots/Ft Depth From U Volume From V Max Press From V Max Press From V Packer Depth Prove V Packer Depth <t< td=""><td>30</td><td>FLUID USED</td><td></td><td>RESUME</td></t<>	30	FLUID USED		RESUME
Depth From Volume From Max Press From Max Press From Packer Depth Prove Packer Depth	30	Acid Acid 15910	RATE PRESS	ISIP
Volume From Max Press From Annulus Vol. From Packer Depth Packer Packer Depth Packer Packer Depth From Packer Depth Packer		Pre Pad 64	Max	5 Min.
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n Annulus Vol. From Packer Depth From resentative A Packer Depth From Casing Tubing Pressure Pressure Pressure Pressure 1050 1	-	Frac	Avg	15 Min.
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S/L/M R/velocity Casing Tubing Pressure 1025 1050 1050 1150 1050 1250 1050 1250 1050 1250 1250 1250 1250 1350 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 1550 550 550	19894			
Casing Tubing / Pressure 10.35 10.50 10.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 11.50 12.50 11.50 12.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 15.50 11.55 <td>Martin</td> <td></td> <td></td> <td></td>	Martin			
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Carlo and Carlo

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vlor Printing Inc. 620-672-3656

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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 Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner Sam Brownback, Governor

February 20, 2013

Kenneth C. Gates Iuka-Carmi Development LLC PO BOX 847 PRATT, KS 67124-0847

Re: ACO1 API 15-151-22402-00-00 B. Bailey 1-29 NE/4 Sec.29-27S-12W Pratt 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, Kenneth C. Gates