

Kansas Corporation Commission Oil & Gas Conservation Division

1138826

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.): | 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 | Chloride content: ppm Fluid volume: bbls Dewatering method used: |
| 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 #: | Quarter Sec Twp S. R |
| ☐ ENHR Permit #: ☐ 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 II Approved by: Date: |

Side Two

1138826

| Operator Name: | | | Lease Name: | | | _ Well #: | |
|---|--|---|------------------------------------|---------------------|------------------------|-------------------|------------------------|
| Sec Twp | S. R | East West | County: | | | | |
| time tool open and clo | osed, flowing and shu es if gas to surface te | nd base of formations pe it-in pressures, whether est, along with final char well site report. | shut-in pressure rea | ached static level, | hydrostatic press | sures, bottom h | ole temperature, fluid |
| Drill Stem Tests Taker (Attach Additional S | | Yes No | | _og Formatio | n (Top), Depth an | d Datum | Sample |
| Samples Sent to Geo | logical Survey | Yes No | Nar | ne | | Тор | Datum |
| Cores Taken Electric Log Run Electric Log Submittee (If no, Submit Copy | | Yes No Yes No Yes No | | | | | |
| List All E. Logs Run: | | | | | | | |
| | | | | lew Used | | | |
| D (0) | Size Hole | Report all strings set | t-conductor, surface, in Weight | termediate, product | on, etc. Type of | # Sacks | Type and Percent |
| Purpose of String | Drilled | Set (In O.D.) | Lbs. / Ft. | Depth | Cement | Used | Additives |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Purpose: | Donth | | AL CEMENTING / SQ | UEEZE RECORD | | | |
| Perforate | Depth Top Bottom | Type of Cement | # Sacks Used | | Type and F | Percent Additives | |
| Protect Casing Plug Back TD | | | | | | | |
| Plug Off Zone | | | | | | | |
| | | | | | | | |
| Shots Per Foot | PERFORATI | ON RECORD - Bridge Plu | ıgs Set/Type | | cture, Shot, Cement | | |
| | Specify | Footage of Each Interval Pe | erforated | (Ai | mount and Kind of Ma | aterial Used) | Depth |
| | | | | | | | |
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| | | | | | | | |
| TUBING RECORD: | Size: | Set At: | Packer At: | Liner Run: | Yes No | | |
| Date of First, Resumed | Production, SWD or EN | IHR. Producing Me | | Gas Lift C | Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil | Bbls. Gas | Mcf Wa | iter B | bls. (| Gas-Oil Ratio | Gravity |
| | I | | | | | | |
| DISPOSITION | ON OF GAS: | | METHOD OF COMPL | | | PRODUCTIO | ON INTERVAL: |
| Vented Sold | | Open Hole | | | nmingled mit ACO-4) | | |
| (If vented, Sui | bmit ACO-18.) | Other (Specify) | | | | | |

SERVICE, INC. QUALITY WELL THE PROPERTY OF THE PROPERTY O

The state of the s

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Rich's Cell 620-727-3409 Brady's Cell 620-727-6964

Taylor Printing, Inc. The above was done to satisfaction and supervision of owner agent or contractor. To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish comenter and helper to assist owner or contractor to do work as listed. mdooil Discount Total Charge On Location SON State FLOAT EQUIPMENT ZVC Cement Amount Ordered 4005x CFL-117 or CD110 CAF 38 Enterpoise State Pro Pumptrk Charge Š Mud CLR 48 AFU Inserts Latch Down Guide Shoe Centralizer Float Shoe 200 Handling Mileage Flowseal Mileage Baskets Kol-Seal Соттол Poz. Mix Calcium Charge To Sand Hulls Street Owner Salt 4 Gel. County S Roo K Location 13/2 H MUSC Ja Shoo with 10.31 301015 3539 九二 2000 Range $\bar{\omega}$ 3540 1/128 KOOK JOB SERVICES & REMARKS Cir culeto down Shoe Joint Heath's Cell 620-727-3410 Office / Fax 620-672-3663 Displace Depth Depth Depth Twp. EQUIPMENT Well No. with T.D. 90 Anthon Mike 9 Z) Windell Piccolas Night Sec. 54119 C 9.0 124 85145 Displaced Fstabich 140 Punp. 900 White 20SK 19 0 2 Calm beca 8 Š Date 16-14-13 4000 Cement Left in Csg. D/V or Port Collar Privant S ∞ Mouse Hole Centralizers S Kan X X Signature Mod Meas Line Contractor Tbg. Size Rat Hole Pumptrk Baskets Type Job Hole Size Bulktrk Bulktrk Pickup Lease Tool

QUALITY WELL SERVICE, INC.

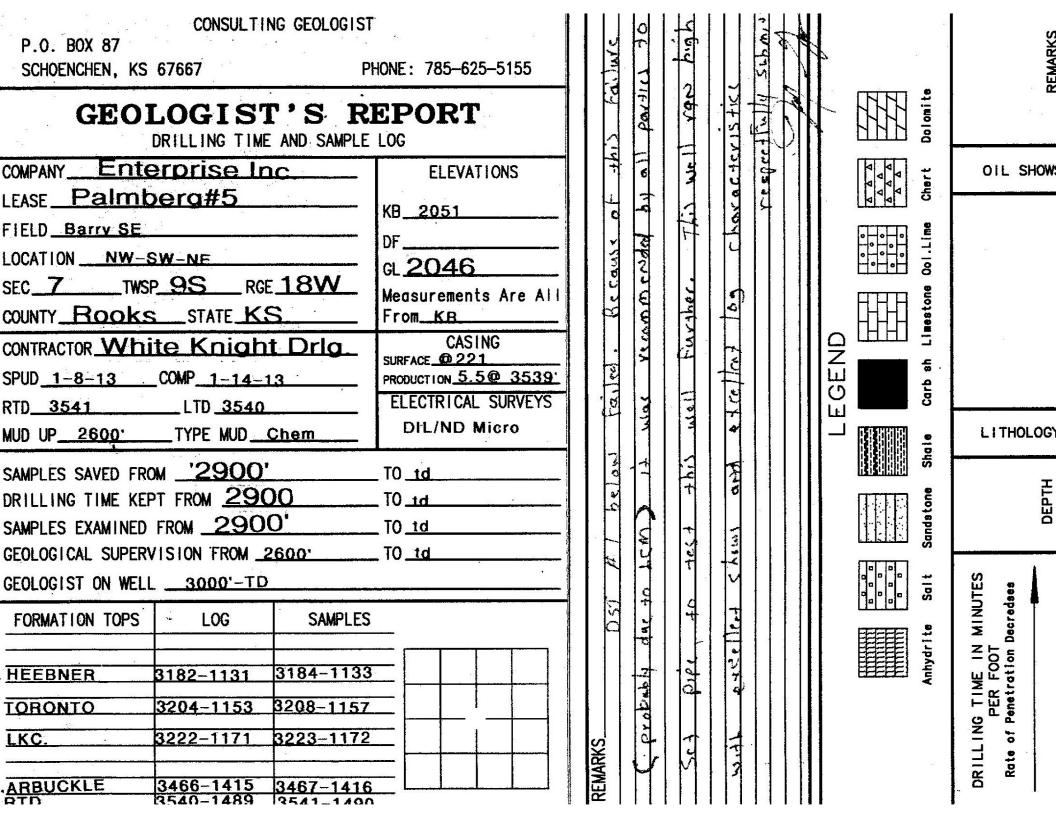
Federal Tax I.D. # 481187368

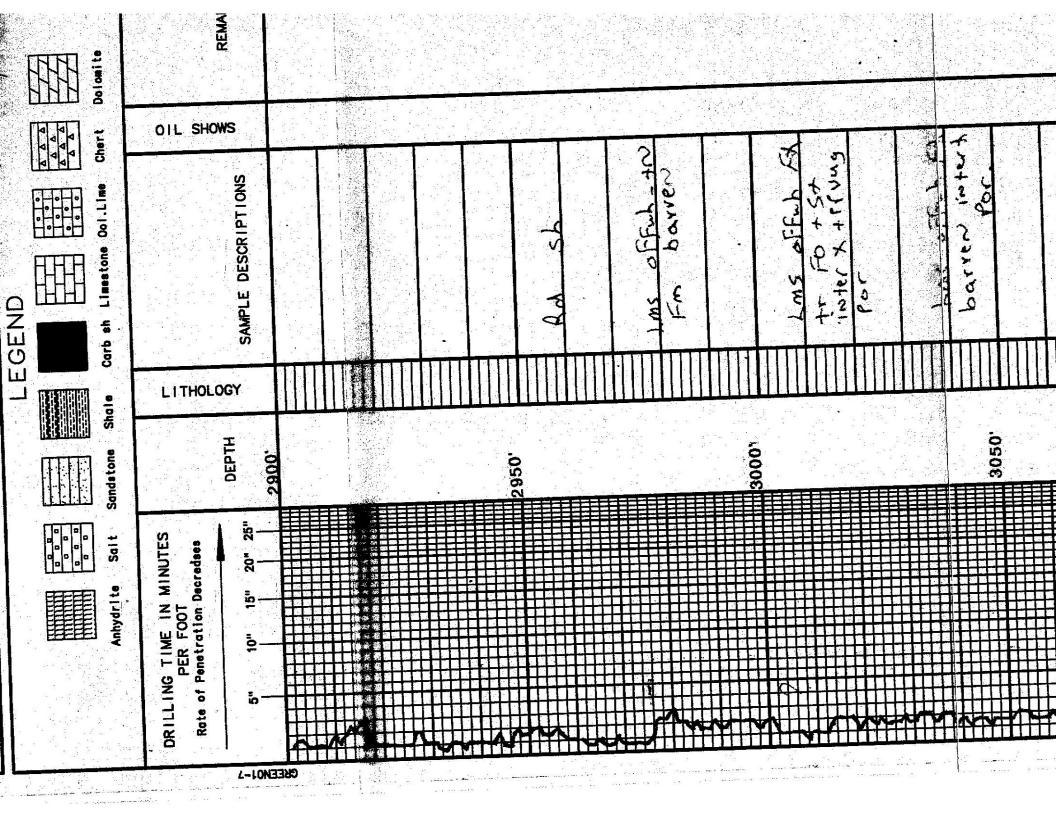
Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410

Brady's Cell 620-727-6964 Rich's Cell 620-727-3409

3:30-4:00pm Taylor Printing, Inc. The above was done to satisfaction and supervision of owner agent or contractor. To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish you are hereby requested to rent cementer and helper to assist owner or contractor to do work as listed. 12ge Tax Discount Total Charge 150 SX COM 376 C On Location Location Plainville 18:3N 51/2W Sin to State FLOAT EQUIPMENT Enterprise Inc CFL-117 or CD110 CAF 38 Cement Amount Ordered State XX Pumptrk Charge ac u 150 Latch Down AFU Inserts Mud CLR 48 **Guide Shoe** Float Shoe Centralizer Mileage Baskets Handling 60 Mileage Flowseal Kol-Seal Common Calcium Poz. Mix Charge To Sand Hulls Street Salt Gel. Rooks Çİ County 33/4 Anthony Cody Range 00 23 JOB SERVICES & REMARKS 3 Shoe Joint Displace Office / Fax 620-672-3663 0 Depth Depth Depth ₹ Q EQUIPMENT Well No. 40 1551 Sec. 1 Precision Surface Ø 12,/4 Š No. ż Š Lease Palmberg Cement Left in Csg. D/V or Port Collar Date 12-21-12 Ø Mouse Hole Centralizers X Signature 00 Contractor Meas Line Rat Hole Tbg. Size Baskets . . Hole Size Pumptrk Type Job Bulktrk Pickup Bulktrk Csg. 100

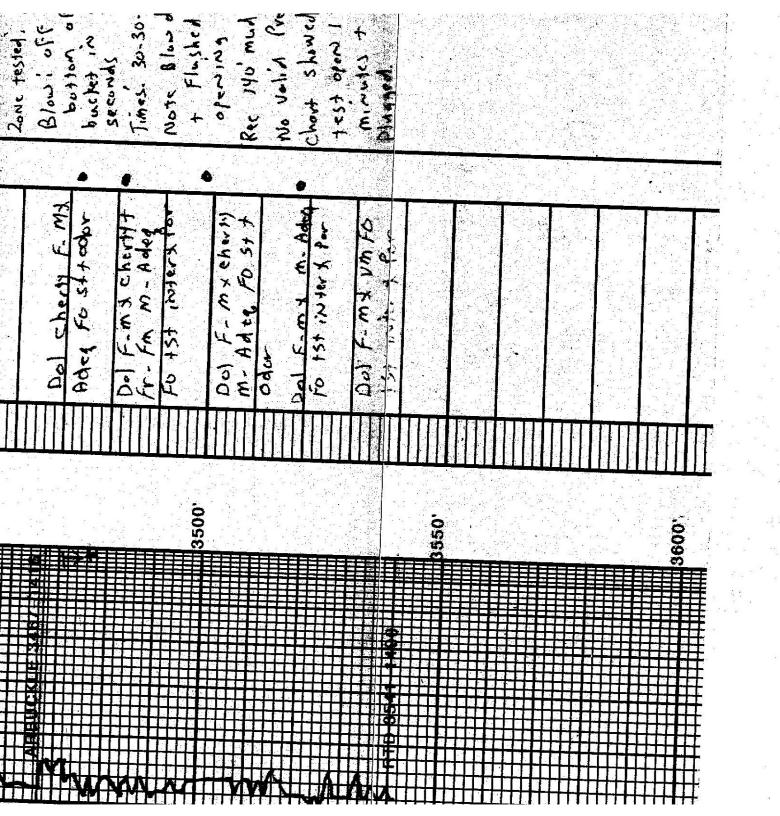




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Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



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

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

May 10, 2013

steve weilert Enterprise Inc 2708 BARCLAY DR HAYS, KS 67601-2125

Re: ACO1 API 15-163-24093-00-00 PALMBERG 1 NE/4 Sec.07-09S-18W Rooks 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, steve weilert

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 Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

May 15, 2013

steve weilert Enterprise Inc 2708 BARCLAY DR HAYS, KS 67601-2125

Re: ACO-1 API 15-163-24093-00-00 PALMBERG 1 NE/4 Sec.07-09S-18W Rooks County, Kansas

Dear steve weilert:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 12/20/2012 and the ACO-1 was received on May 10, 2013 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department