Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1154580

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WELL	HISTORY	- DESCF	OF WE	LL &	LEASE

OPERATOR: License #	API No. 15
Name:	Spot Description:
Address 1:	Sec TwpS. 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: ()	
CONTRACTOR: License #	
Name:	(e.g. xx.xxxx) (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:
OG GSW Temp. At CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	
Well Name:	
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SW Plug Back Conv. to GSW Conv. to Pro	
Plug Back Conv. to GSW Conv. to Pro	
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	
ENHR Permit #:	
GSW Permit #:	
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East _ West
Recompletion Date 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	1154580
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 Ye (Attach Additional Sheets)		Yes No		Log Formatio	on (Top), Depth an	d Datum	Sample
Samples Sent to Geological Survey		Yes No	Nam	1e		Тор	Datum
Cores Taken Electric Log Run		Yes No Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c		ew Used ermediate, producti	on, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		ADDITIONAL	CEMENTING / SQ	UEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing							
Plug Off Zone							
Did you perform a hydraulic fracturing treatment on this well?				Yes	No (If No, skip	o questions 2 an	d 3)

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?

Yes No

No

Yes

(If No, skip question 3)

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					Acid, Fracture, Shot, Ce (Amount and Kind	ement Squeeze Record I of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	r At:	Liner R	lun:	No	
Date of First, Resumed Production, SWD or ENHR.		} .	Producing M	lethod:	ping	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:			METHOD	OF COMPLE	IPLETION: PRODUCTION INTERVA		RVAL:			
Vented Sold Used on Lease			Open Hole	Perf.	Dually		Commingled			
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify)		(Submit /	,	(Submit ACO-4)		

Anderson County, KS Well:Zasdrow 27-HP Lease Owner:Haas

Town Oilfield Service, Inc.Commenced Spudding:(913) 837-84007-19-2013

WELL LOG

Thickness of Strata	Formation	Total Depth
10	soil clay	10
42	shale	52
28	lime	80
15	shale	95
2	lime	97
4	shale & lime	101
2	lime	103
45	shale	148
12	lime	160
7	shale	167
36	lime	203
6	shale	209
22	lime	231
4	shale	235
22	lime	257
3	shale	260
4	lime	264
5	sandy shale	269
19	shale	288
6	sand	294
3	sahdy shale	297
6	shale	303
23	sand & sandy shale	326
60	shale	386
9	sand	395
3	sandy shale	398
25	shale	423
2	lime	425
7	shale	432
_2	lime	434
4	shale	438
9	lime	447
6	shale	453
31	sand	484
9	sandy shale	493
8	shale	501
7	lime	508
4	shale	512
1	lime	513
96	shale	522

Anderson County, KS Well:Zasdrow 27-HP Lease Owner:Haas Town Oilfield Service, Inc. (913) 837-8400

Commenced Spudding: 7-19-2013

5	lime	
	lime	527
20	shale	547
11	lime	558
16	shale	574
1	lime	575
5	shale	580
3	lime	583
10	shale	593
2	lime	595
13	shale	608
6	sand	614
4	sandy shale	618
35	shale	653
19	sand & sandy shale	672
23		695
2		697
5		702
17	sand	
1		719
7	sand	720
	sandy shale	727
4	sand	731
1	broken sand	732
16	sandy shale	748
52	shale	800 - TD
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260844

TICKET NUMBER 42196 LOCATION Hawa, KS FOREMAN Casey Kennedy

PO Box 884, 0	Cha	nute, KS	66720
620-431-9210	or	800-467	-8676

FIELD TICKET & TREATMENT REPORT

020-401-9210 0	1 000-407-0070		nen i			
DATE		ELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/23/13	3451 Zas	trow # 27 HP	NW 13	20	20	AN
CUSTOMER	Potroleum			ali ali anti tata di anti di a Anti di anti di		the factor
MAILING ADDRES			TRUCK #	DRIVER	TRUCK #	DRIVER
11551 4		205	481	Gorken	V Salety !	leeting.
			Eldo_	GarMoo		
	STATE	ZIP CODE	_548	Mikhaa	V	1
Leawood	$($ $ K_2 $	66211	Lits	KeiDat		<u> </u>
JOB TYPE		5%" HOLE D	EPTH 800'		WEIGHT QT	FRE
CASING DEPTH_	772 DRILL PIPE	TUBING			OTHER	
SLURRY WEIGHT		L WATER	gal/sk	CEMENT LEFT I	CASING	
		IENT PSI MIX PSI_		RATE 4560		
REMARKS: Leld	satury mosting,	established circul	ation minal	+ and	m#D	1 0-0
followed by	10 Lbls frosh wo	ster, mixed tom	ned 105 5	J. Sola I	CONTINE CO	UUL GOV
1 29. 10	e per sk, coment	t to surface I	ution annual	lac anna	A D 1 11	ueur
due to cas	sing TD w/ 4.47	tople track water	and fring a	La Fan F		
shut in a	inc.		+ Fressurea	TO GOO F	SI RELACSE	d pressure,
					}	
			f	$\rightarrow -r//$	<u> </u>	
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ACCOUNT		DESCRIPTIO			<u> </u>	
CODE			N of SERVICES or PR		UNIT PRICE	TOTAL
K401	/					

CODE		DESCRIPTION of SERVICES or I	PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE			1085.00
5406	25 mi	MILEAGE			105,00
5402	772'	casing tootage			
5407	1/2 minimum	ton mileace.			184,00
22025	1.5 krs	80 Vac			135.00
1124	105 skg	50/50 Poznix cement			1207.50
1118B	376 #	Premium Gel			82.72
4402	1	a's " rubber plug			29.50
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				<u>eamnlata</u>	
			╌╌╴┺╓╓	LUMPICIC	<u> </u>
			- 4.2 	+·]k
	······································		7.65%	SALES TAX	100.96
lavin 3737				ESTIMATED	10.10
AUTUORIT7'01	KSL			TOTAL	2929.68
AUTHORIZTION	~ [TITLE		DATE	

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

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

August 07, 2013

Mark Haas Haas Petroleum, LLC 11551 ASH ST., STE 205 LEAWOOD, KS 66211

Re: ACO1 API 15-003-25910-00-00 Zastrow 27-HP NW/4 Sec.13-20S-20E Anderson 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, Mark Haas