



1154580

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. 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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, 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 / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(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, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Anderson County, KS
Well:Zasdrow 27-HP
Lease Owner:Haas

Town Oilfield Service, Inc.
(913) 837-8400

Commenced Spudding:
7-19-2013

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



PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

260844

TICKET NUMBER 42196

LOCATION Chanute, KS

FOREMAN Casey Kennedy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/23/13	3451	Zastrow # 27 HP	NW 13	20	20	AN

CUSTOMER <u>Haas Petroleum</u>		
MAILING ADDRESS <u>11551 Ash St. Suite 205</u>		
CITY <u>Leawood</u>	STATE <u>KS</u>	ZIP CODE <u>66211</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
481	CarKen	✓	Safety Meeting
666	Gar Moo	✓	
548	Mikhaa	✓	
475	Kei Det	✓	

JOB TYPE <u>log string</u>	HOLE SIZE <u>5 5/8"</u>	HOLE DEPTH <u>800'</u>	CASING SIZE & WEIGHT <u>2 1/2" EUE</u>
CASING DEPTH <u>772</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT	SLURRY VOL.	WATER gal/sk	CEMENT LEFT IN CASING
DISPLACEMENT <u>4.47 bbls</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>1/5 bpm</u>

REMARKS: held safety meeting, established circulation, mixed + pumped 200 # Premium Gel followed by 10 bbls fresh water, mixed + pumped 105 sks 50/50 Pozmix cement w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.47 bbls fresh water, pressured to 800 PSI, released pressure, shot in casing.

Handwritten signature

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	25 mi	MILEAGE		105.00
5402	772'	casing footage		
5407	1/2 minimum	ton mileage		184.00
5502C	1.5 hrs	80 Vac		135.00
1124	105 sks	50/50 Pozmix cement		1207.50
1118B	376 #	Premium Gel		82.72
4402	1	2 1/2" rubber plug		29.50
			7.65%	SALES TAX
				ESTIMATED TOTAL
				2929.68

✓ completed

Revin 3737

AUTHORIZATION *[Signature]*

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