

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1160059

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:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
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:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. 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



Operator Name:				_ Lease l	Name: _			Well #:		
Sec Twp	S. R	East V	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Da	tum
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
	0: 11-1-	· ·				ermediate, product		// OI	T	d Damasat
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and F	ercent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
Did you perform a hydrau	•					Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to							= :	p question 3)	of the ACO	()
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemicai d	isciosure re	gistry?	Yes	No (If No, fill	out Page Three	or the ACO-1	<i>)</i>
Shots Per Foot		ION RECORD - I Footage of Each I					cture, Shot, Cement mount and Kind of Ma		d	Depth
TUBING RECORD:	Size:	Set At:		Packer A	i:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR. Prod	ducing Meth	ıod:		1				
			Flowing	Pumpin	g	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. (Gas-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		M	METHOD OF	COMPLE	ETION:		PRODUCTION	ON INTERVA	
Vented Sold		Open		Perf.	Dually	Comp. Cor	mmingled			
	bmit ACO-18.)		(Specify)		(Submit)	ACO-5) (Sub	mit ACO-4)			

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

Commenced Spudding: 7/16/2013

Lease Owner: Hass Petroleum

WELL LOG

Thickness of Strata	Formation	Total Depth
17	Soil/Clay	17
61	Shale	78
29	Lime	107
13	Shale	120
3	Lime	123
4	Shale & Lime	127
48	Shale	175
11	Lime	186
7	Shale	193
37	Lime	230
6 _	Shale	236
21	Lime	257
3	Shale	260
23	Lime	283
3	Shale	286
3	Lime	289
5	Sandy Shale	294
18	Shale	312
4	Sand	316
21	Shale	337
19	Sandy Shale	356
54	Shale	410
7	Sand	417
6	Sandy Shale	423
25	Shale	448
8	Lime	456
7	Shale	463
9	Lime	472
7	Shale	479
14	Sand	493
27	Sandy Shale	520
5	Shale	525
2	Coal	527
6	Lime	533
4	Shale	537
3	Lime	540
7	Shale	547
5	Lime	552
20	Shale	572
11	Lime	583

Anderson County, KS Well: Zastrow 35-HP

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

Commenced Spudding: 7/16/2013

Lease Owner: Hass Petroleum

21	Shale	604
2	Lime	606
10	Shale	616
2	Lime	618
12	Shale	630
7	Sand	637
6	Sandy Shale	643
33	Shale	676
22	Sandy Shale & Sand	698
26	Shale	724
11	Sand	735
3 .	Sand	738
4	Sand	742
2	Sand	744
2	Brokensand	746
1	Brokensand	747
10	Sandy Shale	757
11	Shale	758
6	Sand	764
56	Shale	820
-		
<u></u>		
<u> </u>		



260155

TICKET NUMBER 42190
LOCATION CHAWA KS
FOREMAN CARRY Keynedy

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

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WEL	NAME & NU	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/19/13	3451	Fartra	4 35 بار	#P	NW 13	90	90	ALI
CUSTOMER		1 200	<u> </u>	1				
Heas D	etro levun			- }	TRUCK#	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	3 \$\$			_	481	Casken	- Attoorem	DINVER
1155	1 Ast St.	Svite :	205		lelela	Garloo		<u></u>
CITY		STATE	ZIP CODE		ST003 510	Set Tur.		
Leavood	d	KS	46211	_]	675	KeiDet		
JOB TYPE O	ngstring	HOLE SIZE	55/8"	HOLE DEPT	H 820'	CASING SIZE & W	EIGHT 27/	8" FUE
CASING DEPTH	792	DRILL PIPE		TUBING			OTHER	
SLURRY WEIGH	Τ	SLURRY VOL_		WATER gal/s	sk	CEMENT LEFT in	CASING	· · · · · · · · · · · · · · · · · · ·
DISPLACEMENT	4.58 H/s	DISPLACEMEN	T PSI	_ MIX PSI		RATE 4,5 601		
REMARKS: he	ld saldy us	acting esta	blished a	inculation	1 arived to	unped 200	# Pauli	un Gal
followed	<u>اطط ۵′ بیط</u>	s treek wa	oter, m	xed + ou	108	Sies Syst Po	zuix co	went
w/ 290 g	elper sk	, coment	- to ar	face flu	shed ours	clean, pu	used a	12 "Nelhan
plus to ca	570 u	1 4.58	bbls fre	sh water	pressured	to an	24C 1	ared
pressure,		ina.			76		7-17-121	ALE IN
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-			-			/'/		

QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
	PUMP CHARGE	-	1085,00
25 aci	MILEAGE		105,00
792'	asing footage		
/2 minimum	tou mileage		184,00
1.5 hs	80 Vac		135,00
108 Sks	Son Porania Generat		1242,00
	Premiery Gol		83.82
	21/2" rubber plus		29.50
	7.60		103.68
651		ESTIMATED TOTAL	2968,00
	25 mi 792'	1 PUMP CHARGE 25 ari MILEAGE 792' casing Astage 12 arinimum ton mileage 1.5 hrs 80 Vac 108 sks 950 Poznik cement 381 # Premium Gol 1 2/2" rubber plus	PUMP CHARGE 25 mi MILEAGE 792' casing Astage /2 minimum ton mileage 1.5 hrs 80 Vac 108 Sks Sepanix cement 381 # Premium Gol 1 2/5" rubber plus 7.65% SALES TAX ESTIMATED

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/

Sam Brownback, Governor

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

September 26, 2013

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

Re: ACO1 API 15-003-25886-00-00 Zastrow 35-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 Hs