Confidentiality Requested: Yes No

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

1160082

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 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 #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
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? Yes No
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 #:	Operator Name:
GSW Permit #:	Lease Name: License #:
	Quarter Sec TwpS. R East West
Spud Date or Date Reached TD Completion Date or Recompletion Date 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 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 She	eets)	Yes No		-	on (Top), Depth a		Sample
Samples Sent to Geolog	gical Survey	Yes No	Name	9		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne		ion, 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 / SQU	EEZE RECORD			

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

res	
Yes	No
Yes	No

No

(If No, skip questions 2 and 3) No (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					ement Squeeze Record d of Material Used)	Depth		
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner F		No	
Date of First, Resumed	I Product	ion, SWD or ENHF	} .	Producing Me	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
		1		1						
DISPOSITION OF GAS:							PRODUCTION INT	FERVAL:		
Vented Solo	d 🗌 l	Used on Lease		Open Hole	Perf.	Uually (Submit A	Comp. A <i>CO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Su	ıbmit ACC)-18.)		Other (Specify)		-		. ,		

Anderson County, KS
Well:Zastrow 11-HPTown Oilfield Service, Inc.Commenced Spudding:
7/1/2013(913) 837-84007/1/2013 Lease Owner: Haas Petroleum

WELL LOG

Thickness of Strata	Formation	Total Depth
12	Soil-Clay	12
28	Shale	40
27	Lime	67
17	Shale	84
3	Lime	87
3	Shale	90
47	Shale	137
11	Lime	148
9	Shale	157
8	Lime	165
15	Sandy Lime	180
12	Lime	192
6	Shale	198
22	Lime	220
4	Shale	224
22	Lime	246
4	Shale	250
3	Lime	253
6	Sandy Shale	259
16	Shale	275
4	Sand	279
10	Shale	289
7	Sand	296
20	Sandy Shale	316
58	Shale	374
9	Sand	383
7	Sandy Shale	390
29	Shale	419
5	Lime	424
3	Shale	427
8	Lime	435
8	Shale	443
8	Sand	451
4	Sandy Shale	455
8	Shale	463
11	Sand	474
10	Sandy Shale	484
2	Coal	486
3	Shale	489
_3	Lime	492

Anderson County, KS Well:Zastrow 1I-HP (913) 837-8400 Commenced Spudding: 7/1/2013 Lease Owner: Haas Petroleum

1	Shale	493
5	Lime	498
3	Shale	501
4		
5	Shale	505
		510
20	Lime	514
11	Shale	534
21	Lime	545
2	Shale	566
10		568
	Shale	578
4		582
13	Shale	598
6	Sand	601
5	Sandy Shale	606
	Shale	636
21	Sandy Shale	657
22	Shale	679
22	Lime	681
9	Shale	690
9	Sand	699
1	Sand	700
4	Sand	<u> </u>
1	Sand	705
9	Sand	714
1	Broken Sand	715
1	Broken Sand	716
10	Sandy Shale	726
32	Shale	758
6	Sand	764
36	Shale	800-TD
		·
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		· · · · · · · · · · · · · · · · · · ·
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	ONSOLIDATED Dia West Services, LLC	26029	3	TICKET NUM	Ottowa K.	043 S
PO Box 884 Ct	nanute, KS 66720 F	IELD TICKET & TRE	ATMENT REP		asey heuu	ear _
	or 800-467-8676	CEME				
DATE	CUSTOMER # W	ELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
713113	3451 Zast	row # 1-IHP	NW 13	20	20	AN
	18 Made		TRUCK #		A MARKAN AND AND AND AND AND AND AND AND AND A	· · · · · · · · · · · · · · · · · · ·
MAILING ADDRE	SS		481	DRIVER Casken	TRUCK #	DRIVER
11551	Ash St. Suite	2 205	Lelels	GarMoo		<u> </u>
CITY	STATE	ZIP CODE	510	Set Tuc		
Leawood	<u> </u>	66211	370	Keilar		
	HOLE SIZE_	578 HOLE DEP	тн <u>800'</u> нт	CASING SIZE & V		s"Eve
CASING DEPTH_	- 440 DRILL PIPE	TUBING			OTHER	
SLURRY WEIGHT	4.4		l/sk	CEMENT LEFT IN	CASING	····
DISPLACEMENT		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		RATE 4.56		
REMARKS: hel	A I 14 111 -0		action, mix	ed + pur	<u>ped 200</u>	# Premi
	wed by 10 645 th	- sk renert +	- F pumped	105 Stc	to Par	Emîx
unent)'/ " other din	to open. The	SUCTACE	Tushed	uns de	an
and DSI	wall hald arrest	The Bound	<u>14.46 5615</u> MIT Colors	trash we	ter press	red to
	COLO MARCI DIESSO	Charles Convers	MIT, release	ed pressure	+ Shut i	n asing
	- <u> </u>					
, 	<u> </u>	——————————————————————————————————————		{-}-	-H+	i
	· · · · ·					
					/+/-	
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION	of SERVICES or PR(DUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE				
5406	25 412	MILEAGE				1085.00
5402	770'					105.00
5407	1/2 minimum	casing tootage				1011 00
55020	1.5 hrs	80 Unc				184,00
				<u>.</u>		1350
					·	
1124	105 sks	59/50 Popuix	course +			1707 5
	376 #	Premium Gel	L MULLI		·	1207.50
		- I remining Ger				00.72
1118B 4402	1		n7 .			00 M
4402		2's "rubbor p	<u>مدار</u>			29.50
	<u> </u>	26 Nobor p	<u>ارم</u>			29.50
		26 Nobor g				29.50
		23 Nobor 9	مدا ر 			29.50
		2/2" Nobor 9		1	annla	29.50
		2/2" rubbor p			Comple	29.50
		2/2 "rubbor g	<u>می ارم</u>		comple	29.50
					comple	29.50
4402			<u>محارم المعمد المعمد</u>			29.50
					SALES TAX	29.50

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 for

DATE_



261489

TICKET NUMBER 42347

LOCATION O +tawa KS FOREMAN Fred Mady

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

FIELD TICKET & TREATMENT REPORT CEMENT

	e ^r			•			
DATE	CUSTOMER #	WELL NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
8-16-13	3451	Zastrow #1I		NW 13	20	20	Ar
CUSTOMER							
Haas	Patroles			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ESS			712	Fre Mod		
1155	I Ash S	/		495	Hor Ba		
		STATE KS ZIP CODE		.370	Kei Car		
Kausos	- (134 3	145. 66211		503	Danpet		
	Nug C	HOLE SIZE	_ HOLE DEPTH	7.50	CASING SIZE & W	EIGHT 275 E	SUF_
CASING DEPTH		DRILL PIPE	_TUBING	,		OTHER	
SLURRY WEIGH	IT,	SLURRY VOL	WATER gal/si	k	CEMENT LEFT in	CASING_Full	
DISPLACEMENT	ſ <u></u>	DISPLACEMENT PSI	MIX PSI		RATE 3BP	m	
REMARKS: 1	told Cre	w meeting. Rig	10 2%	Cashy -	Perfsa	716'	
Est	hablish	Shurm Cosm	. Mixi	+ Pomo :	30 sks Ca	ment	
	& Welli	SWY M Cosm	<u> </u> (20) (20) (20) (20) (20) (20) (20) (20)	00 # PS/			
			1-,				
	<u> </u>						
		· · · · · · · · · · · · · · · · · · ·					·

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ACCOUNT CODE	QUANITY or UNITS			UNIT PRICE	TOTAL
5405A	1	PUMP CHARGE Bull head Plug	495		730 ²⁰
5406		MILEAGE C			N/c
5467	13 Minimum	Ton Miles	570		122 67
55029	Ikhr	SO BBL Vac Truck	<u>هري -</u>		135-00
,					
//3/	305/45	50/40 Por Mix Coment			39544
1118B	/64 [#]	Fremium Gel			39540 22 48
	· · · · · · · · · · · · · · · · · · ·				
				ompiele	· ·
				8	
			7.65%	·	
vin 3737	<u>\\/ \ X</u>	l	1.000	SALES TAX	3200
				TOTAL	143725
UTHORIZTION		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

September 26, 2013

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

Re: ACO1 API 15-003-25823-00-00 Zastrow 1i-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 aas