

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division 1164701

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 N	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whethe with final cha	er shut-in pre art(s). Attach	essure reac n extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, fluid re	ecovery,
Final Radioactivity Lo files must be submitted						ogs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital electr	onic log
Drill Stem Tests Taker (Attach Additional		Yes	☐ No				on (Top), Depth ar		Sampl	
Samples Sent to Geo	logical Survey	Yes	□No		Nam	е		Тор	Datum	1
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No							
List All E. Logs Run:										
				RECORD	Ne					
	2	1				ermediate, product		T	T	
Purpose of String	Size Hole Drilled		Casing n O.D.)	Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of	Cement	# Sacks	# Sacks Used Type and Percent Additives					
Perforate Protect Casing	100 20111111									
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	ip questions 2 ar	nd 3)	
Does the volume of the t							= :	p question 3)		
Was the hydraulic fractur	ring treatment information	on submitted to	the chemical	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot PERFORATION RECORD - Bridge Plugs Specify Footage of Each Interval Perfor						Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)  Depth				
Speeding Footage of Each miles										
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or Ef	NHR.   F	Producing Met	hod: Pumpin	a $\square$	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat			Gas-Oil Ratio	Gra	avity
	1									
	ON OF GAS:		en Hole	METHOD OF			mmingled	PRODUCTION	ON INTERVAL:	ļ
Vented Solo	I Used on Lease bmit ACO-18.)		en noie _	Perf.	(Submit		mmingled mit ACO-4)			

Skyy Drilling, L.L.C. Park Place – Becker Building 11551 Ash Street, Suite # 205 Leawood, Kansas 66211 Office (913) 499-8373 Fax (913) 766-1310

July 31, 2013

Company: Haas Petroleum, LLC

11551 Ash Street, # 205 Leawood, Kansas 66211

Lease:

Chandler - Well #3 HP

County:

Miami

Spot:

SE SE NW SW Sec 13, Twp 16, R 21 E

API:

15-121-29441-00-00

TD:

740'

650' @ \$5,500.00 90' @ \$8.00 Per Foot - \$720.00

Total Due: 6,220.00



260228

**TICKET NUMBER** LOCATION FOREMAN\_

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

## FIELD TICKET & TREATMENT REPORT **CEMENT**

DATE	CUSTOMER#	WELL	NAME & NUM	IBER	SECTIO	N TOWNSHIP	RANGE	COUNTY
7.2.13	3451	Chandle	1 1	1. HP	SW 1	3 16	21	Mi
CUSTOMER	Anto-la				第三 · · · · · · · · · · · · · · · · · · ·	Harring Hill		e like tana
HGGS MAILING ADDR	<u>fetroleu</u>	m	<del></del> .		TRUCK		TRUCK #	DRIVER
11551	_Ast S	4 S.F	e 205	138/	210	Ja Mad	<del>{  </del>	<del> </del> -
CITY	<u> </u>	STATE	ZIP CODE		260	- Hellel	<del>/ </del>	<del> </del>
Legwoo	. [	145	66211		503	- Kei Vet	1	<del> </del>
		HOLE SIZE	5 1/8	_  _ HOLE DEPTH	740	CASINO SIZE	2 2 2	<u> </u>
CASING DEPTH		DRILL PIPE	J (. C)	_TUBING		CASING SIZE 8		<u> </u>
SLURRY WEIGH		SLURRY VOL_		WATER gal/s	k	CEMENT LEFT,	OTHER	
DISPLACEMENT	1.//	DISPLACEMEN'	r PSI ROC	MIX PSI 2		RATE 4	M CASING	'e5
REMARKS: H		0 5056		Estab			Milan	
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ACCOUNT CODE	QUANITY o	r ÚNITS	DE	SCRIPTION of	SERVICES a	r PRODUCT	UNIT PRICE	TOTAL
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5406		7.2	MILEAGE		_	368	<del></del>	1085
5402	738	?	rasin	· Roo	tage	348	<del></del>	0.4.00
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avin 3737						<b>₹</b> (seg = 1.0)	SALES TAX ESTIMATED	107.45
avin 3737	m dr	9.		TITLE		Action 1 to 16	SALES TAX	107.45

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

October 23, 2013

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

Re: ACO1 API 15-121-29441-00-00 Chandler 3HP SW/4 Sec.13-16S-21E Miami 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