Confidentiality Requested: Yes No

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

1165690

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:
OG GSW Temp. Abd.	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?
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 #:	Location of huid disposa in nauled offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached 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	1165690
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 Yes No (Attach Additional Sheets)		L	Log Formation (Top), Depth and Datum Sample			Sample	
(Attach Additional S Samples Sent to Geol		Yes No	Nam	е		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c	RECORD Ne		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 / SQL	JEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydrau	ulic fracturing treatment	on this well?		Yes	No (If No, skip	o questions 2 an	d 3)
Does the volume of the to	otal base fluid of the hyd	raulic fracturing treatment ex	ceed 350,000 gallons	?	No (If No, skip	o question 3)	
Was the hydraulic fractur	ing treatment informatio	n submitted to the chemical o	disclosure registry?	Yes	No (If No, fill o	out Page Three	of the ACO-1)
	PERFORATIO	ON RECORD - Bridge Plug	s Set/Type	Acid Fra	cture Shot Cement	Squeeze Record	4

Shots Per Foot	Specify Footage of Each Interval Perforated				(Amount and Kind	of Material Used)	Depth			
TUBING RECORD:	Siz	ze:	Set At:		Packer	At:	Liner F		No	
Date of First, Resumed	Producti	ion, SWD or ENHF	l.	Producing Me	thod:	oing	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bbl	S.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI						OF COMPLE			PRODUCTION INTE	
Vented Solo		Jsed on Lease			Perf.	Dually	Comp.	Commingled (Submit ACO-4)		nval:
(If vented, Su	bmit ACO	D-18.)		(Submit A			,	(Submit ACO-4)		

Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Astoria SWD 3306 1-34
Doc ID	1165690

All Electric Logs Run

Prizm		
Porosity		
Resistivity		
Mud Log		

Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Astoria SWD 3306 1-34
Doc ID	1165690

Tops

Name	Тор	Datum
Base Heebner	3210	
Lansing	3567	
Cottage Grove	3836	
Swope	4030	
Hertha	4048	
Marmaton	4144	
Oswego Limestone	4161	
Pawnee	4219	
Fort Scott	4267	
Cherokee Group	4280	
Verdigris	4299	
Mississippi Unconformity	4483	
Kinderhook Shale	4863	
Woodford	4936	
Simpson Group	4967	
Simpson Shale	5032	
Oil Creek	5111	
Arbuckle Group	5120	

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

October 29, 2013

Tiffany Golay SandRidge Exploration and Production LLC 123 ROBERT S. KERR AVE OKLAHOMA CITY, OK 73102-6406

Re: ACO1 API 15-077-21972-00-00 Astoria SWD 3306 1-34 NW/4 Sec.34-33S-06W Harper 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, Tiffany Golay

INVOICE



DATE	INVOICE #
10/15/2013	4276

BILL TO	REMIT TO
SANDRIDGE ENERGY, INC. ATTN: PURCHASING MANAGER 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102	EDGE SERVICES, INC. PO BOX 609 WOODWARD, OK 73802

COUNTY	STARTING D	WORK ORDER	RIG NUMBER	LE	ASE NAME	Terms
HARPER, KS	10/14/2013	3319	HORIZON 5	ASTORI	A 3306 1-34 SWD	Due on rec
* 2 Å	ä		Description			
DRILLED 6' OF 7 FURNISHED ANI FURNISHED 60' FURNISHED 1 L FURNISHED WE	D SET 6' X 6' TIN OF 20" CONDUCT OAD(S) MUD LDER AND MATEI ARDS OF GRADE 4 DUT PUMP	HORN CELLAR OR PIPE RIALS				
TOTAL BID \$15,	000.00					
8						
				Sales Ta	ıx (6.15%)	\$93.97
				а	TOTAL	\$15,093.97



Pump Schedule

8 5/8 " Surface

Fluid #	Fluid Type - Name	Surface Density (Ib/gal)	Estimated Avg. Rate (bbl/min)		Water Required (bbl.)
Spacer 1	Fresh Water	8.34	5	10.0	10.0
Lead 1	ALLIED LIGHT WEIGHT CEMENT: TYPE 1 -	12.70	5	73.4	52.6
Tail 1	CLASS A COMMON	15.60	5	33.0	19.3
Displacement 1	Displacement	8.33	5	41.9	41.9

TOTALS	158.3	123.8
Estimated pump time @ 4 bpm	0.66	hrs
Estimated pump time @ 8 bpm	0.33	hrs

Fluids Design		Surface		
Spacer 1 Fresh Water	r	Fluid Density:	8.34 lb/gal	
		Fluid Volume:	10.0 bbls	
	IT WEIGHT CEMENT: TYPE 1 - CLASS /	Ą		
	A:Poz blend, 6% Gel			
	alcium Chloride	Slurry Density:	12.70 lb/gal	
0.25 lb/sk Fl	lo-Seal (Polyflake LCM)	Slurry Yield:	1.87 ft³/sk	
		Mixing Water	10.05 gal/sk	
		Total sacks	220 sks	
		Total barrels	73.4 bbls	
Tail 1 CLASS A COI				
100% Class /		-		
	alcium Chloride	Slurry Density:	15.60 lb/gal	
0.25 lb/sk Fl	o-Seal (Polyflake LCM)	Slurry Yield:	1.20 ft ³ /sk	
		Mixing Water	5.22 gal/sk	
		Total sacks	155 sks	
		Total barrels	33.0 bbls	
			0.22 // / - 1	
Displacement 1 Displacemen	nt	Fluid Density:	8.33 lb/gal	

Pump Schedule

5 1/2 " Production

Fluid #	Fluid Type - Name	Surface Density (Ib/gal)	Estimated Avg. Rate (bbl/min)	224 00 02 (20 00 02 00 02 00 03	Water Required (bbl.)
Spacer 1	Super Flush	8.50	5	30.0	30.0
Lead 1	ALLIED LIGHT WEIGHT CEMENT: TYPE 1 -	12.80	5	188.5	131.3
Tail 1	CLASS A COMMON	14.50	5	36.0	22.0
Displacement 1	Displacement	8.33	5	122.5	122.5

TOTALS	377.0	305.8
Estimated pump time @ 4 bpm	1.57	hrs
Estimated pump time @ 8 bpm	0.79	hrs

Fluids Design	<u> </u>	Production		
Spacer 1 Super Flush		Fluid Density: Fluid Volume:	8.50 lb/gal 30.0 bbls	
		ridia volume.	30.0 0013	
	WEIGHT CEMENT: TYPE 1 - CLASS A			
	Poz blend, 6% Gel			
3 lb/sk Gilson	luid Loss -FL-160	Slurry Density:	12.80 lb/gal	
5 ID/SK GIISON	ie	Slurry Yield: Mixing Water	1.83 ft³/sk 9.51 gal/sk	
		Total sacks	580 sks	
		Total barrels	188.5 bbls	
Tail 1 CLASS A COM 100% Class A				
2% BWOC Pre		Slurry Density:	14.50 lb/gal	
	luid Loss -FL-160	Slurry Yield:	1.44 ft ³ /sk	
	uspension Agent - SA45	Mixing Water	6.60 gal/sk	
5 lb/sk Gilsoni		Total sacks	140 sks	
		Total barrels	36.0 bbls	
Displacement 1 Displacement		Fluid Density: Fluid Volume:	8.33 lb/gal 122.5 bbls	