Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1184126

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 Dorth / 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:, (e.gxxx. xxxxxx) (e.gxxx. xxxxxxx)
Name:	Datum: NAD27 NAD83 WGS84
Wellsite Geologist:	County:
Purchaser:	Lease Name: Well #:
Designate Type of Completion:	Field Name:
New Well Re-Entry Workover	
	Producing Formation:
Gas D&A ENHR SIGW	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)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	
	Operator Name:

Lease Name: _____

Spud Date or **Recompletion Date**

GSW

Date Reached TD

Permit #: _

Completion Date or **Recompletion Date**

____ Permit #:_____ County:

Quarter _____ Sec. _____ Twp.____S. R. ____ East West

_____ License #:_____

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	1184126
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS: Chause important tang of formations paratrated	etail all aaraa Bapart all final	apping of drill stome tools giving interval tooled, time tool

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 Sh	eets)	Yes No		-	n (Top), Depth an		Sample
Samples Sent to Geolog	gical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
			RECORD Ne				
		Report all strings set-o	conductor, surface, inte	ermediate, producti	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							

D	id you perform a hydraulic fracturing treatment on this well?	Yes	No	(If No, skip questions 2 and 3)
D	oes the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes	No	(If No, skip question 3)
V	/as 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 Specify For	I RECOF	RD - Bridge P Each Interval F	lugs Set/Typ Perforated	96		Acid, Fracture, Shot, Ce (Amount and Kino	ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	re:	Set At:		Packer	r At:	Liner F		No	
Date of First, Resumed	Producti	on, SWD or ENHF	} .	Producing M	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	ON OF G	AS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Sold	<u> </u>	Jsed on Lease		Open Hole	Perf.	Uually (Submit A	Comp. 4 <i>CO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Sul	omit ACO	-18.)		Other (Specify)						

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Form	ACO1 - Well Completion
Operator	Jason Oil Company, LLC
Well Name	UNREIN 1
Doc ID	1184126

Tops

Name	Тор	Datum
ANHYDRITE	1345	+866
HEEBNER	3656	-1445
TORONTO	3677	-1466
LKC	3707	-1496
ВКС	4020	-1809
PAWNEE	4115	-1904
CHEROKEE	4227	-2016
MISSISSIPPI	4269	-2058

QUALITY OILWELL CEMENTING, INC. Federal Tax I.D.# 20-2886107

Home Office P.O. Box 32 Russell, KS 67665 No. 7652

785-483-2025 85-324-1041

85-324-1041					and a second in	and the modern and a real of	and a cost of costantine of	CALL PROTOTION , TORU		
Active "In Lander Bor	Sec.	Twp.	Range	1282910100	County	State	On Location	Finish		
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Lease Unrein		Trate	Well No.	·····································	Owner		htte filmes om ra onfe	econtine and tanks		
Contractor Southwind	70	ten tos	this had an a		You are here	lwell Cementing, Inc. by requested to rent	cementing equipmen	t and furnish		
Type Job long string	The Party	-R" 194	י אי אי אי אי אי	REVICE		d helper to assist owr	ner or contractor to d	o work as listed.		
Hole Size 7 %		T.D.	4350	COLORAN COLOR	Charge Ja	son Oil	CANER OF THE PARTY OF THE	THIS AND " HELES		
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UALITY OILWELL CEMENTING, INC. Federal Tax I.D.# 20-2886107

-hone 785-483-2025 Cell 785-324-1041

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DRILL STEM TEST REPORT

Prepared For:

Jason Oil Company LLC

PO Box 701 Russell KS 67665-0701

ATTN: Jim Schoenberger, Ste

Unrein #1

25-20s-20w Pawnee,KS

 Start Date:
 2013.11.27 @ 17:16:03

 End Date:
 2013.11.28 @ 00:24:12

 Job Ticket #:
 55452
 DST #: 1

Trilobite Testing, Inc PO Box 362 Hays, KS 67601 ph: 785-625-4778 fax: 785-625-5620

Printed: 2013.11.29 @ 11:55:59

RILOBITE	DRILL STEM TES	ST REP	ORT	-				
	Jason Oil Company LLC		25-20s-2	20w Paw	nee,KS			
ESTING , IN	PO Box 701 Russell KS 67665-0701		Unrein Job Ticke		DST	#• 1		
	ATTN: Jim Schoenberger,Ste				.27 @ 17:16:03			
GENERAL INFORMATION:	<u> </u>							
Formation:MissDeviated:NoWhipstock:Time Tool Opened:19:27:43Time Test Ended:00:24:12	ft (KB)		Test Type Tester: Unit No:		ntional Bottom chw ager	Hole (Initial)		
Interval:4268.00 ft (KB) To4Total Depth:4275.00 ft (KB) (Hole Diameter:7.88 inches Ho				e Elevation KB to GR/0	2199.	00 ft (KB) 00 ft (CF) 00 ft		
Serial #: 8369 Inside Press@RunDepth: 204.38 psig Start Date: 2013.11.27 Start Time: 17:16:03 TEST COMMENT: 15-IFP-strg bl ir 45-ISIP-strg bl in 15-FFP-strg bl in 45-FSIP-strg bl in 45-FSIP-strg bl in 15-FFP-strg	End Date: End Time: 1 min ok hru-out	2013.11.28 00:24:12	Capacity: Last Calib.: Time On Btm: Time Off Btm:		8000. 2013.11. 1.27 @ 19:24: 1.27 @ 21:30:	28		
Pressure vs	Тіте		PRES		JMMARY			
229 509 Presure 509 Presure 500 Presure	23 Thu	Time (Min.) 0 4 21 63 64 79 123 127	Pressure Ter (psig) (deg 2046.13 103 46.79 102 121.59 120 1306.72 119 133.88 118 204.38 121 1287.99 122	Anr 3.52 Initial 8.83 Open 0.05 Shut- 8.85 Open .76 Shut- 2.27 End S	Hydro-static 1 To Flow (1) In(1) Shut-In(1) 1 To Flow (2)			
Recovery				Gas Rat	es			
Length (ft) Description 0.00 2540'GIP 795.00 CO 72.00 HO&GCM 25%G20%O'	Volume (bbl) 0.00 11.15 0%W35%M 1.01		CI	noke (inches)	Pressure (psig)	Gas Rate (Mcf/d)		
Trilobite Testina. Inc	Ref. No: 55452				11.29 @ 11:55			

	DRILL STEM TES	T REP	ORT	रा				
TRILOBITE	Jason Oil Company LLC		25-20s-20	25-20s-20w Pawnee,KS				
ESTING , INC			Unrein # [*]	1				
	Russell KS 67665-0701		Job Ticket:	55452	DST#:	1		
	ATTN: Jim Schoenberger,Ste		Test Start:	2013.11.27 (@ 17:16:03			
GENERAL INFORMATION:	•							
Formation:MissDeviated:NoWhipstock:Time Tool Opened:19:27:43Time Test Ended:00:24:12	ft (KB)		Test Type: Tester: Unit No:	Convention Ray Schwa 70	al Bottom Ho ager	ole (Initial)		
Interval: 4268.00 ft (KB) To 42 Total Depth: 4275.00 ft (KB) (T 4275.00 ft (KB) (T Hole Diameter: 7.88 inches Hole			Reference I	⊟evations: B to GR/CF:) ft (KB)) ft (CF)) ft		
Serial #: 8700OutsidePress@RunDepth:psigStart Date:2013.11.27Start Time:17:15:10TEST COMMENT:15-IFP-strg bl in 45-ISIP-strg bl bl in	End Date: End Time: 1 min	2013.11.28 00:21:49	Capacity: Last Calib.: Time On Btm: Time Off Btm:		8000.00 2013.11.28			
15-FFP-strg bl th 45-FSIP-strg bl th 45-FSIP-strg bl th Pressure vs. 7	Dk	Time (Min.)	PRESSU Pressure Temp (psig) (deg F					
700 100 100 100 100 100 100 100	110 100 100 100 100 100 100 100 100 100							
Recovery			G	as Rates				
Length (ft) Description	Volume (bbl)		Chok	e (inches) Press	sure (psig)	Gas Rate (Mcf/d)		
0.00 2540'GIP	0.00							
795.00 CO 72.00 HO&GCM 25%G20%O10	11.15 0%W35%M 1.01							
Trilobite Testing Inc.				d: 2013 11 2				

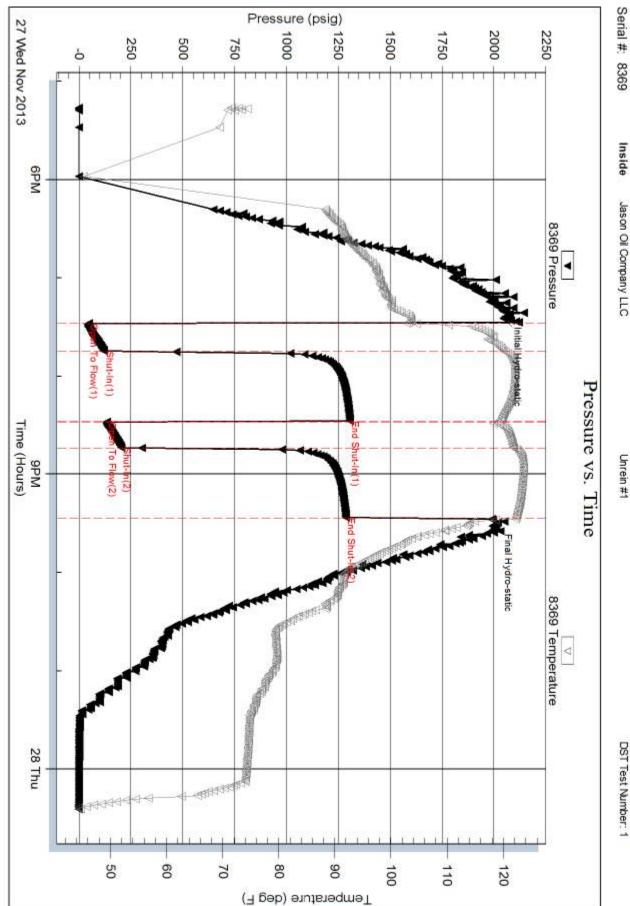
		DRILL STEM TEST REPORT TOOL DIAGRA							
金巻き	UBITE	Jason	Oil Company	LLC		25-20s-20w Pawnee	25-20s-20w Pawnee,KS		
	RILOBITE		c 701			Unrein #1			
		Russel	IKS 67665-0	701		Job Ticket: 55452	DST#:1		
151		ATTN:	Jim Schoen	berger,Ste		Test Start: 2013.11.27 (@ 17:16:03		
Tool Information		ļ							
Drill Pipe: Len	gth: 4252.00 ft	Diameter:	3.80 in	ches Volume:	59.64 bbl	Tool Weight:	2200.00 lb		
Heavy Wt. Pipe: Len	gth: 0.00 ft	Diameter:	0.00 ir	ches Volume:	0.00 bbl	Weight set on Packer	: 25000.00 lb		
Drill Collar: Len	gth: 0.00 ft	Diameter:	0.00 ir	ches Volume:	0.00 bbl	Weight to Pull Loose:	60000.00 lb		
Drill Dina Abaya KD:	E 00 ft			Total Volume:	59.64 bbl		0.00 ft		
Drill Pipe Above KB:	5.00 ft 4268.00 ft					String Weight: Initial	46000.00 lb		
Depth to Top Packer: Depth to Bottom Packe						Final	47000.00 lb		
Interval between Packe									
Tool Length:	28.00 ft								
Number of Packers:	20.00 11	Diameter:	6.75 ir	ches					
Tool Comments:	2	Diameter.	0.75 1	iches					
Tool Description	Le	ngth (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths			
Change Over Sub		1.00			4248.00	0			
Shut In Tool		5.00			4253.00				
		5.00			4258.00				
Hydraulic tool					4263.00	21.00	Bottom Of Top Pack		
Hydraulic tool Packer		5.00			4200.00				
Hydraulic tool Packer Packer		5.00 5.00			4268.00				
Packer Packer									
Packer Packer Stubb		5.00	8369	Inside	4268.00				
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RILO TES		DRI	F	FLUID SUMMARY			
	RILOBITE	Jason	Oil Company LLC	w Pawnee,K	S		
	ESTING , INC	PO Box	x 701		Unrein #1		
			Russell KS 67665-0701 ATTN: Jim Schoenberger,Ste				DST#:1
V 37		ATTN:				Job Ticket: 55452 Test Start: 2013.11.27 @ 17:	
Mud and Cu	shion Information						
Mud Type: Ge	el Chem		Cushion Type:			Oil API:	35 deg API
Mud Weight:	9.00 lb/gal		Cushion Length:		ft	Water Salinity:	ppm
√iscosity:	52.00 sec/qt		Cushion Volume:		bbl		
Nater Loss:	8.77 in ³		Gas Cushion Type:				
Resistivity:	ohm.m		Gas Cushion Pressur	e:	psig		
Salinity:	7000.00 ppm						
-ilter Cake:	2.00 inches						
Recovery Int	formation		Decement Table				
	·		Recovery Table			7	
	Leng ft	tn	Description		Volume bbl		
		0.00	2540'GIP		0.00	D	
		795.00	СО		11.15	2	
	<u> </u>	72.00	HO&GCM 25%G20%O10%W	/35%M	1.01	<u>o</u>]	
	Num Fluid Samp Laboratory Nar Recovery Com	ne:	Num Gas Bombs: Laboratory Locatio	0 on:	Serial #		

Printed: 2013.11.29 @ 11:56:01

Ref. No: 55452





Unrein #1

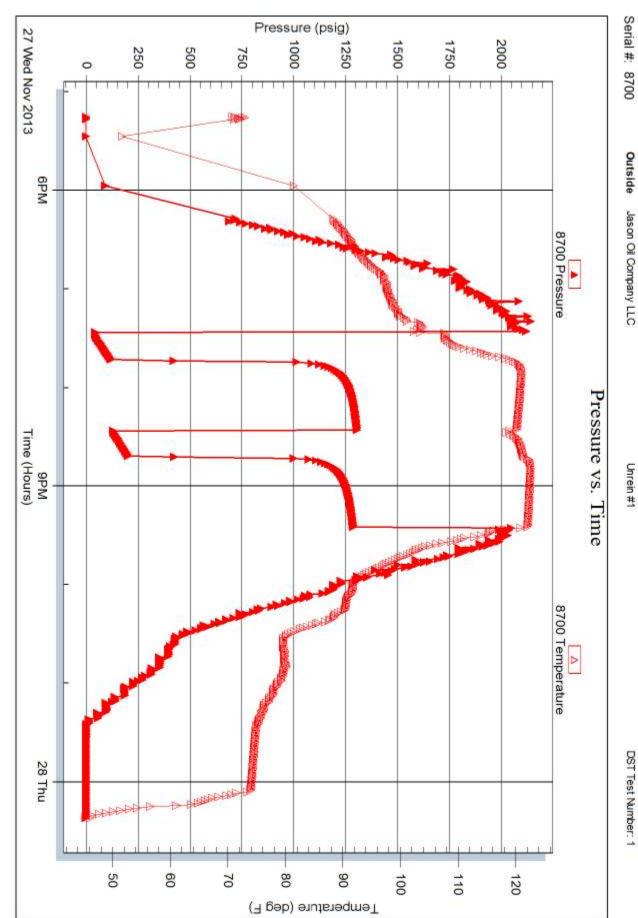
DST Test Number: 1

Inside

Printed: 2013.11.29 @ 11:56:01

Ref. No: 55452

Trilobite Testing, Inc



DST Test Number: 1

RILOBITE TESTING	NC		Test Ticket				
	way • Hays, Kansas 6760)1	NO.	55452			
Well Name & No. Unrein # /		Test No	1	Date //-27-	13		
Company JASON O, Compan	y LC	Elevation	2211	кв 2199	GL		
Address P.O Box 701 Rus	sell, Ko 6766	5-070					
Co. Rep/Geo. STeve Reed	/	Rig6	uThwind	11970			
Location: Sec. 25 Twp. 205	Rge. <u>20</u> ω	Co. PAU		State 6			
Interval Tested 4268-4275		M155					
Anchor Length 7	Drill Pipe Run	4252	M	ud Wt. 9, 2			
Top Packer Depth 4263	Drill Collars Run			s_ 52			
Bottom Packer Depth 4268	Wt. Pipe Run_	-	W	R. 8.8			
Total Depth 4275	Chlorides	7000		CM /#			
	BLOWINIM		51 8				
	BLOW They-ou						
- ^	BLOW THRU-0	/					
	g BLOW BACK						
Rec 2540 Feet of GIP		%gas	%oil	%water	%mud		
Rec 795 Feet of CO		%gas	%oil	%water	%mud		
Rec 72 Feet of HO46C1	n	2.5 %gas	20 %oil	15 %water 3	5 %mud		
Rec Feet of		%gas	%oil	%water	%mud		
Rec Feet of		%gas	%oil	%water	%mud		
Rec Total	2 Gravity 35	API RW	°F (Chlorides	ppm		
(A) Initial Hydrostatic 2046	Test 1250		T-On Loca	ation 1545			
(B) First Initial Flow 46	🖸 Jars			1- 1/	1		
(C) First Final Flow 12	Safety Joint		T-Open_	1925	,		
(D) Initial Shut-In 1306	Circ Sub		T-Pulled _	2125			
(E) Second Initial Flow	Hourly Standby		T-Out	0024			
(F) Second Final Flow 204	Mileage 106		Comment D	ts			
(G) Final Shut-In 1288	🗅 Sampler						
(H) Final Hydrostatic 2001	Straddle						
	Shale Packer			d Shale Packer			
Initial Open	D Extra Packer			ed Packer			
Initial Shut-In45	Extra Recorder			Copies 0			
Final Flow 15	Day Standby			1414.30			
Final Shut-In 45	Accessibility						
	Sub Total 1414.3				1.1		
			Pour SI	11000	LOU		

Approved By _______ Trilobite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.