

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1190272

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- ☐ New Well ☐ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SIOW
- ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
- ☐ OG ☐ GSW ☐ Temp. Abd.
- ☐ CM (Coal Bed Methane)
- ☐ Cathodic ☐ Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- ☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD
- ☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer
- ☐ Commingled Permit #: _____
- ☐ Dual Completion Permit #: _____
- ☐ SWD Permit #: _____
- ☐ ENHR Permit #: _____
- ☐ GSW Permit #: _____

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

_____ Feet from ☐ North / ☐ South Line of Section

_____ Feet from ☐ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

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

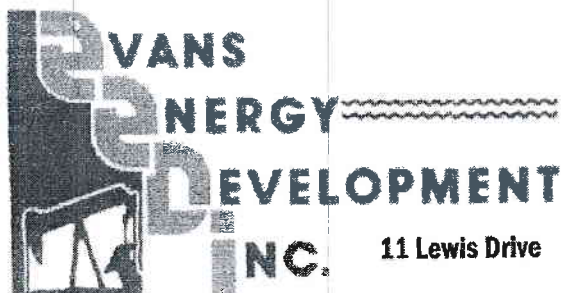
☐ UIC Distribution

ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____

Form	ACO1 - Well Completion
Operator	Justin Energy Corporation
Well Name	North Hoehn I-3
Doc ID	1190272

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	9	7	10	22	Portland	6	50/50 POZ
Completion	5.6250	2.8750	8	715	Portland	113	50/50 POZ



11 Lewis Drive

Paola, KS 66071

**Oil & Gas Well Drilling
Water Wells
Geo-Loop Installation**

Phone: 913-557-9083

Fax: 913-557-9084

WELL LOG

Justin Energy Corporation

North Hoehn #1-3

API #15-059-26,577

January 29 - February 6, 2014

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
9	soil & clay	9
20	lime	29
7	shale	36
10	lime	46
4	shale	50
19	lime	69
32	shale	101
20	lime	121
6	shale	127
2	lime	129
73	shale	202
22	lime	224
5	shale	229
1	lime	230
19	shale	249
4	lime	253
31	shale	284
6	lime	290
7	shale	297
1	lime	298
16	shale	314
7	lime	321
5	shale	326
42	lime	368
3	shale	371
4	lime	375
3	shale	378
5	lime	383 base of the Kansas City
111	shale	494
3	silty shale	497
3	broken sand	500 50% brown sand 50% shale good bleeding
32	shale	532
8	lime	540
7	shale	547
13	oil sand	560 brown & green good bleeding few thin shale seams
2	silty shale	562
24	shale	586
9	lime	595

13	shale	608
3	lime	611 brown no oil
9	shale	620
4	lime	624
7	shale	631
2	lime	633
5	shale	638
5	lime	643 broken limestone good bleeding (soft)
2	lime	645 no oil
7	shale	652
2	silty shale	654
2	limey sand	656 limey sand white no oil
8	oil sand	664 brown sand light bleeding
4.5	oil sand	668.5 brown sand good bleeding
4.5	broken sand	673 70% brown sand 30% shale good bleeding
4	oil sand	677 brown good bleeding
6	broken sand	683 50% brown sand 50% shale
3	shale	686
1	oil sand	687 black & brown good bleeding
2	oil sand	689 black sand good bleeding
36	shale	725 TD

Drilled a 9 7/8" hole to 22.4'

Drilled a 5 5/8" hole to 725'

Set 22.4' of 7" casing threaded and coupled cemented with 6 sacks of cement.

Set 715' of new 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe and 1 clamp.

	Core Times	
	<u>Minutes</u>	<u>Seconds</u>
652	1	43
653	1	25
654	2	53
655	2	0
656	1	3
657		37
658		36
659		52
660		52
661		48
662		39
663		46
664		52
665		58
666	1	10
667	1	15
668	1	0
669	1	4
670		57
671	1	2
672		49
673		42
674		43
675		46
676		52
677		59
678		59
679		52
680		53
681		59
682		53
683		48
684		41
685		42
686		52
687		54
688		59
689		54
690		55

CONSOLIDATED
Oil Well Services, LLC

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

265890

TICKET NUMBER 42621
LOCATION Ottawa
FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-7-14	4174	N. Hoehn T-3	NE 20	16	21	FR
CUSTOMER Justin Energy						
MAILING ADDRESS 40971 W 247th						
CITY Hillsville	STATE KS	ZIP CODE 66092	TRUCK # 730 368 369 510	DRIVER Alamad Ar. McD Der Mas Set Tur	TRUCK # Safety	DRIVER Meat

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>725</u>	CASING SIZE & WEIGHT <u>2 7/8</u>
CASING DEPTH <u>715</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING <u>yes</u>
DISPLACEMENT <u>4.2</u>	DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>

REMARKS: Held meeting. Established rate down casing. Mixed & pumped 100# gel followed by 113.5K 50 x 50 cement plus 370 gel. Circulated cement. Flashed pump. Pumped plug to casing TD. Well held 800 PSI for 30 minute MIT Set float. Closed valve.

Evans, Mitchell

Alan Mader

[illegible]

Revin 3737

no company rep

AUTHORIZATION Jim Oka 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.