Confidentiality Requested: Yes No

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

1197873

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:			
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)			
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:			
G OG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet			
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used?			
	If yes, show depth set: Feet			
If Workover/Re-entry: Old Well Info as follows:				
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 #:	Location of huid disposa in natied 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	1197873
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INSTRUCTIONS: Show important tapp of formations papetrated. Do	tail all cares . Report all	final copies of drill stome taste giving interval tested, 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 Sheets)		Yes No	L	og Formatio	n (Top), Depth and	, Depth and Datum	
Samples Sent to Geolog		Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING Report all strings set-c			on, etc.		
Purpose of String Size Hole Size Casing Weigl		Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
		ADDITIONAL	CEMENTING / SQL	EEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing							
Plug Off Zone							
Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3)						d 3)	
Does the volume of the tota	I base fluid of the hyd	raulic fracturing treatment ex	ceed 350,000 gallons'	? Yes	No (If No, skip	question 3)	
Was the hydraulic fracturing	treatment informatio	n submitted to the chemical o	lisclosure registry?	Yes	No (If No, fill o	out Page Three o	of the ACO-1)

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated						Acid, Fracture, Shot, Ce (Amount and King	ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Size:	Set At:		Packe	r At:	Liner F	Run:	No	
Date of First, Resumed Prod	uction, SWD or ENHF	3.	Producing Me	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours	Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION O	F GAS:			METHOD	OF COMPLE	TION:		PRODUCTION IN	TERVAL:
Vented Sold	Used on Lease		Open Hole	Perf.	Dually (Submit A	Comp. 4 <i>CO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Submit A	NCO-18.)		Other (Specify)			,			
		-				_			

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

	ONSOLIDATED Dil Well Services, LLC	26626		TICKET NUMB	Hawg	
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) Box 884, Ch	iunato, no oor to	IELD TICKET & TREA		ORT	an an an Ang	
DATE	or 800-467-8676 CUSTOMER # W	CEME ELL NAME & NUMBER	N I SECTION		DAVIOR	
			p+	TOWNSHIP	RANGE	COUNTY
1-25-14 JSTOMER	4015 Wilse	1× 1.8	NEL	18	22	Mi
JT	C ON		TRUCK #	DRIVER	TRUCK #	DRIVER
AILING ADDRE	ESS		730	Ab Mad	Safet	x Me
3568	8 Plum Creek	ζ	368	Bal MaD		Y V - I CC
TY	STATE	ZIP CODE	375	Ke: Det		
USqu	glomie KS	66064	548	Mils Hag		
1	49. StringHOLE SIZE	<u> 5 °/8</u> Hole Dep	тн <u>620</u>	CASING SIZE & W	EIGHT V.Q	5
ASING DEPTH	60 DRILL PIPE	TUBING			OTHER	
URRY WEIGH	SLURRY VO	L WATER ga	l/sk	CEMENT LEFT in (		×
SPLACEMENT	32 DISPLACEM	ENT PSI 800 MIX PSI	200	RATE 460.	m	
EMARKS: Hu	eld neetins	Established	2 vate d	own ca	Silae 1	Nirad
and p	rumped 100	# gel to flu	sh hole	, Mixe	C D DL	mpon
78 \	SIS OUC pl	us by flosea	L PPr S.C	3CK. CI	realar	tel
CPMP.	at. Flushe	I pump. F	y march	Plue 1	to rac	inc
TI	Nert held	800 PSI	for 30	minute	AAT.	
Set 7	Flogt, Close	Dijalup,				
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<u> </u>	Drilling		*	All	mala	der
	Drilling aylor Hermann	1		Ail	Ma	der
ACCOUNT			of SERVICES or PR		UNIT PRICE	Л
	aylor Hermann	DESCRIPTION	of SERVICES or PR			TOTAL
ACCOUNT	aylor Hermann	DESCRIPTION PUMP CHARGE	of SERVICES or PR			
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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

	Operator License #	32834		API #
	Operator	JTC Oil, Inc.		Lease Na
	Address	PO Box 24386		Well #
	City	Stanley, KS 66283		
	Contractor	JTC Oil, Inc.		Spud Da
	Contractor License #	32834		Cement
	T.D.	620		Location
	T.D. of pipe	601		
	Surface pipe size	7"		
	Surface pipe depth	20'		County
	Well Type	Injection		
	Driller's	s Log		
Thickness	Strata	From	То	
2	soil	0	2	
27	clay	2	29	
14	lime	29	43	
10	shale	43	53	
30	lime	53	83	
4	black shale	83	87	
19	lime	87	106	
4	coal	106	110	
16	lime	110	126	
170	shale	126	296	
9	lime	296	305	
56	shale	305	361	
7	lime	361	368	
12	shale	368	380	
3	lime	380	383	
16	black shale	383	399	
10	lime	399	409	
29	shale	409	438	
5	lime	438	443	
37	shale	443	480	
38	black shale	480	518	
5	sandy	518	523	
38	shale	523	561	
3	oil sand	561	564	v-good
3	oil sand	564	567	v-good
3	oil sand	567	570	v-good
4	oil sand	570	574	v-good
3	oil sand	574	577	v-good
43	black shale	577	620	

API # Lease Nan Well #	ne	15-121-297 Wilson A I-8	73-00-0	00
Spud Date Cement D Location	ate	2/13/2014 2/25/2014 Sec 4 feet from	T 18 N	R 22 line
County	330	feet from Miami	E	line

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