

Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1200858

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:		
GG GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet		
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No		
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet		
	If Alternate II completion, cement circulated from:		
Operator:	feet depth to:w/sx cmt.		
	w/sx cmi.		
Original Comp. Date: Original Total Depth:			
Deepening Re-perf. Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)		
Plug Back Conv. to GSW Conv. to Producer			
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 #:	On eventury Name a		
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	1200858
Operator Name:	Lease Name:	Well #:
Sec TwpS. R   East  West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated De	tail all carea. Depart all final	appias of drill stamp tools giving interval toolad, 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 She	eets)	Yes No		-	on (Top), Depth ar		Sample
Samples Sent to Geolog	gical Survey	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-o	RECORD Ne		ion, 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 / SQU	EEZE RECORD			
Purpose:	Depth	Turne of Operation	III On also I land		Turne and D		

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

No

(If No, skip question 3) (If No, fill out Page Three of the ACO-1)

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated					96	/		ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At		Packe	r At:	Liner R		No	
Date of First, Resumed F	Producti	on, SWD or ENHF	<b>}</b> .	Producing N	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wat	ər	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD OF COMP			_			PRODUCTION INTE	RVAL:			
Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)										
(If vented, Sub	mit ACO	-18.)		Other (Specify)		Cubinit		(Submit ACO-4)		

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

Form	ACO1 - Well Completion		
Operator	Lasso Energy LLC		
Well Name	Bair 1		
Doc ID	1200858		

Tops

Name	Тор	Datum
latan	1805	-443
Stalnaker	1835	-473
Perry	2006	-644
Layton	2237	-875
Kansas City	2400	-1038
Base Kansas City	2558	-1196
Marmaton Group	2623	-1261
Cherokee	2767	-1405
Cattleman	2865	-1503
Mississippian Chert	3541	-1676
Mississippian Lime	3050	-1688
Kinderhook	3482	-2120
Arbuckle	3541	-2122

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Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
0	7,000 PSIG CIBP (Existing)	Weatherford 5.5" DB-5 CIBP	3010
4	Cattleman Perfortions (Existing)	24 holes	2866-2872
4	Ft. Scott Perforations (Existing)	24 holes	2742-2748
4	Pawnee Perforations (Existing)	24 holes	2704-2710
4	Marmaton Perforations	24 holes	2626-2632
0	Marmaton Acid	500 gal 15% NE-FE	2626-2632
4	Kansas City Perforations	8 holes	2446-2448
0	Kansas City Acid	500 gal 15% NE-FE	2446-2448
4	Layton Perforations	2 holes	2262.5-2263.0

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Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	23	339	60/40 POZ		3% Calcium Chloride
Production	7.875	5.5	15.5	3539.5	Common	225	AA2

