Confidentiality Requested:
☑ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1207535

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 # 34942
Name: Magnum Exploration Kansas, LLC
Address 1: 8268 CR 262
Address 2:
City: CLYDE State: TX Zip: 79150 + __ __ __ __
Contact Person: James Roberts
Phone: (817) 881-9040
CONTRACTOR: License # 33734
Name: Hat Drilling LLC
Wellsite Geologist: NA
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 #:

5/7/2014	5/8/2014	5/8/2014
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-045-22214-00-00
Spot Description:
SE - SE - SW - SW Sec. 25 Twp. 13 S. R. 20 ☑ East ☐ West
195 Feet from ☐ North / ☑ South Line of Section
3995 Feet from ☑ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☐ SW

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Douglas
Lease Name: Thrasher Well #: 3
Field Name:
Producing Formation: Squirrel
Elevation: Ground: 920 Kelly Bushing: 0
Total Vertical Depth: 805 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from:
feet depth to: 40 w/ 8 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 1500 ppm Fluid volume: 80 bbls
Dewatering method used: Evaporated

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: 05/28/2014
☑ **Confidential Release Date:** 05/27/2016
☑ **Wireline Log Received**
☐ **Geologist Report Received**
☐ **UIC Distribution**
ALT ☐ I ☑ II ☐ III **Approved by:** NAOMI JAMES **Date:** 05/29/2014

[redacted] 1207535

Operator Name: Magnum Exploration Kansas, LLC Lease Name: Thrasher Well #: 3

Sec. 25 Twp. 13 S. R. 20 ☑ East ☐ West County: Douglas

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)

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☑ Yes ☐ No

List All E. Logs Run:

GammaRay/Neutron/CCL

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum

GammaRay

CASING RECORD ☑ New ☐ Used

Report all strings set-conductor, surface, intermediate, production, 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
Surface	9	7	10	40	Portland	8	50/50 POZ
Completion	5.6250	2.8750	8	799	Portland	140	50/50 POZ

ADDITIONAL CEMENTING / SQUEEZE RECORD

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

Did you perform a hydraulic fracturing treatment on this well? ☑ Yes ☐ No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☑ No *(If No, skip question 3)*

Was 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 RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record *(Amount and Kind of Material Used)*	Depth
3	716-726	2" DML RTG	10

TUBING RECORD: Size: Set At: Packer At: Liner Run: ☐ Yes ☐ No

Date of First, Resumed Production, SWD or ENHR. 5/8/2014

Producing Method: ☐ Flowing ☑ Pumping ☐ Gas Lift ☐ Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. *(Submit ACO-5)* ☐ Commingled *(Submit ACO-4)* ☐ Other *(Specify)* _____

PRODUCTION INTERVAL:

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

Form	ACO1 - Well Completion
Operator	Magnum Exploration Kansas, LLC
Well Name	Thrasher 3
Doc ID	1207535

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	40	Portland	8	50/50 POZ
Completion	5.6250	2.8750	8	799	Portland	140	50/50 POZ

HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Thrasher #3
API # 15-045-22214-00-00
SPUD DATE 05-07-14

Footage	Formation	Thickness	
2	topsoil	2	Set 40' of 7"
24	sand stone	22	TD 805'
53	shale	29	Ran 799' of 2 7/8 on 05-08-14
80	sand(brn)	27	
85	shale	5	
88	lime	3	
99	shale	11	
114	sand(brn)	15	
133	lime	19	
138	shale	5	
145	lime	7	
158	shale	13	
179	lime	21	
211	shale	32	
224	lime	13	
258	shale	34	
260	lime	2	
301	shale	41	
306	lime	5	
327	shale	21	
337	lime	10	
352	shale	15	
368	lime	16	
375	shale	7	
409	lime	34	
417	shale	8	
438	lime	21	
448	shale	10	
458	lime	10	
720	shale	262	Hertha
725	oil sand	5	good odor, strong bleed
805	shale	80	80% shale, little show, little odor

CONSOLIDATED
Oil Well Services, LLC

268016

TICKET NUMBER 47183
LOCATION Oxhaum KS
FOREMAN Fred Mader

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-8-14	5700	Thrasher #3	SW 35	13	20	DG.

CUSTOMER: Magnum Exploration KS LLC
MAILING ADDRESS: 8768 County Rd 262
CITY: Clyde | STATE: TX | ZIP CODE: 79510

TRUCK #	DRIVER	TRUCK #	DRIVER
712	Fre Mad		
495	Har Bec		
675	Ke: Det		
503	Kei Car		

JOB TYPE Longstring | HOLE SIZE 5 7/8 | HOLE DEPTH 809 | CASING SIZE & WEIGHT 2 7/8 EUE
CASING DEPTH 799 | DRILL PIPE | TUBING | OTHER
SLURRY WEIGHT | SLURRY VOL | WATER gal/sk | CEMENT LEFT in CASING 2½" Plug
DISPLACEMENT 4.65 BBL | DISPLACEMENT PSI | MIX PSI | RATE 5 BPM

REMARKS: Held crew safety meeting. Establish circulation. Mix Pump 100# Gel Flush. Mix & Pump 140 SKS 50/50 Poz Mix Cement 2% Gel 2% Calcium Chloride ¼# Flo Seal/sk. Cement to surface. Flush pump & lines clean. Displace 2½" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set Float Valve. Shut in Casing

Hat
McGown Drilling. Cott.

Fred Mader

ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495		1085.00
5406	25mi	MILEAGE	495	105.00	
5402	799	Casing footage			N/C
5407	Minimum	Ton Miles	503		368.00
5502C	2 hrs	80 BBL Vac Truck	675		200.00
1124	140 SKS	50/50 Poz Mix Cement		1610.00	
1118B	336#	Premium Gel		23.92	
1102	236#	Calcium Chloride		184.08	
1107	35#	Flo-Seal		86.45	
		Material		1954.45	
		Less 30%		-586.34	
		Total			1368.10
4402	1	2½" Rubber Plug			29.50
				3883.81	
			7.15%	SALES TAX	99.94
				ESTIMATED TOTAL	3255.55

Ravin 3737

AUTHORIZTION [signature] TITLE [signature] 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 for