

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1208951

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:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
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:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached 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								

Page Two



Operator Name:				_ Lease l	Name: _			Well #:				
Sec Twp	S. R	East V	West	County	:							
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	itic pressures, bot d.	tom hole temp	erature, flui	d recovery,		
Final Radioactivity Lo- files must be submitte						gs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log		
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar					
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Da	tum		
Cores Taken Electric Log Run		☐ Yes ☐ Yes	☐ No ☐ No									
List All E. Logs Run:												
			CASING		☐ Ne							
	0: 11-1-	· ·				ermediate, product		// OI	T	d Damasat		
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs. /		Setting Depth	Type of Cement	# Sacks Used		d Percent itives		
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD						
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used	Jsed Type and Percent Additives						
Perforate Protect Casing												
Plug Back TD Plug Off Zone												
Did you perform a hydrau	•					Yes	No (If No, ski	p questions 2 ar	nd 3)			
Does the volume of the to							= :	p question 3)	of the ACO	()		
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemicai d	isciosure re	gistry?	Yes	No (If No, fill	out Page Three	or the ACO-1	<i>)</i> 		
Shots Per Foot	PERFORAT Specify	Bridge Plugs Interval Perf				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)						
TUBING RECORD:	Size:	Set At:		Packer A	i:	Liner Run:	Yes No					
Date of First, Resumed	Production, SWD or Ef	NHR. Prod	ducing Meth	ıod:		1						
			Flowing	Pumpin	g	Gas Lift C	Other (Explain)					
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. (Gas-Oil Ratio		Gravity		
DISPOSITIO	ON OF GAS:		M	METHOD OF	COMPLE	ETION:		PRODUCTIO	ON INTERVA			
Vented Sold		Open		Perf.	Dually	Comp. Cor	mmingled					
	bmit ACO-18.)		(Specify)		(Submit)	ACO-5) (Sub	mit ACO-4)					

SCHAAL DRILLING, CO. PO BOX 416 BURLINGTON, CO. 80807 719-346-8032

FIELD REPORT

SURFACE CASING, DRILLING AND CEMENTING

DRILLING DATE 8-25-10

WELL NAME & LEASE # RRISWD 21-11

MOVE IN, RIG UP, DIG PITS ETC. DATE 8-23-10 TIME 9:30 AM PM

SPUD TIME 6:45 AM PM SHALE DEPTH 270 TIME 10:00 AM PM

HOLE DIA. 12 1/4 FROM $\underline{\mathbf{0}}$ TO 351 TD TIME 11:30 \boxtimes AM \square PM

CIRCULATE, T.O.O.H., MEASURED 333.95 FT CASING 345.95 KB FT SET DEPTH

0 JOINTS 7 0D #/FT 14 15.5 \(\) 17 \(\) 20 \(\) 23 8 JOINTS 8 5/8 0D #/FT 14 \(\) 15.5 \(\) 17 \(\) 20 \(\) 24

PUMP 140 SACKS CEMENT 840 GALLONS DISP. CIRC. 6 BBL TO PIT

CEMENT LEFT IN CSG. 20 FT CENTRALIZER 3

ELEVATION 3710.3

+12KB 3722.3

TYPE: PORTLAND CEMENT I/II ASTM C 150 CEMENT COST \$ 2696.13

PIPE TALLY

- 1. 43.75
- 2. 43.85
- 3. 43.15
- 4. 36.75
- 5. 43.75
- 6. 42.50
- 7. 42.40
- 8. 37.80
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.

TOTAL 333.95





A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

LONGHORN CEMENTING CO.

P.O. BOX 203 Phone: 970-848-0798 Fax: 970-848-0798

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Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

June 06, 2014

Tom Roelfs Rosewood Resources, Inc. 2101 CEDAR SPRINGS RD, STE 1500 DALLAS, TX 75201

Re: ACO-1 API 15-023-21235-00-01 RRI SWD 21-11 NW/4 Sec.11-03S-42W Cheyenne County, Kansas

Dear Tom Roelfs:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 08/25/2010 and the ACO-1 was received on June 06, 2014 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department