

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1211488

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	Twp S. R	East West
Address 2:			Feet	t from North / Sout	h Line of Section
City: St	ate: Zip	D:+	Feet	t from East / West	t Line of Section
Contact Person:			Footages Calculated from Ne	earest Outside Section Corne	r:
Phone: ()			□ NE □ NW	□se □sw	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				g. xx.xxxxx) ((e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27 N		
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	Well #:	
New Well Re-	-Fntrv	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing:	
☐ Gas ☐ D&A ☐ OG	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total Depth:	<u>. </u>
CM (Coal Bed Methane)	G3W	iemp. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet
Cathodic Other (Core	Expl etc.)		Multiple Stage Cementing Co		
If Workover/Re-entry: Old Well Inf			If yes, show depth set:		Feet
Operator:			If Alternate II completion, cen		
Well Name:			feet depth to:		
Original Comp. Date:			loot dopar to:		
Deepening Re-perf.	_	NHR Conv. to SWD	B	D.	
☐ Plug Back	Conv. to GS		Drilling Fluid Management (Data must be collected from the		
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls
Dual Completion	Permit #:		Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if ha	auled offsite:	
☐ ENHR	Permit #:		Operator Name:		
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date Rea	iched TD	Completion Date or	QuarterSec		
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 Approved by: Date:							

Page Two



Operator Name:				Lease N	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
	ow important tops of fo ing and shut-in pressu o surface test, along wi	res, whe	ther shut-in pre	ssure reacl	hed stati	c level, hydrosta	tic pressures, bo			
Final Radioactivity Logilles must be submitted						gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.go	v. Digital	electronic log
Drill Stem Tests Taken Yes (Attach Additional Sheets)			es No			3	on (Top), Depth a			Sample
Samples Sent to Geol	ogical Survey	Ye	es 🗌 No		Nam	9		Тор	L	Datum
Cores Taken Electric Log Run		☐ Y€								
List All E. Logs Run:										
			CASING	RECORD	│ Ne	w Used				
		Repo				rmediate, producti	on, etc.			
Purpose of String	Size Hole Drilled		e Casing t (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		and Percent additives
Purpose	Depth					EEZE RECORD				
Purpose: Perforate	Top Bottom	Туре	pe of Cement # Sacks Used			Type and Percent Additives				
Protect Casing Plug Back TD										
Plug Off Zone										
Did you perform a hydrau	ilic fracturing treatment or	this well?	?			Yes	No (If No, sk	aip questions 2 ar	nd 3)	
	otal base fluid of the hydra		•		•			rip question 3)		
Was the hydraulic fractur	ing treatment information	submitted	to the chemical of	disclosure reg	gistry?	Yes	No (If No, fil	out Page Three	of the ACC	D-1)
Shots Per Foot			RD - Bridge Plug Each Interval Perl				cture, Shot, Cemen		d	Depth
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No	1		
Date of First, Resumed	Production, SWD or ENH	R.	Producing Meth Flowing	nod:	g 🗌	Gas Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil Bl	bls.	Gas	Mcf	Wate	er Bl	ols.	Gas-Oil Ratio		Gravity
DIODOGITI	ON OF CAC			ACTUOD OF	COMPLE	TION		DDODUOTI		\/AL.
Vented Sold	ON OF GAS: Used on Lease		N Open Hole	NETHOD OF \Box Perf.	Dually	Comp. Con	nmingled	PRODUCTIO	λιν ΙΙΝ Ι ΕΚ\	VAL
(If vented, Sub			Other (Specify)		(Submit A	ACO-5) (Subi	mit ACO-4)			

Michael Drilling, LLC P.O. Box 402 Iola, KS 66749 620-365-2755

Company:	Rick Michael	_ Date:	10/05/10
Address:	PO Box 402	Lease:	V Latta
	Iola Kansas 66749	County	Allen
Ordered By	Rick Michael	Well#:	R-2
		API#:	15-001-30109-00-00

Drilling Log

FEET	DESCRIPTION	FEET	DESCRIPTION
0-20	Overburden	714-938	Shale
20-52	Lime	938-942	Sand
52-118	Shale	942-955	Slight Oil Oder
118-162	Lime	955-975	Shale
162-196	Shale	975	TD
196-203	Lime		
203-251	Shale		Surface 20'
251-312	Lime		
312-316	Shale		
316-337	Lime		
337-339	Shale		
339-362	Lime		
362-390	Shale		
390-416	Sand		
416-562	Shale		5- 19
562-585	Lime		
585-638	Sand		
638-660	Lime		
660-668	Shale		
668-672	Lime		
672-684	Black Shale		
684-704	Sandy Lime		
704-709	Shale		
709-714	Lime		

V. LATTA R-Z

802 N. Industrial Rd. P.O. Box 664 Iola, Kansas 66749 Phone: (620) 365-5588

Payless Concrete Products, Inc.

Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery at owner's or intermediary's direction. seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength test when water is added at customer's request.

NOTICE TO OWNER Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filling of a mechanic's lien on the property which is the subject of this contract.

MASH CUSTOMER

MI11/26 RICK MICHAEL BILL TO:P.O. BOX 402 DEL TO:N 1400 N TO S. DAKOTA H 1 1/4 MI N SD TOLA, KS 66749

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	% CAL	DRIVER/TRUCK	% ATR	PLANT/TRANSACTION #
11:07:57a	Land on Land	4.00 yd	8.00 yd	(2) (2)(2)	34	0.00	
DATE	o Date	LOAD#	YARDS DEL.	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
11-24-10	raday	Ĉ	8.00 yd	15111		4.00 in	20110

WARNING IRRITATING TO THE SKIN AND EYES

Contains Portland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water, If Irritation Persists, Get Medical Attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY and BECOMES the PROPERTY Of the PURCHASER UPON LEAVING the PLANT. ANY CHANGES OR CANCELLATION of ORIGINAL INSTRUCTIONS MUST be TELEPHONED to the OFFICE BEFORE LOADING STARTS.

The undersigned promises to pay all costs, including reasonable attorneys' fees, incurred in collecting any sums owed

All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.

Not Responsible for Reactive Aggregate or Color Quality. No Claim Allowed Unless Made at Time Material is Delivered

A \$25 Service Charge and Loss of the Cash Discount will be collected on all Returned Checks. Excess Delay Time Charged @ \$50/HR.

PROPERTY DAMAGE RELEASE (TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)

Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of his truck may possibly cause damage to the premises and/or adjacent property if it places the material in this load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE relieving him and this supplier from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material, and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisin out of delivery of this order. SIGNED **Excessive Water is Detrimental to Concrete Performance** H₂0 Added By Request/Authorized By

GAL X

WEIGHMASTER

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.

QUANTITY CODE DESCRIPTION UNIT PRICE EXTENDED PRICE 1111 WELL (10 SACKS PER UNIT) 4, 100 8.00 76.00 304.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLIN	NDER TEST TAKEN	TIME ALLOWED	SubTotal # 3	04.00
			JOB NOT READY SLOW POUR OR PUMP TRUCK AHEAD ON JOB	6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION		48 % G. 300	19. 15 23. 15
LEFT PLANT	ARRIVED JOB	START UNLOADING	CONTRACTOR BROKE DOWN ADDED WATER	9. OTHER	TIME DUE	_	99, 45
11.00	11:52	2				ADDITIONAL CHARGE 1	
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME			DELAY TIME	ADDITIONAL CHARGE 2	
				4, 1, 7		GRAND TOTAL	

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DX 402 Y TO S DAKOTA

10LA, KS 66749

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TIME	FORMULA	LOAD SIZE	YARDS ORDERED	V PM	DRIVER/TRUCK		PLANT/TRANSACTION #
10:56:53a	WELL	4.00 yd	0.00 yd	0.00	34	7 01R 0.00	TEANT/THANSACTION
DATE	o Wate	LOAD #	YARDS DEL,	BATCH#	WATER TRIM	SLUMP	TICKET NUMBER
11-24-11	Today	1	4.00 yd	15110		4.00 in	20109

WARNING
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Contains Porlland Cement. Wear Rubber Boots and Gloves. PROLONGED CONTACT MAY
CAUSE BURNS. Avoid Contact With Eyes and Prolonged Contact With Skin. In Case of Contact With Skin or Eyes, Flush Thoroughly With Water, If Irritation Persists, Get Medical Attention, KEEP CHILDREN AWAY.

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QUANTITY CODE		DECORPTION				
	DESCRIPTION	A CONTRACTOR OF THE CONTRACTOR		UNIT PRICE	EXTENDED PRICE	
4.00 1.00	WELL TRUCKTMS	WELL (10 S TRUCKING C	ACKS PER UNIT)	4.00	76.00	304.00
4.4.4.0.0	1 (10.10.10. 8 [41.1	THURST NO. 6	THARCE.	1.00	50.00	50.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYL	INDER TEST TAKEN	TIME ALLOWED	obtotal \$	354.00
			JOB NOT READY SLOW POUR OR PUMP TRUCK AHEAD ON JOB	TRUCK BROKE DOWN ACCIDENT CITATION	, en	ax % 6.300	22.30 376.30
LEFT PLANT	ARRIVED JOB	START UNLOADING	CONTRACTOR BROKE DOWN ADDED WATER	9. OTHER	TIME DUE	lder t	376.30
11:12	11:32					ADDITIONAL CHARGE 1	2144
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME			DELAY TIME	ADDITIONAL CHARGE 2	
						GRAND TOTAL	