Confidentiality Requested: Yes No

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

1215205

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:
Gas D&A ENHR SIGW	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
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)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	Leastion of fluid dispaced if hould offsite
ENHR Permit #:	Location of fluid disposal if hauled 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	1215205
Operator Name:	Lease Name:	Well #:
Sec TwpS. R □ East □ West	County:	
INCTRUCTIONS. Show important tang of formations panatrated	Dotail all coros Roport a	Il final conjoc of drill ctome toets giving interval toetod, 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 Sh	eets)	Yes No		0	on (Top), Depth a		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 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
		ADDITIONAL	CEMENTING / SQL	IEEZE RECORD			
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used		Type and I	Percent Additives	

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

Yes

No

No No

No

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

(If No, skip questions 2 and 3) (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					ement Squeeze Record d of Material Used)	Depth			
TUBING RECORD:	Siz	ze:	Set At:		Packe	r At:	Liner R	un:	No	
Date of First, Resumed	Product	ion, SWD or ENHF	٦.	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wat	er	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITI		SAS:			METHOD	OF COMPLE			PRODUCTION INTER	R\/Δ1 ·
Vented Solo (If vented, Sul	J 🗌 t	Used on Lease		Open Hole	Perf.		Comp.	Commingled (Submit ACO-4)		
(Il Venteu, Sui		, 10.)		Other (Specify)					

Form	ACO1 - Well Completion
Operator	Forestar Petroleum Corporation
Well Name	Curry 1-32
Doc ID	1215205

Tops

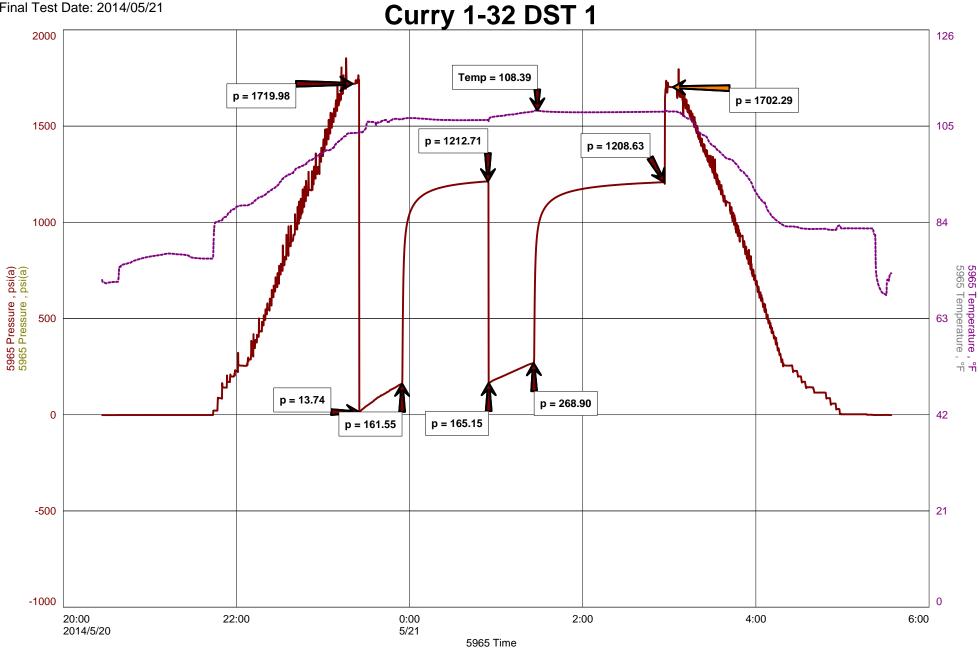
Name	Тор	Datum
Anhydrite	2582	223
Topeka	3541	736
Oread	3702	897
Top Lansing	3764	959
Lansing F	3986	1181
ВКС	4021	1216
Cherokee	4170	1365
Base Cherokee	4299	1494

Form	ACO1 - Well Completion
Operator	Forestar Petroleum Corporation
Well Name	Curry 1-32
Doc ID	1215205

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	12.25	8.625	24	176	Class A	175	3% CC 2% Gel
Production	7.875	5.5	15.5	4050	60/40	235	3%CC 2% Gel, 1/4# Floseal

Forestar Petro Corp DST 1 Oread/Lan A 3636-3780 Start Test Date: 2014/05/20 Final Test Date: 2014/05/21





Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name	Forestar Petro Corp		
Contact	Mike Morgan	Job Number	W076
Well Name	Curry 1-32	Representative	Wilbur Steinbeck
Unique Well ID	DST 1 Oread/Lan A 3636-3780	Well Operator	Excell 10
Surface Location	32-1s-31w Rawlins/Kansas	Report Date	2014/05/21
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Mike Morgan

Test Information

Test Type Formation	Conventional Oread/Lan A	
Well Fluid Type	01 Oil	
Test Purpose (AEUB)	Initial Test	
,		

Start Test Date	2014/05/20 Start Test Time	20:27:00
Final Test Date	2014/05/21 Final Test Time	05:40:00

Test Recovery

Recovery	550' MCW 35%M 65%W
	550' Total Fluid

Tool Sample MCW 15%M 85%W

RW = 48,000 ppm

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\ll	1			
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DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET FILE: Curry 1-32 DST 1

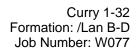
TIME ON: 20:27

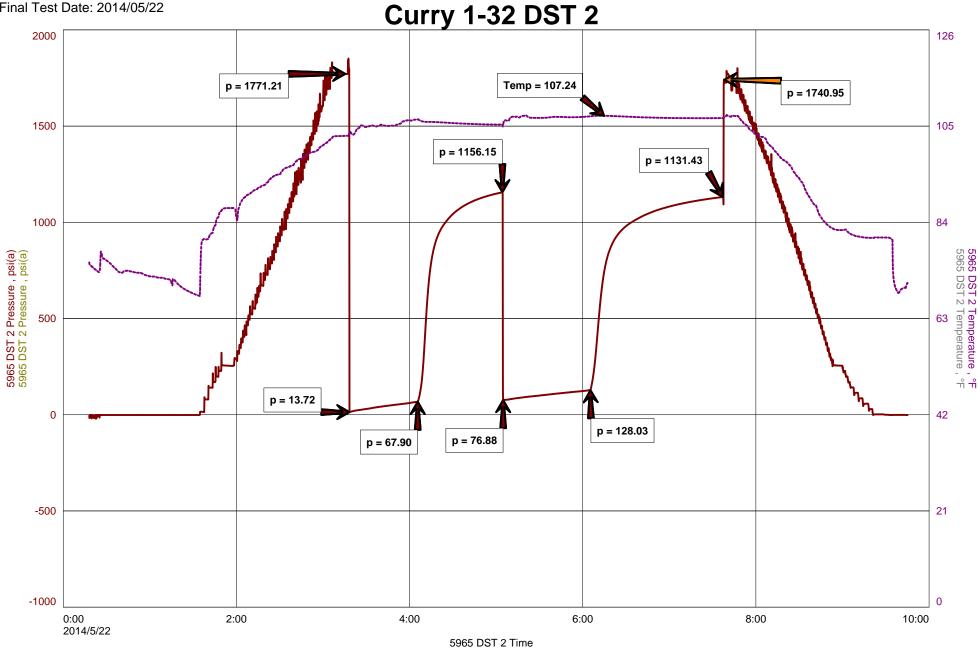
TIME OFF: 5:40

Company_Forestar Petr	o Corp		Lease & Well No.	Curry 1-32			
Contractor Excell 10			Charge to_Foresta				
Elevation 2805 KB			an A Effective Pay		Ft. Ticket	No. V	V076
Date 5-20-14 Sec.			Range				KANSAS
Test Approved By Charlie Stud			Diamond Represent			nbeck	
Formation Test No.	1 Interval Tes						3780 ft.
Packer Depth					1.5 S.M.L.		in.
Packer Depth	3636 ft. Size	6 3/4 in.	Packer depth		ft. Size	6 3/4	in.
Depth of Selective Zone Set_							
Top Recorder Depth (Inside)		3622 _{ft.}	Recorder Number	596	65 Cap.	5,000	P.S.I.
Bottom Recorder Depth (Out	side)	3637 _{ft.}	Recorder Number	54	46 Cap.	5,000	P.S.I.
Below Straddle Recorder De	pth		Recorder Number				
Mud Type CHEMICA					0_ft. I.D		
Weight 9.0	Water Loss		cc. Weight Pipe Leng			2 7/8	
Chlorides		500 P.P.M.	Drill Pipe Length _	306	63 ft. I.D.	3 1/2	in
Jars: Make STERLING	Serial Number	07	Test Tool Length	3	3 ft. Tool Siz	ze3_1/2	-IFin
Did Well Flow? Ye			Anchor Length	14	4_ft. Size	4 1/2	-FHir
Main Hole Size 7 7/8	Tool Joint Size	e4 1/2ir	n. Surface Choke Siz	ze1	_ in. Bottom	Choke Size	9_5/8_ir
Blow: 1st Open: BOB in 1	14min		No Return				
^{2nd Open:} BOB in 1	5min		No Return				
Recovered 550 ft. of M	1CW 35%M 65%W						
Recovered 550 ft. of T	otal Fluid						
Recoveredft. of							
Recoveredft. of							
Recoveredft. of					Price Job		
Recoveredft. of			90 RT	Miles	Other Charg	es	
Remarks: Shale Packer U	sed		Acces	s Charge	Insurance		
Tool Sample MCW 15%	VI 85%W						
RW=48,000 ppm					Total		
Time Set Packer(s)2	23:30 A.M. P.M.	Time Started Off	Bottom 3:00	A.M. P.M. Ma	aximum Tempe	rature	108
Initial Hydrostatic Pressure			(A)	1720 P.S.I.			
Initial Flow Period	Minu	ites3	0 _(B)	14 _{P.S.I.}	to (C)	162 _P	.S.I.
Initial Closed In Period	Minu	utes6	0(D)	1213 P.S.I.			
Final Flow Period	Minu	utes3	0(E)	165 P.S.I. t	o (F)	269 _P	S.I.
Final Closed In Period	Minu	ites9	0 (G)	1209 P.S.I.			
Final Hydrostatic Pressure			(H)	1702 _{P.S.I.}			

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

Forestar Petro Corp DST 2 Lan B-D 3776-3920 Start Test Date: 2014/05/22 Final Test Date: 2014/05/22







Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name	Forestar Petro Corp		
Contact	Mike Morgan	Job Number	W077
Well Name	Curry 1-32	Representative	Wilbur Steinbeck
Unique Well ID	DST 2 Lan B-D 3776-3920	Well Operator	Excell 10
Surface Locatio	n 32-1s-31w Rawlins/Kansas	Report Date	2014/05/22
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Mike Morgan

Test Information

Test Type	Conventional	
Formation	/Lan B-D	
Well Fluid Type	01 Oil	
Test Purpose (AEUB)	Initial Test	

Start Test Date	2014/05/22 Start Test Time	00:18:00
Final Test Date	2014/05/22 Final Test Time	09:45:00

Test Recovery

Recovery	100' Free Oil
	80' GMCO 25%G35%M 40%O
	120' GOCM 10%G 20%O 70%M
	300' Total Fluid

Tool Sample MCO 25%M 75%O

Gravity=27.6 Corrected

	TIME OFF	00:18	2
ell No. Curry 1-32			
Forestar			
ay	Ft	t. Ticket	No
31 W Cou	untyF	Rawlins	Sta
presentative	Will	bur Stein	nbeck
3920 _{ft}			
th			
th			
		/	
umber	5965 Car	p.	5,0
umber			
umber			
_ength		I.D.	
e Length		I.D	
ength	3203 _{ft.}	I.D	3
ength		Tool Size	
gth		Size	
oke Size1		Bottom	Choke
e blow died ir	n 40 mir	า	
e Blow			
			53°
	Pric	e Job	
90 RT Miles	Oth	er Charge	es
Access Charge			
	Tota	al	
	Access Charge	Access Charge Insu	Access Charge Insurance Total

W077

KANSAS

3920 ft.

in.

in.

P.S.I.

in.

in

in

in

in

in

5,000 P.S.I. 5,000 P.S.I.

2 1/4

2 7/8

3 1/2

3 1/2-IF

4 1/2-FH

107

68 P.S.I.

Choke Size 5/8

State

6 3/4

6 3/4

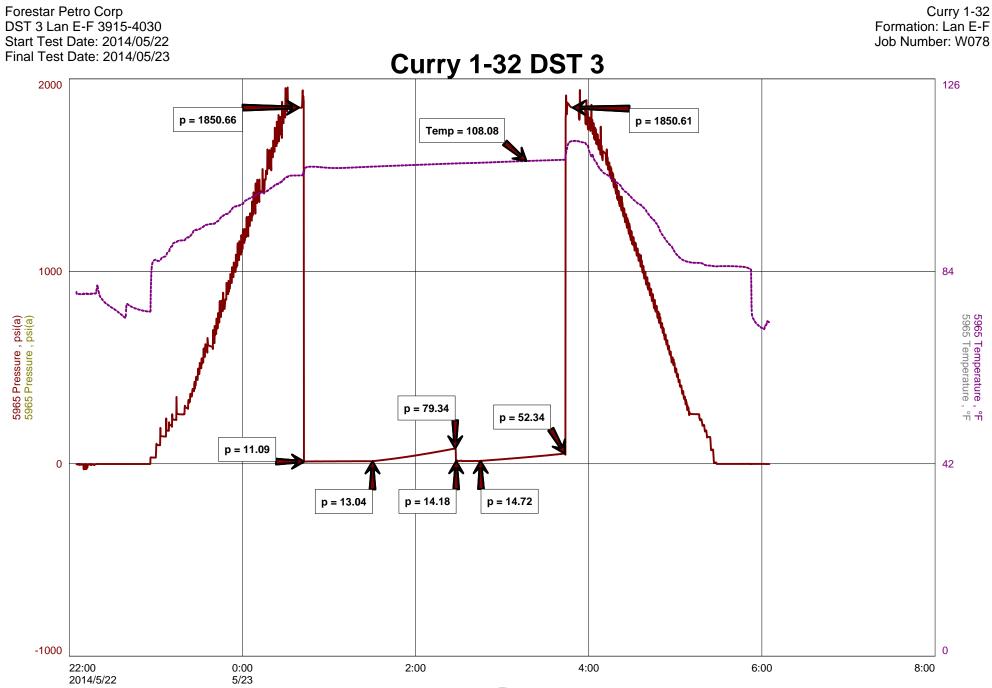
14 P.S.I. to (C) 60 1156 _{P.S.I.} Initial Closed In Period...... Minutes (D) 128_{_P.S.I.} 60 77 P.S.I. to (F)_ Final Flow Period...... Minutes (E) 90 1131 P.S.I. Final Closed In Period......Minutes (G) 1741 _{P.S.I.} Final Hydrostatic Pressure..... ... (H)

45

(B)

Initial Flow Period...... Minutes

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Curry 1-32



Diamond Testing General Report

Wilbur Steinbeck TESTER CELL: 620-282-1573

General Information

Company Name	Forestar Petro Corp		
Contact	Mike Morgan	Job Number	W078
Well Name	Curry 1-32	Representative	Wilbur Steinbeck
Unique Well ID	DST 3 Lan E-F 3915-4030	Well Operator	Excell 10
Surface Locatior	a 32-1s-31w Rawlins/Kansas	Report Date	2014/05/22
Field	Wildcat	Prepared By	Wilbur Steinbeck
		Qualified By	Mike Morgan

Test Information

Test Type	Conventional	
Formation	Lan E-F	
Well Fluid Type	01 Oil	
Test Purpose (AEUB)	Initial Test	

Start Test Date	2014/05/22 Start Te	est Time	22:05:00
Final Test Date	2014/05/23 Final Te	est Time	06:10:00

Test Recovery

Recovery 5' Mud 5' Total Fluid

Tool Sample Mud

X.1.1.1.1
Esusaten Detus Osus

DIAMOND TESTING P.O. Box 157 HOISINGTON, KANSAS 67544 (800) 542-7313 DRILL-STEM TEST TICKET FILE: Curry 1-32 DST 3

TIME ON: 22:05

TIME OFF: 6:10

Company Forestar Petro Corp		Lease & Well No. Curry	1-32				
Contractor Excell 10							
Elevation 2805 KB Formation L				Ft.	Ticket	No.	W078
Date <u>5-22-14</u> Sec. <u>32</u> Twp. <u>1</u>					awlins	State	KANSAS
Test Approved By Charlie Studavant					our Steir	beck	
Formation Test No3 Interval Tested from	391	5 ft. to 4	030 ft. To	al Dep	oth		4030 ft.
Packer Depth 3910 ft. Size6 3/4 in.		Packer depth			5.4 C		in.
Packer Depth 3915 ft. Size6 3/4 in.		Packer depth		ft.	Size	6 3/4	in.
Depth of Selective Zone Set							
Top Recorder Depth (Inside) 3901	ft. I	Recorder Number	596	5 Cap		5,00	00 p.s.i.
Bottom Recorder Depth (Outside) 3916	ft. I	Recorder Number	544	6 Cap	D	5,0	⁰⁰ P.S.I.
		Recorder Number					
Mud Type CHEMICAL Viscosity 57		Drill Collar Length					1/4 ir
Weight 8.9 Water Loss 5.6	cc.	Weight Pipe Length					7/8 i
Chlorides 500 P.P.M	1. 1	Drill Pipe Length	334	2 _{ft.}	I.D	3 1	1/2i
Jars: Make STERLING Serial Number 07		Test Tool Length	3	3 _{ft.}	Tool Siz	e_31	1/2-IFi
Did Well Flow? No Reversed Out No		Anchor Length	11	5 _{ft.}	Size	4 1	1/2-FH i
Main Hole Size 7 7/8 Tool Joint Size 4 1/2	_in. \$	Surface Choke Size	1	_in.	Bottom	Choke S	ize_5/8_i
Blow: 1st Open: Built to 1 1/4"		No Return					
^{2nd Open:} No Blow		No Return					
Recovered ⁵ ft. of Mud							
Recovered 5 ft. of Total Fluid							
Recoveredft. of							
Recoveredft. of							
Recoveredft. of				Price	Job		
Recoveredft. of		90 RT Miles	6	Othe	r Charge	s	
Remarks: Shale Packer Used		Access Cha	arge	Insur	ance		
Tool Sample Mud							
				Total			
Time Set Packer(s) 12:45 A.M. P.M. Time Started 0	Off Bott		А.М. Р.М. Ма	ximum	Temper	ature	108
Initial Hydrostatic Pressure		(A)18	51 P.S.I.				
Initial Flow Period Minutes	45	_(B)	11 _{P.S.I.} t	o (C)_		13	_P.S.I.
Initial Closed In Period Minutes	60	(D)	79 P.S.I.				
Final Flow Period Minutes	15	_(E)	14 P.S.I. to	o (F)		15	P.S.I.
Final Closed In PeriodMinutes	60		52 P.S.I.				
Final Hydrostatic Pressure		(H) 18	51 _{P.S.I.}				

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TICKET NUMBER 43026

100

LOCATION Daties KS FOREMAN Dane Retable

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

FIELD TICKET & TREATMENT REPORT CEMENT

120-401-9210	000-401-001	9	OLINEI				
DATE	CUSTOMER #	WELL NAME & NUI	MBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-24-14	2930	Curry 1-2	37.	32.		31	Rawlins
CUSTOMER			0				
	Forestar	Artroleum	Hernelon	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE				399	mike		
				530	Steve		
CITY		STATE ZIP CODE					
	Analian	HOLE SIZE 7%		4440	CASING SIZE & W	FIGHT 5 1/2.	15.5185
	4050				-	OTHER	
SLURRY WEIGH	IT 12,5/14.2	SLURRY VOL	WATER gal/sl	<u>ر</u>	CEMENT LEFT in	CASING <u>~0 -</u>	74
DISPLACEMENT	<u>95.47</u>	DISPLACEMENT PSI	_ MIX PSI	RATE			
REMARKS: 5	Atrey meet	ing. ling up. Cen	to on 1:	3 5 7'	9'11'13' 15'	17. Bas	ket
		hr. mix s shead					
<u>mix, 80</u>	SKS OWC.	· Wash pump +	Lines. Rel	case plu	y Displace	9512 8	615
of water	Final in	ft 1100 Lencled	at 1700 Ri	5 Down	<u> </u>		

		Thanks Dave	+ crew	
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54010	1	PUMP CHARGE	3175.00	3175.00
5-106	85	MILEAGE	5.45	446.25-
54074	11.73	Ton mileage Delivery	1.75	1745.05
1126	Bo sks	OLOC Cerent	23.70	1896.00
(13)	185 sks	60/40 Poz. mix	15.86	7934,10
1107	46.	Klo Seal	7.97	136,62
11100	400	ka seal	.56	224.00
11428	<u>5 gal</u>	KCL	41.10	205.50
ILIAB	1272	Bentonite	-27	343.44
11446	500 gal	mud flush	1.00	500,00 1
4104	a	5 1/2 Basket	<u> 290 00</u>	290.00 1
4/30	9	51/2 Centralizers	61.60	549.00
4159		51/2 Afu Flost shoe	433.75	433.75
4454		51/2 Latchdown Pluy Assembly	567.00	567.00 4
			546	13445.71
			100 10/0	1344.57
		<u>ecompleted</u>	Duc	12101.14
l	\rightarrow		<u> </u>	
			SALES TAX	.574,43
Ravin 3737	M. Ma		ESTIMATED TOTAL	12675.57
AUTHORIZTION	MA JIL	TITLE	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 form.

CONSOLIDATED 268245		TICKET NUMB		<u>. </u>
PO Box 884, Chanute, KS 66720 FIELD TICKET & TH		PORT		,
	AENT			Ko.
DATE CUSTOMER # WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/16/14 2930 Curry 1-32	32	1	31	Rewlins
CUSTOMER				1246-191 Sec. 5.8
ForestarRdy		DRIVER	TRUCK #	DRIVER
MAILING ADDRESS To 3	1.5 399	Jordan		
Rd 1	11 566	Cody		
CITY STATE ZIP CODE Eint	0			
CASING DEPTH 176.66 DRILL PIPE TUBIN	11 "10 Run Mix 225	sks Com ?	OTHER CASING 20	culation

Approx 10 bbLTO Pit

71		Thanks kanen + Cre	w	
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		TOTAL
54015	(PUMP CHARGE	1150 2	1150.00
5406	75	MILEAGE	€ <u>5,25</u>	393.
5407 A	8.23	Ton Mileage Delivery	P 1.75	1080.00
11045	175 5K3	Class "A" Cement Calcium Chloride	* 18,55	3246 25
1102	494 *	Calcium Chloride	1 <u>94</u>	88,83
11/8 B		Bentonite	1 .27	88,83
			SubTotal Less 10% SubTota 1	6423 - /
			Less 10%	642
			SubTota 1	5780 -
		Completer	SALES TAX	270.13
Revn 3737			ESTIMATED TOTAL	6051.00
	KIM I		DATE	

1

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.