

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1217651

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 I II III Approved by: Date:							

Page Two



Operator Name:				_ Lease I	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in presson surface test, along	sures, whether with final chart	shut-in pre (s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bot d.	tom hole temp	erature, fluid	recovery,
Final Radioactivity Lo- files must be submitte						ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital elec	tronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar		Sam	
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Datu	m
Cores Taken Electric Log Run		Yes Yes	☐ No ☐ No							
List All E. Logs Run:										
				RECORD	Ne					
	0	· ·				ermediate, product		T "0 1	I	
Purpose of String	Size Hole Drilled	Size Ca Set (In 0		Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and I Additiv	
		Al	DDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of C	ement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing	Top Bottom									
Plug Back TD Plug Off Zone										
r lug on zone										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to								p question 3)		
Was the hydraulic fractur	ing treatment information	on submitted to th	ne chemical o	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ON RECORD - Footage of Each					cture, Shot, Cement		d	Depth
	Эреспу	1 oolage of Lacif	iliterval Feli	Orated		(A	THOURT AND KIND OF MA	teriai Oseu)		Берит
TUBING RECORD:	Size:	Set At:		Packer A	+-	Liner Run:				
TOBING FILEGORIS.	0.20	001711.		r donor 7	••	[Yes No			
Date of First, Resumed	Production, SWD or EN	NHR. Pro	oducing Meth		a \Box	Coo Lift 0	Other (Evelein)			
Estimated Dradustics	0.11	Dhla	Flowing	Pumpin			Other (Explain)	Nee Oil D-#-		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	eı B	bls. C	Gas-Oil Ratio	G	iravity
	ON OF GAS:	Open		METHOD OF Perf.			nmingled	PRODUCTION	ON INTERVAL:	
Vented Sold	Used on Lease bmit ACO-18.)		(Specify)	_ 1 011.	(Submit		mit ACO-4)			



268470

TICKET NUMBER___ LOCATION Of ama FOREMAN Fred Made

0	Box	884,	Cha	nute,	KS	66720	
20	-431	-9210	or	800-	467-	8676	

FIELD TICKET & TREATMENT REPORT

	or 800-467-8676			CEMENT	OFOTION 1	TOMMOUID T	RANGE	COUNTY
DATE	CUSTOMER#		L NAME & NUMBER		SECTION	TOWNSHIP		
5.23.14	५५५४	Harbi	son KR	47	NE 6	7	32	m_1
ustomer Kausa	. Rasau	vece Fx	pl+ Deu	Г	TRUCK#	DRIVER	TRUCK #	DRIVER
AILING ADDRE	SS	IVES INT			7/2	Fro Mad		
9393	3 W 110	14 CF			495	Harbee		
ITY		STATE	ZIP CODE		675	KeiDex		
Duerlan	d Park	KS	66210		50	Kicar		
OB TYPE A	nastrina	HOLE SIZE		OLE DEPTH_		CASING SIZE & WI	EIGHT 2%	EUF
ASING DEPTH	0757.35	DRILL PIPE_	Baffle intu	IBING @	724.55		OTHER	
URRY WEIGH	т	SLURRY VOL	W/	ATER gal/sk_		CEMENT LEFT in (CASING 29	
SPLACEMENT	4.24BB	DISPLACEMEN	NT PSI MI	X PSI		RATE SBP		0
MARKS: He	old arew	safety	meet my	Esta		NO JASSON		
	Sel Flus	a. MY	x x Pumo		SKSS	0/50 802		
2% G	1 /2# P	und See	1/sk, Ce	ment.	to sunf	ace Flus	hpump	+/ines
clear	. Displ	ace 2/2	"Rubber	plug 1	o batfl	e in cas	15/ J	essure
	00 # PSI	Rolea	Se press	ive to	sex T	loax valu	e, whit	,n
casi	Mg.						- 17 - 100	
	V							
					1	2000		
Uta	h Drill	mg.			Toud	Made		
40001117		1				ODUCT	UMIT DEIGE	TOTAL
CODE	QUANITY	or UNITS	DESC	RIPTION of S	ERVICES or PR	ODUCT	UNIT PRICE	TOTAL
5401		1	PUMP CHARGE			495		108500
5406	2	o mi	MILEAGE			495		84=
5402		7.35	Casing +	tootage				NC
5407	12 Mini		Ton Mi			50		1849
55020		Ehr	80 881		rock	675		15000
1124	Marin Company	935KS	50/50	Por Mix	Come	*	106950	1
INSB		2574	Promier				5655	
	•	47*	Openo 5				63.45	
1107A	-	17	the s	<u>~~</u>	aterial		118919	1/
	77				Losc	30%	-356.85	
				4	Loss		T 55	8.32.6
141125	100		22" Ru	bbor	Plus			832.6
4402			0.2 700					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						W P	mmieted	
						LY 6	AHIMIPIPI	
						Water State of State	2815.25	
						7.65%	SALES TAX	65.96
vin 3737			1			1.0310	ESTIMATED	1000 10
	740	- 1)					TOTAL	2431.
UTHORIZTION	dra	W	T	ITLE			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.

LEASE NAME Harbison OPERATOR KRED STARTDATE: QIMay 14
WELL # KIR47 LOCATION: MI ami API #
SURFACE PIPE: 7" FI 2000. Cement (#bags) 5
PRODUCTION: PIPE: 0500 SIZE: Q78 = FT 757.35

Thickness	Formation	Comment	Depth	Thickness	Formation	Comment	Depth
10	Soil		10	8	Line		531
9	Lime		12	7	Shale	Some Red Bed Soft	538 544 550 556 560 562 578 584 592
4	Shale			6	Lime	Soft	544
10	Lime	the same of	136	6	Shale		550
11	Shale		36	6	Lime	Soft	556
31	Lime		58	4	Shale	Salar Para Salar NA	560
g	Shale	A L	60	2	Coal		562
10	Lime		70	16	Shale	Son Coal	578
a	Coal		72	6	Lime		584
14	Lime		86	14	Shale		592
90	Shale		176	6	Lime		604
18	Lime		194	11	Shale		615
16	Shale		910	,9	Lime		624
3	Sand	No5mell	910		Shale		629
14	Shale		227		Line		629 626
5	Line	Hard	233	11	Shalz		631
35	Shale		267	3	Lime		640
13	Lime		280	5	Shale	SomeCoal	645
16	Shale Lime		296		Lime		646
10	Lime		306	7	Shale		653
4	Shale		310	2	Lime		655
11	Lime		321	15	Shale		670
<u>8</u>	Shale	Some Coal	329	4	Broken.	Contraction of the contraction o	674
23	Lime		351	15	oil Sand	great Bleed	689
2	Shale		356	95	Shale	TD	784
2	Lime	All a service of a service of the service of	361	×	1 core Baffle	682-702 X	
	Shale	1.75.0	362	-X	Baffile	X 08,06	200
	Lime	KC Base	362 369 396			Ronnie	(1500) 38000
27	Shalr		396				
4	Sand	SomeSmell	400				
78	Shale		478				
4	Jand	No Smell	488				
36	Shale	Some Coal	50%				
6	Line		514				
15	Shale		529				