CORRECTION #1

Confidentiality Requested: Yes No

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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:	SecTwpS. R			
Address 2:	Feet from North / South Line of Section			
City:	Feet from _ East / _ West Line of Section			
Contact Person:	Footages Calculated from Nearest Outside Section Corner:			
Phone: ()	□NE □NW □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: Well #:			
New Well Re-Entry Workover	Field Name:			
□ Oil □ WSW □ SWD □ SIOW	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? ☐ Yes ☐ No			
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)			
Demois #	Chloride content: ppm Fluid volume: bbls			
Commingled Permit #:	Dewatering method used:			
SWD Permit #:	Location of fluid disposal if hauled offsite:			
ENHR Permit #:	· ·			
GSW Permit #:	Operator Name:			
	Lease Name: License #:			
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R			
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:				

CORRECTION #1

Operator Name:			Lease Name: _			_ Well #:	
Sec Twp	S. R	East West	County:				
open and closed, flow and flow rates if gas to Final Radioactivity Lo	ing and shut-in press o surface test, along v g, Final Logs run to o	formations penetrated. D ures, whether shut-in pre with final chart(s). Attach btain Geophysical Data a or newer AND an image f	ssure reached stati extra sheet if more nd Final Electric Lo	c level, hydrosta space is neede	tic pressures, bot d.	tom hole tempe	erature, fluid recovery,
					(T.) D. II		
Drill Stem Tests Taken Yes No (Attach Additional Sheets)		∐ Yes ∐ No	L L		on (Top), Depth ar		Sample
Samples Sent to Geo	ogical Survey	Yes No	Nam	е		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING	RECORD Ne	ew Used			
		Report all strings set-c	conductor, surface, inte	ermediate, product	ion, 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	JEEZE RECORD			
Purpose: Perforate Protect Casing	Depth Top Bottom	Type of Cement	# Sacks Used	ts Used Type and Percent Additives			
Plug Back TD Plug Off Zone							
	otal base fluid of the hyd	on this well? raulic fracturing treatment ex n submitted to the chemical c	_	? Yes	No (If No, ski	ip questions 2 an ip question 3) out Page Three o	,
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			
Opeciny it obtage of Each interval it entirated (Annount and Ninto of Material Oseo) Beptill							
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or EN	HR. Producing Meth		Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf Wate	er B	bls. C	Gas-Oil Ratio	Gravity
Vented Sold	ON OF GAS: Used on Lease	Open Hole	METHOD OF COMPLE Perf. Dually (Submit)	Comp. Cor	mmingled mit ACO-4)	PRODUCTIO	N INTERVAL:

Summary of Changes

Lease Name and Number: NE Baker D-14

API/Permit #: 15-107-24368-00-00

Doc ID: 1219796

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value		
Approved By	Deanna Garrison	NAOMI JAMES		
Approved Date	09/07/2011	08/21/2014		
Date of First or Resumed Production or		03/01/2012		
SWD or Enhr Fracturing Question 1		No		
LocationInfoLink	https://solar.kgs.ku.edu/ kcc/detail/locationInform ation.cfm?section=5&to	https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=5&to		
Operator's Contact Name	Bob Eberhart	Rob Eberhart		
Operator's Phone	285-0873	837-5199		
Operator's Street Address - line 1	30805 COLD WATER RD	602 W. Amity, Suite 103		
Producing Method Pumping	No	Yes		
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 61602	//kcc/detail/operatorE ditDetail.cfm?docID=12 19796		