



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1222136
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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

| | | |
|-----------------------------------|-----------------|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |
|-----------------------------------|-----------------|---|

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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: _____

1222136

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____ | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|--|---|

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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 / SQUEEZE RECORD | | | | |
|--|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone | | | | |
| | | | | |

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(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 | Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | | | | | |

| | | |
|--|---|---|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|--|---|---|

810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561
 API # N/A



COPY

Cement or Acid Field Report
 Ticket No. **1650**
 Foreman Shannon Feck
 Camp Eureka

| Date | Cust. ID # | Lease & Well Number | Section | Township | Range | County | State | | | |
|-----------------------|-----------------|---------------------|---------|----------|----------|----------------|--------|---------|--------|---------|
| 8-14-14 | 1034 | Wedel #3 | 24 | 225 | 3E | Chase | KS | | | |
| Customer | Mailing Address | | City | State | Zip Code | Safety Meeting | Unit # | Driver | Unit # | Driver |
| Range Oil Company Inc | P.O. Box 781775 | | Wichita | KS | 67278 | SF CM CB | 102 | Chris B | 113 | Chris M |

Job Type Surface Hole Depth 217' Slurry Vol. 35 Bbl Tubing _____
 Casing Depth 205.74 G.L. Hole Size 12 1/4" Slurry Wt. 15 # Drill Pipe _____
 Casing Size & Wt. 8 5/8" Cement Left in Casing 20' Water Gal/SK _____ Other _____
 Displacement 12.5 Bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting, Rig up to 8 5/8" casing, Break circulation w/ 10 Bbl H2O, mixed 140 SKS class "A" cement w/ 3% calcium + 1/4# Flo-seal/sk @ 15#/gal Shut down release plug & displace w/ 12.5 Bbl H2O & shut casing in. Good circulation @ all times, 8-9 Bbl slurry to pit. Job complete

" Thank you "

Shannon & crew

| Code | Qty or Units | Description of Product or Services | Unit Price | Total |
|---------------------------------|--------------|------------------------------------|-----------------|---------|
| C101 | 1 | Pump Charge | 840.00 | 840.00 |
| C107 | 40 | Mileage | 3.95 | 158.00 |
| C200 | 140 SKS | class "A" cement | 15.00 | 2100.00 |
| C205 | 405 # | calcium @ 3% | .60 | 243.00 |
| C209 | 35 # | Flo-seal @ 1/4 #/SK | 2.25 | 78.75 |
| C108B | 6.72 Tons | Ton Mileage bulk Truck | 1.35 | 362.88 |
| C506 | 2 | 8 5/8 Centralizers | 65.00 | 130.00 |
| C413 | 1 | 8 5/8 wooden plug | 80.00 | 80.00 |
| | | | SubTotal | 3992.63 |
| | | | 6.15% Sales Tax | 161.85 |
| Authorization _____ Title _____ | | | Total | 4154.48 |

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.



DIAMOND TESTING, LLC
P.O. Box 157
HOISINGTON, KANSAS 67544
(620) 653-7550 • (800) 542-7313
wedel3dst1

Company Range Oil Company, Inc. Lease & Well No. Wedel No. 3
Elevation 1421 GL Formation Conglomerate Sand Effective Pay _____ Ft. Ticket No. K156
Date 8-17-14 Sec. 24 Twp. 22S Range 3E County Marion State Kansas
Test Approved By Kenneth C. Wallace Diamond Representative Jason McLemore

Formation Test No. 1 Interval Tested from 2,465 ft. to 2,492 ft. Total Depth 2,492 ft.
Packer Depth 2,460 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Packer Depth 2,465 ft. Size 6 3/4 in. Packer Depth _____ ft. Size _____ in.
Depth of Selective Zone Set _____ ft.

Top Recorder Depth (Inside) 2,446 ft. Recorder Number 5513 Cap. 5,000 psi.
Bottom Recorder Depth (Outside) 2,447 ft. Recorder Number 5588 Cap. 6,000 psi.
Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ psi.

Drilling Contractor C & G Drilling Company - Rig 1 Drill Collar Length 178 ft I.D. 2 1/4 in.
Mud Type Chemical Viscosity 55 Weight Pipe Length _____ ft I.D. _____ in.
Weight 9.4 Water Loss 8.6 cc. Drill Pipe Length 2,254 ft I.D. 3 in.
Chlorides 1,300 P.P.M. Test Tool Length 33 ft Tool Size 3 1/2-IF in.
Jars: Make Sterling Serial Number 6 Anchor Length 27 ft. Size 4 1/2-FH in.
Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
Main Hole Size 7 7/8 in. Tool Joint Size 4-FH in.

Blow: 1st Open: Weak blow. Died in 5 mins. No blow back during shut-in.
2nd Open: No blow. Flushed tool & received a surge blow. No blow back during shut.

Recovered 3 ft. of drilling mud = .014760 bbls.
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____
Recovered _____ ft. of _____

Remarks _____

Time Set Packer(s) 11:26 A.M. Time Started off Bottom 1:11 P.M. Maximum Temperature 105°
Initial Hydrostatic Pressure.....(A) 1199 P.S.I.
Initial Flow Period.....Minutes 15 (B) 9 P.S.I. to (C) 11 P.S.I.
Initial Closed In Period.....Minutes 30 (D) 352 P.S.I.
Final Flow Period.....Minutes 30 (E) 11 P.S.I. to (F) 19 P.S.I.
Final Closed In Period.....Minutes 30 (G) 346 P.S.I.
Final Hydrostatic Pressure.....(H) 1179 P.S.I.

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

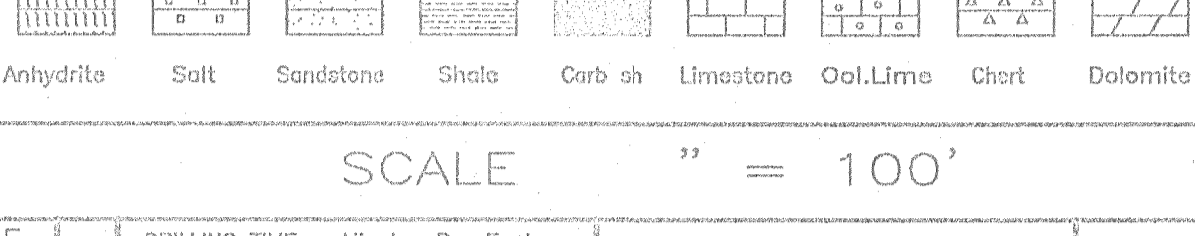
| | | | |
|--|---|--------------|--|
| COMPANY Range Oil Company, Inc. | | ELEVATIONS | |
| LEASE Wedel #3 | FIELD 1425' | | |
| LOCATION 330' FSL + 1700' FSL, SEL4 | DF 1419' | | |
| SEC 24 TWP 22 RGE 3E | Measurements Are All From KB | | |
| COUNTY Marion STATE Ks | CASING SURFACE 878 @ 213' OG 1100x | | |
| CONTRACTOR C & G, Rig #1 | PRODUCTION N/A | | |
| SPUD 8/14/14 COMP 8/18/14 | ELECTRICAL SURVEYS None | | |
| RTD 2542 LTD N/A | | | |
| MUD UP 1700 TYPE MUD Chem | | | |
| SAMPLES SAVED FROM 1850' | TO RTD | | |
| DRILLING TIME KEPT FROM 1800' | TO RTD | | |
| SAMPLES EXAMINED FROM 1850' | TO RTD | | |
| GEOLOGICAL SUPERVISION FROM 1850' | TO RTD | | |
| GEOLOGIST ON WELL Ken Wallace | | | |
| FORMATION TOPS | LOG | SAMPLES | |
| Lansing | | 1912 (-487) | |
| Stark Shale | | 2236 (-811) | |
| Base KC | | 2296 (-871) | |
| Marmaton | | 2372 (-942) | |
| Cherokee | | 2467 (-1042) | |
| Upper Congl Sand | | 2476 (-1051) | |
| Mid Congl Sand | | 2486 (-1061) | |
| Lower Congl Sand | | 2503 (-1078) | |
| Miss Ct | | 2528 (-1103) | |
| Drlg Rough | | | |
| RTD | | 2542 (-1117) | |

REMARKS: DST #1 was negative. Test hole was plugged & abandoned.

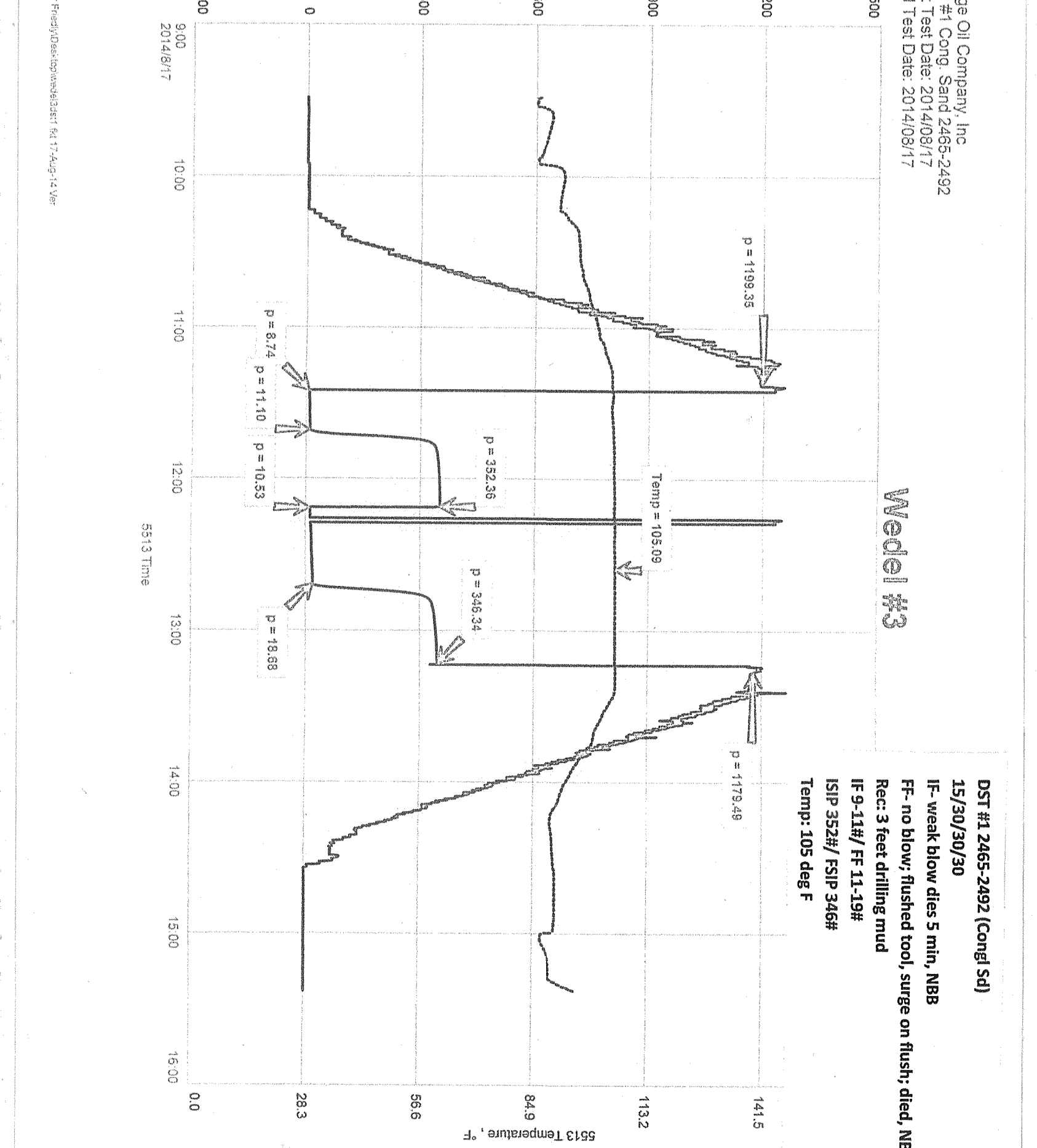
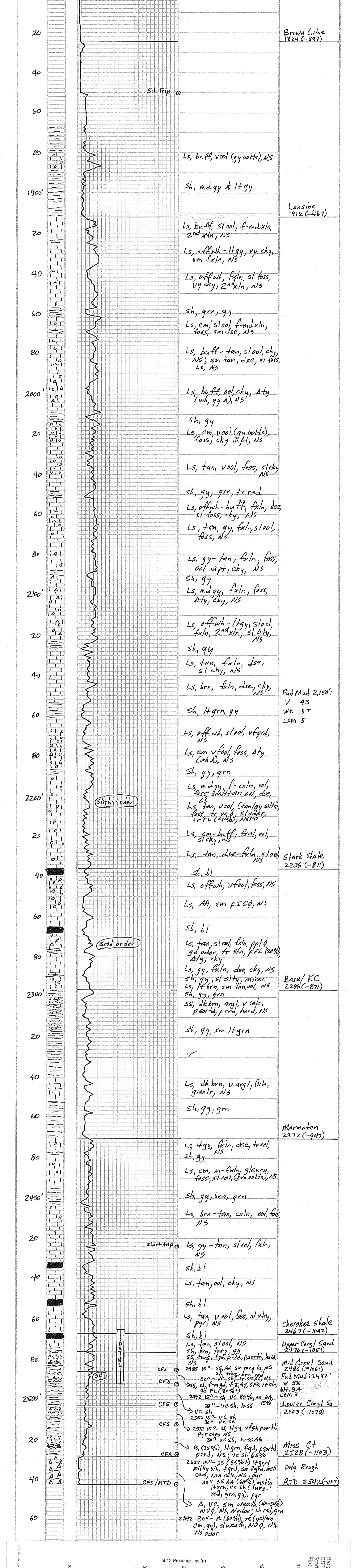
Ken Wallace

| | |
|---------|---|
| 8/13/14 | MIRT |
| 8/14/14 | 8am - Drlg surface hole; 1/4" @ 216' |
| 8/15/14 | 8am - Drlg @ 1201; 1/4" @ 147' / 1244' |
| 8/16/14 | 7:30am - Drlg 2105'; 1/2" @ 1850' / 2237' |
| 8/17/14 | 6:30am - Circ @ 2485'; 1/2" @ 2237' |
| 8/18/14 | 7am - RTD 2542'; DST #1 2465' - 2492' |
| | PFA |

LEGEND



SCALE " = 100'



810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



COPY

Cement or Acid Field Report
 Ticket No. **1618**
 Foreman Rick Ledford
 Camp Eureka Ks

| Date | Cust. ID # | Lease & Well Number | Section | Township | Range | County | State |
|-----------------|------------|---------------------------------|---------|----------|--------|--------|-------|
| 8-18-14 | 1034 | Wedel #3 | 24 | 225 | 35 | Marion | Ks |
| Customer | | Safety Meeting RC UB C | Unit # | Driver | Unit # | Driver | |
| Mailing Address | | | 102 | Chris B | | | |
| City | | | 110 | Chris M. | | | |
| State | | | | | | | |
| Zip Code | | | | | | | |

Job Type P.T.A Hole Depth 2542' Slurry Vol. _____ Tubing _____
 Casing Depth _____ Hole Size 7 7/8" Slurry Wt. 14# Drill Pipe _____
 Casing Size & Wt. _____ Cement Left in Casing _____ Water Gal/SK 7.0 Other _____
 Displacement _____ Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety meeting - Plugging orders as follows:
35 SKS @ 255'
25 SKS @ 60' to surface
20 SKS @ Rathole

"Thank You"

| Code | Qty or Units | Description of Product or Services | Unit Price | Total |
|--|-------------------|------------------------------------|-----------------|---------|
| C103 | 1 | Pump Charge | 1050.00 | 1050.00 |
| C107 | 40 | Mileage | 3.95 | 158.00 |
| C203 | 80 SKS | 60/40 Permox cement | 12.75 | 1020.00 |
| C206 | 275 th | 470 gal | .20 | 55.00 |
| C108A | 3.44 | ton mileage bulk truck | m/c | 345.00 |
| | | | Subtotal | 2628.00 |
| | | | 7.65% Sales Tax | 82.24 |
| Authorization <u>Witnessed by Cotton Gulien Title Toolpusher GAC</u> | | | Total | 2710.24 |

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.