

Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1222381

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:
	Elevation: Ground: Kelly Bushing:
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:
OG GSW Temp. Abd. 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	Duilling Fluid Management Dian
Plug Back Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion 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 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	1222381
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East West	County:	
INCTRUCTIONS. Chow important tang of formations ponetrated	Dotail all cores Boport all	final copies of drill stoms tests giving interval tested, time teal

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).

Purpose:	Depth	Type of Cement	# Sacks Used		Type and F	Percent Additives	
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			
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
			RECORD Net		ion, etc.		
List All E. Logs Run:							
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
Samples Sent to Geolo	gical Survey	Yes No	Name	9		Тор	Datum
Drill Stem Tests Taken (Attach Additional Sl	heets)	Yes No		-	on (Top), Depth a		Sample

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

No

No

No

(If No, skip questions 2 and 3)

(If No, fill out Page Three of the ACO-1)

(If No, skip question 3)

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

Shots Per Foot		PERFORATION Specify Fo		RD - Bridge P Each Interval F		00	,		ement Squeeze Record I of Material Used)	Depth
TUBING RECORD:	Siz	ze:	Set At:		Packe	r At:	Liner R		No	
Date of First, Resumed	Product	ion, SWD or ENHF	۲.	Producing N	lethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	er	Bbls.	Gas-Oil Ratio	Gravity
									I	
DISPOSITI	ON OF C	AS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Solo	<u> </u>	Jsed on Lease		Open Hole	Perf.	Dually (Submit)	Comp. A <i>CO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Sui	bmit ACC)-18.)		Other (Specify)						

Form	ACO1 - Well Completion
Operator	Linn Operating, Inc.
Well Name	MOLZ A-4 ATU-177
Doc ID	1222381

Tops

Name	Тор	Datum
KRIDER	2327	КВ
WINFIELD	2369	КВ
TOWANDA	2429	КВ
FT_RILEY	2484	КВ
FUNSTON	2603	КВ
CROUSE	2671	КВ
MORRILL	2755	КВ
GRENOLA	2799	КВ

Form	ACO1 - Well Completion
Operator	Linn Operating, Inc.
Well Name	MOLZ A-4 ATU-177
Doc ID	1222381

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	728	Premium Plus Class C	455	
PRODUC TION	7.875	5.50	15.50	3110	O-Tex LowDense	435	

COUNTY		JOE	SUM	MAR	Y		TN# 9	72	INCREM		/13/201	4
Stanton		Lin	n Enerov				CUSTOWER REA					
Molz		Fall No. JOB 11	(PL				CLEANING					
ENP NUE	AS ATU 1		face				JESUS .	IMENE	Ζ	_		
JESUS JIMENEZ	The second second		-		TT							
MIGUEL MURGADO					++				-		-	
ADAM MORRIS					\vdash							
MIGUEL HERNANDEZ					┢╍╁╸							
Form Name	+ 7	ype:			<u> </u>			1000	_			
					Calle	d Out -13-2014	IOn Locati	on L	Job Star	ted	Linh C	omoletod
Packer Type Bottom Hole Temp.		et At		Date	7	13-2014	On Locati 07/13	/14	07/1	3/14	0	ompleted 7/13/14
Retainer Depth		ressure otal Depth		Time		0.00000		1				5.0
	s and Acce			Time		3:00PM	7:30F		8:0	DPM	9	.30PM
Type and Size	Qty		ake	<u> </u>		New/Used	Weight		dal Er	om	To	Max. Alk
Auto Fill Tube	0		R	Casing		New	24	the second se		0	728	2000
nsert Float Valve	0	1	R	Liner						-		1000
Centralizers	0		R	Liner								
Top Plug HEAD	0		R	Tubing					_			
Jimit clamp			R	Drill Pip								
Weld-A		┽──┨	R	Open H Perfora						-		Shots/F
Texas Pattern Guide 5	shoa 0		R	Perfora					-		-	
Cement Basket	0		R	Perfora	tions					-		
Mud Type 1	Materials	v 0	I LOCAL	Hours C	In Loc	nodes	Operating Date	lours	D	escripto	doL lo no	
Disp. Fluid Hz	Densi Densi		Lb/Gal	Date 07/13/		Hours 2.0	Date 07/13/14	Hours	- 3	urface		302 622
Spacer type H20	BBL.	10		VIIIa		<u>2.v</u>	07/13/14	2.0				
Spacer type	BBL.											
Cid Type	_Gal	<u>%</u>									-	
Acid Type	-Gal	%						-		S		
NE Agent	-Gal -	ln									_	
Fluid Loss	- Gal/Lb	in =										
Selling Agent	Gal/Lb	lo l				<u> </u>						
nc. Red.	_Gel/Lb	in						1 100000				
AISC.	_Gal/Lb_	In		Total		2.0	Total	2.0	_			
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Other Other					11000	1.0	Cement	Left in Pi	pe			
iner				Feel	14		Reason		5	Shoe Jo	int	
				1					0.07			
tage Sacks	Cement		-		mont I	Data						
	m Plus Clas	C 2% CM	turn Chiericta	Additives 25 Ibisk Celle	Raile .					W/Rq.	Yield	Lbs/Gal
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3 0	0	0			1000			-		0	0	0
4								-			-	
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Caracter (1993)	Lo	st Returns-	1	NO	- Exc	cess Return	881 - 801 -	50	Pa	d Bbl-G		
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/erage 5 Min		Mn Mn	15 Mi	-		atment:	Gal - BBI 📮		Dr	so Bbt		-
	10	141011	10 Mil			nent Slumy al Volume		107.0				
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a mm					-		1 /	7	1		-	
a (Min)												
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CUSTOMER REP	RESENTA					6	1/2		-			
	RESENTA					4	KONATURE	mle Mr.	. Enn			
	RESENTA					4	Tha	nk You - TEX				

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JOB SUMMARY							TN# 97			7/15/2014		
Grant	Linn Energy						Сизтоный ньи					
Moiz	Wall No. 106 tribl						EAP-LUTER NAME					
	A4 ATU 177 Production						JESUS JIMENEZ					
JESUS JIMENEZ		-										
MIGUEL MURGADO											_	
JOSEPH MARTINEZ												
SOUTH MARINEZ												
Form Name												
	I	VDe:			Called	Out	IOn Local		1 01-1 1-			
Packer Type 🔡 🗍	<u> </u>	et At		Date	7-1	5-2014	On Location 07/15		ob Started 07/15/14	- Job G	ompleted 7/15/14	
Bottom Hole Temp.	P	ressure _						1	ALL DELIG	- 1 [•]	1113114	
Retainer Depth	T	otal Depth		Time	12	:COAM	4:00/	L NU	8:00AM	1	MA00:0	
Turne and Div	ols and Acces						Well			- 10 M		
Type and Size Auto Fill Tube			ake	-		Now/Used		Size Grad	el From	To	Max. Alk	
nsert Float Velve	0		R	Casing		New	15.5	5.5 ×	0	3110	2000	
Centralizers	0		8	Liner							1	
Top Plug	0		R	Liner		<u> </u>						
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imit clamp				Drill Pip Open H	e de		L,					
Veld-A	0			Perioral	UIB IODO				Į [Shots/	
exas Pattern Guide Shoe 0 18					Perforations				╉────┤			
ement Baskel	0	i ii		Padoral	inne				 		-	
	Materials			Hours C	n Loca	tion	Operation	Hours	Decrin	tion of Jol		
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	20 Densit	y <u>8.33</u> 20	Lb/Gal	07/15/1	4	6.0	07/15/14	2.0	Product	10fl		
pacer type		20		1						1.1.1		
cid Type	Gal	~~~~										
cid Type	Gal.				-+							
urfactant	Gal	In T		-								
IE Agent	Gal.	111			_						_	
luid Loss	Gal/Lb	- III									_	
Selling Agent	Gal/Lb									-		
nc. Red	Gal/Lb Gal/Lb	<u> </u>										
		In		Total		6.0	Total	2.0			1.00	
erfpac Balls	o	v			-		Des	SSURGE				
lher		1.1		MAX	4	100		ssures				
ther								Cales in BF				
ther				MAX		3	AVG	3				
ther							Cement	Left in Pipe	8			
ther	Feet	Feet 44 Reason					Shoe Joint					
				Corr	nent Da	ala				925 B		
tage Sacks	Cement			Additives					W/Rg.	Yield	Lbs/Ga	
1 435 O-Tex	owDense Cer		um, 2% Calciu	m Chieride, 2%	C-45, 0,4	% C-15, 8.4% C	41P, 0.2% C-61	0.25 Rink Cell	oftal 13.29	2.25	11.5	
2 0	0	0							0	0	0	
4	Q	0							0	0	0	
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				Sum	1901	3.2						
eflush 📃	Ty			Juli	Profi	ush:	88I F	20.00	Туре:	SODIUM		
eakdown		MUMIX			Load	1 & 9kdn: (Gal - 8Bl 🦷		Pad:BbT	Gal	ULIVAIE	
		it Returns		YES	_Exce	is s <i>l</i> Relum	58I	0	Calc D si	p 8bl		
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CUSTOMER RE	PRESENTA						V.	<u></u>				
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