

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1226519

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	Twp S. R	East West
Address 2:			Feet	t from North / Sout	h Line of Section
City: St	ate: Zip	D:+	Feet	t from East / West	t Line of Section
Contact Person:			Footages Calculated from Ne	earest Outside Section Corne	r:
Phone: ()			□ NE □ NW	□ SE □ SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				g. xx.xxxxx) ((e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27 N		
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	Well #:	
New Well Re-	-Fntrv	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing:	
☐ Gas ☐ D&A ☐ OG	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total Depth:	<u>.</u>
CM (Coal Bed Methane)	G3W	iemp. Abd.	Amount of Surface Pipe Set a	and Cemented at:	Feet
Cathodic Other (Core	Expl etc.)		Multiple Stage Cementing Co		
If Workover/Re-entry: Old Well Inf			If yes, show depth set:		Feet
Operator:			If Alternate II completion, cen		
Well Name:			feet depth to:		
Original Comp. Date:			loot dopar to:		
Deepening Re-perf.	_	NHR Conv. to SWD	B	D.	
☐ Plug Back	Conv. to GS		Drilling Fluid Management (Data must be collected from the		
Commingled	Permit #:		Chloride content:	ppm Fluid volume:	bbls
Dual Completion			Dewatering method used:		
SWD	Permit #:		Location of fluid disposal if ha	auled offsite:	
☐ ENHR	Permit #:		Operator Name:		
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date Rea	iched TD	Completion Date or	QuarterSec		
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 press o surface test, along v	ures, whet vith final c	ther shut-in pre hart(s). Attach	essure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bod.	ottom hole temp	erature, fluid re	ecovery,
Final Radioactivity Lo files must be submitte						gs must be ema	liled to kcc-well-	ogs@kcc.ks.go	v. Digital electi	ronic log
Drill Stem Tests Taker (Attach Additional		Ye	es No			J	on (Top), Depth		Samp	
Samples Sent to Geo	logical Survey	Ye	es No		Nam	e		Тор	Datum	1
Cores Taken Electric Log Run		☐ Ye								
List All E. Logs Run:										
				RECORD	Ne					
	0: 11.1					ermediate, product		" 0 1	T 15	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives		
Perforate Protect Casing	Top Detterm									
Plug Back TD Plug Off Zone										
1 lug 0 li 20 lio										
Did you perform a hydrau	ulic fracturing treatment of	on this well?	•			Yes	No (If No, s	kip questions 2 a	nd 3)	
Does the volume of the t			_		-		= ` `	kip question 3)		
Was the hydraulic fractur	ing treatment information	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, f	ill out Page Three	of the ACO-1)	
Shots Per Foot			D - Bridge Plug Each Interval Perf				cture, Shot, Ceme			Depth
						(_	
TUBING RECORD:	Size:	Set At:		Packer A		Liner Run:				
		0017111		. dono. 7		[Yes N	0		
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gra	avity
DIODOCITI	01.05.040			4ETUOD 05	001451	TION		DDODUCT	ONLINITED (A)	
DISPOSITION Solo	ON OF GAS: Used on Lease		N Open Hole	∥ETHOD OF ☐ Perf.			nmingled	PRODUCTION	ON INTERVAL:	
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)			

Mud Rotary Drilling Andrew King - Manager/Driller

Bar Drilling, LLC Phone: (719) 210-8806

1317 105th Rd. Yates Center, KS 66783

Company/Operator	Well No.	Leas	Lease Name		Well Location	on	1/4	1/4	1/4	Sec.	Twp.	Rge,
Imperator Investments LLC	12	H.	Herder		550's, 1980e	ē	WW	SE	WS	28	25	18E
1305 W 40th St	Well API #		Type/Well		County		State Total Depth	Total I	Depth	Date Started Date Completed	d Date C	ompleted
Kansas City, MO 64111	15-001-30962)62	Oil		Woodson		KS	875	O1	5/16/2014		5/18/2014
Job/Project Name/No.	S			Bit Record	cord				C	Coring Record	ď	
	Surface Record	Cord	Туре	Size	From	То	Core #		Size	From	То	% Rec.
Driller/Crew	Bit Size:	11 1/4	PDC	11 1/4	O,	20'						
Andy King	Casing Size:	7"	PDC	5 7/8	20'	875						
	Casing Length:	20'										
	Cement Used:	10sx										
	Cement Type:	Portland										

From	То	Formation	From	οTo	Formation	From	To	Formation
0		overburden				2		
12	86	lime						
86	145	shale						
145	217	lime						
217	220	shale						
220	250	lime						
250	256	shale						
256	295	lime						
295	417	shale						
417	425	lime						
425	454	sandy shale						
454	489	lime						
489	547	sandy shale						
547	595	lime						
595	625	sandy shale						
625	643	black shale						
643	650	(5') lime						
650	654	sandy shale				Well Notes:	8:	
654	735	lime						
735	736	grey shale						
736	790	sandy shale						
790	850	sandy shale						
850	870	shale						
870	875	black shale						

Custómer Signature Lalled by 10071

> 07 300 To Suffee -009 To 5X5 01

> > SET CEMBY Plays AS POLLOWAYS Remarks:

St 460E	Estimated Total,			
58.32	Sales Tax	24.6		
300800	Subtotal			
			Plugs	
The same of the sa				
312.00	05.1		Bulk Truck	suo1 /7
03,07	00.00	5.8041	14 + 1. NOIS 1 12 TOTAL	
	057	7. 6	Truck "11	521:W 09
00,08	(24)		11 # 1.	
00.06/2	00 KS		MATE TRUCK	ST Ass
00.84	05,		28 739	59/ 09/
22/10/1	00.61	Jiswa	2 x w 23 04 /09	SASAS ER
132.00	9liM\22.£\$		Mileage	09
30.397	Pump charge	Servcies or Product		Quantity Or Units
			:OT89	эскег:
ATTENDED TO STATE OF THE STATE		Cement Left in Casing:	:BuiduT	Sridge Plug:
Checke	250//	Displacement PSI:	Casing Weight:	lole Depth: 875-
Bryen	COE /	Displacement:	:9zi2 gnise	19/6 Size: 19/8"
Jeny	108,		Alexand Carl	
Driver	Truck #		PlugTo Ahendon	op <u>T</u> ype:
			. 4	a a

11149	KNOGSCH MO.	15 wor M 508/	242 Teogot -01	Dogwi
diZ	City State	ssərbbA gnilisM		Customer
Allen	381-555-85	1400 m /2		41-81-9
County	Sec./Township/Range	Well Name & Number	Customer #	Date

Cement Service ticket WPDISON' KANSAS OIFLIEFD SEKNICES HNUKBICANE SEKNICES INC

Brad Cell # 620-437-6765 Office # 620-437-2661 Madison, KS 66860 3613 A Y Road Hurricane Services, Inc.

Head Buther	Foreman
Madison	Location
1.0401	Ticket Number