Confidentiality Requested: Yes No

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1231349

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 North / 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 #	
Name:	(e.g. xx.xxxx) (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:
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?
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 Produce	
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	
SWD Permit #: 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 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	1231349
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS, Chow important tang of formations papatrated	Dotail all cores Report all fi	al conject of drill stome tasts giving interval tasted, time tool

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	rill Stem Tests Taken (Attach Additional Sheets)			.og Formatic	n (Top), Depth an	d Datum	Sample
Samples Sent to Geolog	,	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
	CASING RECORD Vew 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 / SQU	JEEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing Plug Back TD							
Plug Off Zone							
Did you perform a hydraulic	fracturing treatment of	on this well?		Yes	No (If No, skij	o questions 2 an	d 3)
Does the volume of the tota	l base fluid of the hyd	raulic fracturing treatment ex	ceed 350,000 gallons	? 🗌 Yes 🛛	No (If No, skij	, o question 3)	

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?

Shots Per Foot		PERFORATION Specify Fo		RD - Bridge F Each Interval)e			ement Squeeze Record d of Material Used)	Depth
TUBING RECORD:	Si	ze:	Set At:	:	Packe	r At:	Liner F		No	
Date of First, Resumed	I Product	ion, SWD or ENHF	٦.	Producing N		ping	Gas Lift	Other (Explain)		
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity
		1	1						1	
DISPOSIT	ION OF (GAS:			METHOD	OF COMPLE	TION:		PRODUCTION INT	ERVAL:
Vented Sole		Used on Lease		Open Hole	Perf.	Dually (Submit)		Commingled (Submit ACO-4)		
(If vented, Su	ıbmit ACC	D-18.)		Other (Specify))					

Yes

No

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

Form	ACO1 - Well Completion
Operator	Ritchie Exploration, Inc.
Well Name	Ellis 23D 3
Doc ID	1231349

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	23	218	common	165	3%cc, 2% gel
Production	7.875	5.5	15.5	4555	OWC	200	10% salt, 2% gel, 1/4% CDI- 26 and 5- 1/4% Kol- Seal

EXPLORATION, INC. Wichita, Kansas

#3 Ellis 23D

335' FSL & 2209' FEL 5' N & 101' E of SW SW SE Section 23-14S-32W Logan County, Kansas API# 15-109-21326-0000 Elevation: GL: 2769', KB: 2774'

4560' -1786

			Ref.
Sample Tops			Well
Anhydrite	2222'	+552	+8
B/Anhydrite	2243'	+531	+7
Heebner	3737'	-963	+20
Toronto	3760'	-986	+15
Lansing	3774'	-1000	+17
Muncie Shale	3942'	-1168	+16
Stark Shale	4030'	-1256	+18
Hush	4067'	-1293	+16
BKC	4117'	-1343	+16
Marmaton	4135'	-1361	+18
Altamont	4156'	-1382	+20
Pawnee	4232'	-1458	+16
Myrick	4271'	-1497	+14
Fort Scott	4285'	-1511	+16
Cherokee Shale	4312'	-1538	+16
Johnson	4353'	-1579	+16
Morrow Sand	4386'	-1612	+14
Mississippian	4404'	-1630	+10

RTD

CITION LOCATION		•
LUCATION	57 TICKET NUMBER 46656	<u>; </u>
	LOCATION Cakley K	<u> </u>
FOREMAN_	FOREMAN Serry Y	
TICKET & TREATMENT REPORT	ATMENT REPORT Mile'S	
CEMENT		
ME & NUMBER SECTION TOWNSHIP		INTY
23D # 3 23 145	23 145 324 209	201
Dakleys		
Ha CANDAUK TRUCK# DRIVER	TRUCK # DRIVER TRUCK # DRI	VER
KS 14W 460 Lancek	J 460 Lance R	
CODE 1/45 WING	118	
HOLE DEPTH 4560 CASING SIZE 8		572
TUBING	OTHER PCE 21	17
WATER gal/sk CEMENT LEFT	al/sk CEMENT LEFT in CASING2/ -	
MIX PSI RATE		
	un flat equal turbalizerson 2, shoe, 5, 7	1,12,
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51/2 AFIL Flontshoc (W) 51/2 turbolizers (W) 51/2 beskets (W)	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	

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.

CONSOLIDAT Oli Well Services, LLC

270403

47667 TICKET NUMBER_ LOCATION Dakley Ku-FOREMAN Jauen

فمعتبو ولحوام والترابي الالاران والرابي

Ko.

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676				FIELD TICKET & TREATMENT REPORT CEMENT				
Γ	DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TO			
L								

CEMENT

DATE	CUSTOMER #	WEL.	L NAME & NUM	BER	SECTION	TOWNSHIP	RANGE	COUNTY
8/15/14	7/73	Ellis	23D #3	3	23	14	32	Logan
CUSTOMER	11: 1			Dakley				
Bi		planation		570"	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ESS	,		Jaytawk	731	Cory		
				E TO 450	529	Codu		
CITY		STATE	ZIP CODE	125		Rise		
				Yyw Yysinto				
L	+A lloc		l	۱ <i>۷۳۰ دې</i> ۲ ۱ HOLE DEPTH		CASING SIZE & V	VEIGHT 57	. 15,5 *
JOB TYPE Por		HOLE SIZE		-			OTHER R. 2	
CASING DEPTH	<u>.</u>	DRILL PIPE			1/8 2177		OTHER RC 2	
SLURRY WEIGH	IT_/3	SLURRY VOL		WATER gal/s	k	CEMENT LEFT in	CASING	
DISPLACEMENT	12,60	DISPLACEMEN	NT PSI	MIX PSI		RATE		
REMARKS: 5	afty Me	eting Ri	Aupon	All iand	e Wells	ervice P	ressure	up Casine
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VLines F	Run 10 5	oints Tu	bîna √ Re	wersea	ut Rig	DOWN		· · · · · · · · · · · · · · · · · · ·
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Cement Did Circulate To Pit.

		Thanks Daven + C.	new	
ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		TOTAL
5401B	1	PUMP CHARGE	178500	1785,20
5406	ao	MILEAGE	\$ 5,25	105,00
5407	12.9	Ton Mileage Delivery	1,75 1	451,50
//31	300 5/13	69/40 Poz mix	\$ 15 86	4758,00
1118 B	1548 #	Bentonite		\$ 417,96
1107	75 ₱	Flo seal	\$ 2,97	222,25
1105	500 #	Cotton Saed Hulls	* , 58	\$290 ?
			<u> </u>	
				<u></u>
			Sub Total	8030 2
			Less10%	
				7227,19
			SALES TAX ESTIMATED	- 541. (C)
vin 3737	-11 A	1-1	TOTAL	11018.8
UTHORIZTION	ULT.	TUTILE	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.

ALLIED OIL & GAS SERVICES, LLC 063274 Federal Tex I.D. # 20-8651475

REMIT TO P.O. BO	OX 93999)		SERVICE POINT:									
SOUTH	ILAKĖ, T	EXAS 760	192	Oak(ey,KS									
DATE マシーイリ	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH						
DATE 8-2-14	23	114	32	ļ	11:0074	COUNTY	1:32/17 STATE						
LEASE SILL 5.23D	WELL#	<u>\$3</u>	LOCATION Out Jo	y J to Say	bawk Rd 1E	legen	KS						
OLD OR NEW (Ci	rcle one)		Yaswin		······································		-						
CONTRACTOR (N81.2.	生っ		OWNER	50000		i i						
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DRILL PIPE TOOL			PTH PTH										
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PERFS.				_ CHLORIDE		@ <u>_10</u>	.511 20						
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To: Allied Oil &	Gas Ser	vices, LLC	x	·		@	• 						
You are hereby to	equested	to rent ce	menting equipment	.		_@							
and furnish ceme	enter and	helper(s)	to assist owner or	.	<u>_</u>	@							
contractor to do	work as i	is listed. 7	The above work was			TOTIL	1						
done to satisfacti	on and s	upervisio	of owner agent or			TOTAL	·						
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TERMS AND C	ONDITI	ONS" liste	ed on the reverse side		[. III	613	-						
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signature /	John	Ka	mall		Cp Car	•	-						
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REFERENCE WELL FOR STRUCTURAL COMPARISON RET #2 EWS 23.D	4404 - 1630 4405-1631 +10	15519	4/156 - 1382 4156 - 1382 42.32 - 1458 42.33 - 1459	4029 - 1255 4030 - 1256 + 19 4114 - 1340 4114 - 1340 + 19	1000	$\frac{2241 + 533}{3376 - 602} \frac{2245 + 531}{3375 - 601}$	107 DATUM +554 2221 +553	101 - 21,326 - 00 - 00 - 01 - 51RUOT	UP DISPLAD 3399' TYPE MUD CHEMICAL	WARD FROM350	THE REPT FROM 3300 TO RID	TO RTD PROD	COMM. 8-02.14 COMP. 8-13-14 SURFACE OF TO 20 210	AN STATE KS. CASING RECO	P. 14 RGE 32W From 40 4	25	STTA C.	# 7 CALOSKIION JAC		NDATE SISTORIAS		Licensed Geologist No. 334		is i the and the state is and the state is and the state is and the state is a state is a state is a state is a
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