

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division 1231600

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:					
City: State: Zip:+	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         ☐ 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:         ☐ Well Name:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt.				
Original Comp. Date: Original Total Depth:					
□ Deepening     □ Re-perf.     □ Conv. to ENHR     □ Conv. to SWD       □ Plug Back     □ Conv. to GSW     □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)				
Commingled Permit #:  Dual Completion Permit #:  SWD Permit #:	Chloride content:ppm Fluid volume:bbls  Dewatering method used:  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 Recompletion Date	QuarterSec.         TwpS. REastWest           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 III Approved by: Date:				



Operator Name:			Lease Name: _			Well #:		
Sec Twp	S. R	East West	County:					
open and closed, flow	ring and shut-in pressu	ormations penetrated. Cures, whether shut-in prediction of the pre	essure reached stat	ic level, hydrosta	tic pressures, bot			
		otain Geophysical Data a or newer AND an image		ogs must be ema	illed to kcc-well-lo	gs@kcc.ks.go	v. Digital electronic log	
Drill Stem Tests Taken (Attach Additional S		Yes No			on (Top), Depth ar		Sample	
Samples Sent to Geol	logical Survey	Yes No	Nam	ie		Тор	Datum	
Cores Taken Electric Log Run		Yes No						
List All E. Logs Run:								
		CASING	RECORD N	ew Used				
		Report all strings set-			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 / SQI	JEEZE RECORD	I	1		
Purpose: Depth Top Bottom		Type of Cement	# Sacks Used	Type and Percent Additives				
Protect Casing Plug Back TD Plug Off Zone								
	ulic fracturing treatment or	n this well? aulic fracturing treatment ex	roed 350 000 gallons	Yes		p questions 2 ar	nd 3)	
		submitted to the chemical	=	Yes	= ' '	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 (Amount and Kind of Material Used)  Depth					
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:				
TODING RECORD.	OILG.	Jet At.	i aunei Al.		Yes No			
Date of First, Resumed	Production, SWD or ENF	HR. Producing Meth	nod:	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil B	bbls. Gas	Mcf Wat	er B	bls. C	as-Oil Ratio	Gravity	
DISPOSITION Vented Sold	ON OF GAS:	N Open Hole	METHOD OF COMPL		mmingled	PRODUCTIO	DN INTERVAL:	
	bmit ACO-18.)	Other (Specify)	(Submit		mit ACO-4)			

Form	ACO1 - Well Completion			
Operator	Lasso Energy LLC			
Well Name	Renick 2			
Doc ID	1231600			

## Tops

Name	Тор	Datum
Heebner	4110	-1288
Toronto	4128	-1306
Lansing-Kansas City	4194	-1372
LKC 'B'	4226	-1404
LKC 'D'	4268	-1446
LKC 'F'	4295	-1473
LKC 'G'	4327	-1505
Muncie Creek	4371	-1549
LKC 'H'	4379	-1557
LKC 'I'	4402	-1580
LKC 'J'	4434	-1612
Stark	4494	-1672
LKC 'K'	4500	-1678
Hushpuckney	4536	-1714
LKC 'L'	4544	-1722
Base Kansas City	4626	-1804
Marmaton	4648	-1826
Pawnee	4721	-1899
Ft. Scott	4744	-1922
Cherokee	4760	-1938
Cherokee Lime	4845	-2023
Ste. Genevieve	4898	-2076
St. Louis	4954	-2132

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## 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	1785	A Common		282# CaCl, 38# celloflake
Production	7.875	5.5	15.5	5157	AA2	270	1500# gilsonite

