

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1235862

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:	SecTwpS. R 🗌 East 🗌 West
Address 2:	Feet from
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 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:	Producing Formation: Elevation: Ground: Kelly Bushing: Feet Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name: Original Total Depth: Original Total Depth:	feet depth to: w/ sx cmt. Drilling Fluid Management Plan
☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Commingled Permit #: Dual Completion Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used:
☐ SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	Quarter Sec. TwpS. 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:



Operator Name:			Lease Name:			Well #:		
Sec Twp	S. R	East West	County:					
open and closed, flow	ring and shut-in pressu	ormations penetrated. Dres, whether shut-in pre	ssure reached stati	c level, hydrosta	tic pressures, bott			
		tain Geophysical Data a r newer AND an image f		gs must be ema	iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log	
Drill Stem Tests Taker (Attach Additional		Yes No			on (Top), Depth an		Sample	
Samples Sent to Geological Survey				Э		Тор	Datum	
Cores Taken Electric Log Run		Yes No						
List All E. Logs Run:								
		0.0000						
		CASING Report all strings set-o	RECORD Ne conductor, surface, inte		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 / SQU	EEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives				
Perforate Protect Casing								
Plug Back TD Plug Off Zone								
Did you perform a hydrau	ulic fracturing treatment or	n this well?		Yes	No (If No, ski	o questions 2 an	nd 3)	
	· ·	aulic fracturing treatment ex	_			o question 3)	of the ACO 1)	
was the hydraulic fractur	ring treatment information	submitted to the chemical of	disclosure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		N RECORD - Bridge Plug potage of Each Interval Perf			cture, Shot, Cement mount and Kind of Ma		d Depth	
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or ENH	R. Producing Meth		Gas Lift C	Other <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil B		Mcf Wate			ias-Oil Ratio	Gravity	
DISPOSITIO	ON OF GAS:	, and a second	METHOD OF COMPLE	TION:		PRODI ICTIC	ON INTERVAL:	
Vented Solo		Open Hole	Perf. Dually	Comp. Cor	nmingled	THODOUTIC	ZIN IINI ELIVAE.	
	bmit ACO-18.)	Other (Specify)	(Submit A		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Qin's Investment, LLC
Well Name	Qin 4
Doc ID	1235862

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9	7	10	20	Portland	6	50/50 POZ
Completio n	5.6250	2.8750	8	847	Portland	115	50/50 POZ

	Operator License #	34843		A 631 44	45 404 005		
	Operator Cicense #	Qin's Investme	nt HC	API#	15-121-308	,83-0 0- 0	0
	Address			Lease Name	Qin		
	City	4937 Riverchase Drive Parkville, MO 64151		Well#	4		
	Contractor		04121	Paried Date	** !** !**		
	Contractor License #	JTC Oil, Inc. 32834		Spud Date	12/13/2014	ł	
	T.D.			Cement Date			
		860'		Location	Sec 1	T 16	R 21
	T.D. of pipe	847'			6 feet from	5	line
	Surface pipe size	7"			5 feet from	Ē	line
	Surface pipe depth	20'		County	Miami		
	Well Type	Production					
Thickness	Driller's		7 →				
2	Strata	From	То				
6	soil	0	2				
24	clay	2	8				
6	lime	8	32				
	coal	32	38				
35 37	lime	38	73				
27	shale	73	100				
18	lime	100	118				
86	shale	118	204				
22	lime	204	226				
30	shale	226	256				
7	lime	256	263				
53	shale	263	316				
27	lime	316	343				
10	black shale	343	353				
20	lime	353	373				
4	coal	373	377				
14	lime	377	391				
169	shale	391	560				
7	lime	560	567				
27	shale	567	594				
4	lime	594	598				
17	black shale	598	615				
3	lime oil	615	618				
16	black shale	618	634				
11	lime	634	645				
18	shale	645	663				
1	lime	663	664				
7	shale	664	671				
2	oil sand	671	673	ok			
2	oil sand	673	675	good			
3	oil sand	675	678	good			
3	oil sand	678	681	good			
36	shale	681	717				
25	black shale	717	742				

5	sandy	742	747	
53	shale	747	800	
2	oil sand	800	802	ok
2	oil sand	802	804	good
2	oil sand	804	806	good
2	oil sand	806	808	good
32	black shale	808	840	
20	shale	840	860	



LOCATION OF Jaw 9
FOREMAN Stan Made

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WELL	NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-16-14	6613		11#4	S.E. 1	16	21	M·
CUSTOMER		, ,			DBI (50	TRUCK#	DRIVER
MAILING ADDRES	Invest.	ments		TRUCK#	DRIVER	Sa Fety	
	(A)	. 1	5.	300	19/19/	09/4/4	meet
493	7 Rive	STATE	ZIP CODE	200	MILLIA		
Parkv:1	1/2	Mo	64151	D67	1115795	-	
1 annuil	19		17 16-3	тн <i>86</i> 2	Dam Wha	VEIGUE 25	18
IRANGE IN CO.	70.	HOLE SIZE		тн_ <i>86</i>	CASING SIZE & V		
CASING DEPTH_	- Carlotte - Charles	DRILL PIPE	TUBING			OTHER	₹S
SLURRY WEIGHT	4100	SLURRY VOL_	WATER ga	CONTRACTOR OF THE PARTY OF THE	CEMENT LEFT IN		
DISPLACEMENT		DISPLACEMENT		200	RATE 4 9		1
REMARKS: He	d mee	ting +	stablished	rate. N	executor	funte	202
100 \$ 3	el tolle	owed by	<u> </u>	50 150	ener	P picas	10
981.	-: Culai	red cei	nent, flu	SURA PL	0-1	Tumpe	2 has
Yo Ca	15:45 I	V. W.	ell neld	000 1311	<u> </u>	VIOQT,	
	- 1/1					1	
$ \mathcal{O}_{\mathcal{I}}$	y Man	ine(welex	/
100					tem	w	
ACCOUNT				/\sum_		T	creatives
CODE	QUANITY	or UNITS	DESCRIPTION	of SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
5401	1		PUMP CHARGE		368		1085
6406	—	_	MILEAGE		368		
5402	RL	17'		otase	368		
5407	l)	ania	ton wile	5	548		18400
1300	Í	2	80,100	<u> </u>	319		150
Sura	4		00 1790	-1-00-100-100-100-100-100-100-100-100-1		Julia - HAHAMANI	
				V-00			
1/24	173	~	30/30 CE	1410114	***	1322.50	
1100		<u> </u>		VVLEVCI		1-41-416	
11183	29	<u> </u>	901	,	106	130101	
				mater Leas mate	al de	64.46	
				4055	3010-	41609	Action to the second
			2/1	mate	Mig 1: TOI	91	29.50
4402			2/2 1/49				0-1.30
			1 1				
		Te e Temper	1-1-1-1				
				16	<i></i>	20/12/20	
					-A	2943.82	
				//			7 52
Inula 2797						SALES TAX ESTIMATED	76,53
lavin 3737			~			TOTAL	2495.8
AUTHORIZTION			TITLE			DATE	