

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1239578

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.	TwpS. R	East _ West	
Address 2:			F6	eet from North /	South Line of Section	
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section	
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:	
Phone: ()			□ NE □ NW	V □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			Producing Formation:			
			Elevation: Ground: Kelly Bushing:			
∐ Gas	☐ ENHR	☐ SIGW ☐ Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:	
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet	
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No	
If Workover/Re-entry: Old Well I			If yes, show depth set:			
Operator:			If Alternate II completion, c	cement circulated from:		
Well Name:			feet depth to:	w/	sx cmt.	
Original Comp. Date:						
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan		
Plug Back	Conv. to G		(Data must be collected from to			
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls	
Dual Completion			Dewatering method used:_			
SWD			Location of fluid disposal if	hauled offsite:		
ENHR	Permit #:					
GSW Permit #:			Operator Name:			
			Lease Name:			
Spud Date or Date R	eached 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 Approved by: Date:				

Page Two



Operator Name: Lease Name: _ _ Well #: _ County: _ 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** No Loa Formation (Top), Depth and Datum Sample | Yes (Attach Additional Sheets) Name Top Datum No Samples Sent to Geological Survey Yes ☐ No Yes
 Yes
 ■
 Yes
 ■
 Yes
 ■
 Nes
 Nes Cores Taken Electric Log Run ___ Yes No List All E. Logs Run: CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight Setting Type of # Sacks Type and Percent Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Depth Cement Used Additives ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD Plug Off Zone Did you perform a hydraulic fracturing treatment on this well? Yes No (If No, skip questions 2 and 3) No Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes (If No, skip question 3) Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? (If No, fill out Page Three of the ACO-1) Yes PERFORATION RECORD - Bridge Plugs Set/Type Acid, Fracture, Shot, Cement Squeeze Record Shots Per Foot Specify Footage of Each Interval Perforated Depth (Amount and Kind of Material Used) TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No Date of First, Resumed Production, SWD or ENHR. Producing Method: Flowing Pumping Gas Lift Other (Explain) **Estimated Production** Oil Bbls Gas Mcf Water Bbls. Gas-Oil Ratio Gravity Per 24 Hours METHOD OF COMPLETION: **DISPOSITION OF GAS:** PRODUCTION INTERVAL: Open Hole Perf. Dually Comp. Commingled Vented Sold Used on Lease (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Other (Specify)



270472

TICKET NUMBER FOREMAN Fred Made

FIELD TICKET & TREATMENT REPORT

O Box 884, Chanute, KS 66720 FIELD HORE I & TREATMENT REF						
20-431-9210 or 800-467-8676		CEMEN	SECTION	TOWNSHIP	RANGE	COUNTY
DATE CUSTOMER#	WELL NAME & NUM		SECTION			
6:8:14 77.52 USTOMER	Baker # SCZ	26	Nm 20	1 8	3.5	mı
USTOMER CY > Rose	surces LLC		TRUCK #	DRIVER	TRUCK #	DRIVER
AJLING ADDRESS		7	712	FreMad		
	SAUS Day	1	495	HarBec		
8614 Ceda	STATE ZIP CODE	1	675	Kei Det		
M	Ty 77055	1	503	mile Fox		
OBTYPE Longstyny	HOLE SIZE 5	HOLE DEPTI	420	CASING SIZE & V	WEIGHT <u>27</u> /g	EUE
ASING DEPTH	DRILL PIPE	TUBING			OTHER	
SLURRY WEIGHT			sk	CEMENT LEFT in	CASING_2%	s"plu
	ADJEDI ACEMENT PSI	MIX PSI		RATE 4B	2 M	
		۸ ۲.	to blick .	una vax	. Mixx	Punp
EMARKS: 1-1014 CTE	h. Mix & Pump	THE S	v	we Cen	cent 5#1	Kal '
100 - (rel + 105	K. Mix Framp		1.1.5/4 10.11	1 + 1 has	elecus.	
Seal /3/c. C	Rubber plug	ace. F	103K POM	Proceure	40 800	# PSI
Displace 25	Rubber plug	10 005	100	11655016		
Release pres	sure to set	4 loax	Value.			
•						
		7.7.40		1 , 511 1	1	
Franc Energ	n Dov. Inc11	Titchell.		Lud Mod		

ACCOUNT	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT		UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495		10850
5406		MILEAGE			NK
5402	411	Casing footage			102,79
5407	72.9	Ton Miles	.503		
5502 C	1 Hr	80 BBL Vac Truck	675		j06.00
	115-40	Owe Cement		888325	V
1124	45 sks 100 #	Proming Gal		నివి 25	/
1118B	225*	1401 Saal		11350	/
man	•	Maxerial		1014 35	_
		hess 30%		- 30427	70928
		Total			7950
4402		2 12 " Rubber plug			2575
1/23	1500 62	City Water			
	completed	SCANNED			
3/1	Chuldielen			2439,32	
		And the second s	265	SALES TAX	S836
Ravin 3737	$M \supset$	06.0		ESTIMATED	2111

Mant Brechisan by Phone 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.



Oil & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084

Paola, KS 66071

WELL LOG

SCZ Resources, LLC Baker #SCZ-26 API #15-121-30,484 August 7 - August 8, 2014

Thickness of Strata	Formation .	Total
14	soil/clay	14
5	shale	19
17	lime	36
29	shale	65
6	lime	71
43	shale	114
10	lime	124
10	shale	134
32	lime	166
12	shale	178
24	lime	202
2	shale	204
6	lime	210 base of the Kansas City
109	shale	319
7	broken sand	326 30% brown sand 70% shale ok bleeding
22	shale	348
1	broken sand	349 40% brown sand 60% shale
10	oil sand	359 very soft brown sand good bleeding
2	lime	361
4	oil sand	365 black sand good bleeding thin shale laminations
4	broken sand	369 90% soft black sand 10% shale laminations
3	limey sand	372 30% white limey sand 70% hard black sand good bleeding
3	broken sand	375 60% black sand 40% shale ok bleeding
1	lime/shale	376
15	lime	391
29	shale	420 TD

Drilled a 9 7/8" hole to 20.6' Drilled a 5 5/8" hole to 420'

Set 20.6' of 7" threaded and coupled surface casing, cemented with 4 sacks cement.

Set 411' of 2 7/8" 8 round upset tubing with 2 centralizers, 1 float shoe, 1 clamp, and 1 seating nipple.. Seating nipple set at 349'.