Сс	onfiden	tiality	Requested:
	Yes	ΠN	0

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1240648

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 #	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:		
	Producing Formation:		
	Elevation: Ground: Kelly Bushing:		
Gas D&A ENHR SIGW	Total Vertical Depth: Plug Back Total Depth:		
OG GSW Temp. Abd. CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet		
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No		
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			
Plug Back       Conv. to GSW       Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)		
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls		
Dual Completion     Permit #:	Dewatering method used:		
SWD     Permit #:	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	Quarter Sec Twp S. 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 III Approved by: Date:			

	Page Two	1240648
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INCTRUCTIONS. Chain important tang of formations panetrated	Dotail all cores Report all final	conice of drill stome taste 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 (Attach Additional Sheets)		Yes No		-	Formation (Top), Depth an		Sample
Samples Sent to Geolog	jical Survey	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
			RECORD Ne				
		Report all strings set-c	conductor, surface, inte	rmediate, product	ion, etc.		
Purpose of String         Size Hole Drilled         Size Casing Set (In O.D.)         Weight Lbs. / Ft.         Setting Depth         Type of Cement         # Sacks         Type					Type and Percent Additives		
		ADDITIONAL	CEMENTING / SQU	EEZE RECORD			

Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Protect Casing				
Plug Back TD				
Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well?	Yes
Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?	Yes
Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?	Yes

No	(If No, skip questions 2 and 3)
No	(If No, skip question 3)

No

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

Shots Per Foot				N RECORD - Bridge Plugs Set/Type otage of Each Interval Perforated			Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			Depth
TUBING RECORD:	Siz	ze:	Set At:		Packe	r At:	Liner F	Run:	No	
Date of First, Resumed	I Product	ion, SWD or ENHF	۲.	Producing M	ethod:	ping	Gas Lift	Other (Explain)		
Estimated Production Oil Bbls. Per 24 Hours		ls.	Gas	Mcf	Wate	ər	Bbls.	Gas-Oil Ratio	Gravity	
DISPOSITION OF GAS:			METHOD OF COMPLETION:			PRODUCTION INTE	ERVAL:			
Vented Solo	d 🗌 I	Used on Lease		_ Open Hole Perf. Dually (Submit)		Comp. 4 <i>CO-5</i> )	Commingled (Submit ACO-4)			
(If vented, Submit ACO-18.)			Other (Specify)			()				

Form	ACO1 - Well Completion
Operator	Linn Operating, Inc.
Well Name	FIRST NAT'L BANK A-5 ATU-450
Doc ID	1240648

Tops

Name	Тор	Datum
KRIDER	2311	КВ
WINFIELD	2351	КВ
TOWANDA	2426	КВ
FT_RILEY	2467	КВ
FUNSTON_LM	2591	КВ
CROUSE	2646	КВ
MORRILL	2727	КВ
GRENOLA	2769	КВ

Form	ACO1 - Well Completion
Operator	Linn Operating, Inc.
Well Name	FIRST NAT'L BANK A-5 ATU-450
Doc ID	1240648

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
SURFACE	12.25	8.625	24	728	Premium Class C	450	
PRODUC TION	7.875	5.50	15.50	3068	O-Tex LowDense	425	

COUNTY	OB SUM	AMARY			TN# 1			11/4/2014		
Stanton	Linn Energy				Orlando	5				
First Nat'l Bank A4 ATU 450 Surface			MARIO ABREGO				-			
ELIP NAME		1201000				MARO	ABREG	0		
ARIO ABREGO			1.	IT			-	1 1		
DAVID BAGALA BANTIAGO CALICTO							-	1		
RICK POLK										
form. Name churchand on	Type;						2.3573			
	1110.			Caller	101	10n Locat		Tel Stated		
Packer Type Bottom Hole Temp.	Set Al		Date	1	/4/2014	On Locati 11/04	14	Job Started 11/04/1	100	Complet 11/04/1
Retainer Depth	Pressu Total E		Time		00034					
Tools and	Accessorie	s	Time		:00PM	6:00F		8:50PM		9:50PM
Type and Size	Qty.	Make			New/Used	Weight	ISIze G	nde From	TTO	Max. A
nsert Float Valve	0	IR	Casing	<u> </u>	NEW	24	8.625	0 101	728	20
entralizers	0	IR IR	Liner	_						
op Plug	0	IR	Tubing				-			-
EAD mit clamp	0	IR	Drill Pip	96						+
Veid-A	0	-18	Open F	ole	1000		_			Shots
exas Pattern Guida Shoa	-	IR IR	Perfora	tions						- Children
ement Basket	0	R	Perfora	bons					_	
ud Type WEM			Hours C	Dalar	ation	Operating	Hours	Desci	iption of Jo	<u> </u>
isp. Fluid H20 r	Density	0 Lb/Gal	11/04/		Hours	Date 11/04/14	Hours	Surfac		v
pacer type H20 BBL	10		1000	-	4.0	11/04/14	1.0			
bacer type BBL										
cid TypeGal		%	-	-			2	-		
urfactant Gal										
E Agent Gal		n								
uid Loss Gal/i alling Agent Gal/i	The second secon	n		-						
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SC Gal/L	.b1	a	Tolal		4.0	Total	1.0			
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her	1212		1	100	1	Average R				-
her			MAX	1000	4.5	AVG	3.5			
her			Feel 4	3		Cement	Left in Pi		0.000-000A	
			C OUI			Reason		Shoe	Joint	_
Paul Paul -			Cen	nent D	ala					
ege Sacks Cemen 1 450 Premium Cia		Calcium Chioride and	Additives					W/Re	Yield	Lbs/G
			AD INCLUSION	PERSONAL PROPERTY AND INCOME.				6.34	1.35	14.8
				_	100				_	
						1000				
			Cume					5.0		
flush	Type		Sumr		ush: J	381	10.00	Turner		
akdown				Load	& Bkdn, G	ial - 881 🗂		Type: Pad Bb	-Gal	0
	Lost Retu Actual TC	G	0	_Exce	ss /Return ( TOC	381	45	Calc Dr	ip Bh	
rage	Frac. Gra	dient		Treat	tment: G	al - BBI	SURFA	CE Actual ( Diso Bb		44.00
5 Mm	10 Min	15 Min		_Cem	ent Slurry E	BI C	108.2			
	T			Iotal	Volume E	BI	162.20			
					1					
CUSTOMER REPRESE					N.I	A				
		-			SI	GNATURE			-	
						Than	k You	For Usin	0	

JOB SUMMARY					TN# 1		TRACETORIE	11/6/2014		
Stanton Linn Energy					CLISTOMEN NEP					
	Well No. LOB	1WE		1.	ELECTREE INC	UE .				
CHP NAME	NUMBER  PT	oduction			MARIO	ABREG	0			
MARIO ABREGO			-		5.00			Summer		
SHAWN COTTON				1.	//	Q				
CHAD NORRIS					1					
			++					2000	-	
Form Name +	Type:								200 200	
			Called	10.0	10-1				1000	
Packer Type	Sot AI	Date	11	/5/2014	On Locati 11/06	00	Job Started 11/06/14	Job (	Complet 11/06/14	
Bottom Hole Temp.	Pressure				1		1 1/00/14		11/06/14	
	Total Depti Accessories	Time	<u>) 1</u>	1:00PM	4:00/		8:50AM		10:30AN	
Type and Size	Qty N	lake			Well	Data			19.9979	
vuto Fill Tube		table to be a second		New/Used		Size Gra	de From	To	Max. A	
nsert Float Valva		IR Casi		New	18.5	5.5	0 244	3068	200	
entralizers		R Uner								
op Plug	0	R Tubi		-				-		
EAD	0	R Drill	Pipe				++			
mit clamp		R Oper	Hole		-					
exas Pattern Guide Shoe	0	R Perfo	rations	10,000			1		Shots	
ement Basket		R Perfo	rations				1			
Mater		R Perfo	rations		_	1.36.24			+	
ud Type 6	Density 0	Lb/Gall Da	te H	Non	Operating	lours	Descript	ion of Jot	2	
isp. Fluid Hai (	Density 8.33	Lb/Gal 1170	CHA T	48	Date 11/05/14	Hours	Producti		1.1.1	
pacer type HUM SILIC BBL					11/00/14	20				
bacer type BBL cid Type Gat						-		-		
d TypeGat			_			1		_		
ufactant Gal										
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uid Loss Gal/									1-21-22	
alling Agent Gal/									_	
SC. Gal/										
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ner		MAX	3	.2	AVG	ates (1 0)	- 241			
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		-		2.01						
age Sacks Cemen	1	A deltate	ement Da	_		1.1.1.1.1		0		
425 O-Tex LowDens	e Cement 2% Oyp.	2% Calcium Chioride, 2% C	-44 84% C-1	5.0 4% C.410		Parish of the local	W/Rq.	Yield	Lbs/Ga	
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rage	Actual TOC		Calc			SURFACI	Calc Disn I Actual Dis	RPI	141.054	
5 Min	Frac. Gradient	15 Min	Treatr	nent G	el - BBl 📃		Disp Bbl		72.00	
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