Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1244318

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 North / South Line of Section
City:	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.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD ☐ SIOW ☐ Gas ☐ D&A ☐ ENHR ☐ SIGW	Elevation: Ground: Kelly Bushing:
GSW Sigw Sigw 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? 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	Drilling Fluid Management Plan
☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Operator Name:
GSW Permit #:	Lease Name: License #:
	Quarter Sec TwpS. R
Spud Date or Date Reached TD Completion Date or 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:

1244318	

Operator Name:			Lease Name: _			Well #:			
Sec Twp	S. R [East West	County:						
INSTRUCTIONS: Show open and closed, flowin and flow rates if gas to s	g and shut-in pressur	es, whether shut-in pre	essure reached stati	ic level, hydrosta	tic pressures, b				
Final Radioactivity Log, files must be submitted				ogs must be ema	iled to kcc-well-	logs@kcc.ks.go	v. Digital electronic log		
Drill Stem Tests Taken (Attach Additional Sh	reets)	Yes No	□ L		on (Top), Depth		Sample		
Samples Sent to Geolog	gical Survey	☐ Yes ☐ No	Nam	е		Тор	Datum		
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No							
List All E. Logs Run:									
		CASING	RECORD Ne	ew Used					
		Report all strings set-	conductor, surface, inte	ermediate, producti	on, 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 / SQL	JEEZE RECORD		'			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used Type and Perce			Percent Additives	cent Additives		
Protect Casing Plug Back TD Plug Off Zone									
Did you perform a hydraulio	=			Yes	= '	skip questions 2 ar	nd 3)		
Does the volume of the total Was the hydraulic fracturing	,	· ·	, 6	?		skip question 3) fill out Page Three	of the ACO-1)		
Shots Per Foot		NRECORD - Bridge Plug otage of Each Interval Per			cture, Shot, Ceme	ent Squeeze Record Material Used)	d Depth		
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:					
D . (E . : 2	1 11 0110				Yes N	lo			
Date of First, Resumed Pr	roauction, SWD or ENHF	R. Producing Meth	nod: Pumping	Gas Lift C	other (Explain)				
Estimated Production Per 24 Hours	Oil Bb	ls. Gas	Mcf Wat	er Bi	ols.	Gas-Oil Ratio	Gravity		
DISPOSITION			METHOD OF COMPLE		anain al!	PRODUCTIO	ON INTERVAL:		
Vented Sold	Used on Lease	Other (2 costs)	Perf. Dually (Submit)		nmingled mit ACO-4)				
(ii verileu, Subili	III 700-10.)	Other (Specify)			-				

Form	ACO1 - Well Completion
Operator	Lakeshore Operating, LLC
Well Name	Fuller LO-62
Doc ID	1244318

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	23	40	Portland	12	0
Production	5.875	2.875	6	1100	Pozmix	194	0

RECEIVED

By Jamie at 10:46 am, Feb 03, 2015

3613A iY Road Madison, KS 66860 Ph: 620-437-2661 Fax: 620-437-2881

HURRICANE SERVICES INC

104 Prairie Plaza Parkway Garnett, KS 66032 Ph: 785-448-3100 Fax: 785-448-3102

FED ID# 48-1214033 MC ID# 165290

Remit to: Hurricane Services, Inc.

250 N. Water, Suite 200 Wichita, KS 67202

250 N Water Suite 200

 Customer:
 Invoice Date:
 1/5/2015

 LAKESHORE OPERATING LLC
 Invoice #:
 0015973

 C/O CAROLYN JERGENSON CPA LLC
 Lease Name:
 FULLER

 340 S LAURA ST
 Well #:
 LO-62

 WICHITA, KS 67211
 County:
 WOODSON

		6₹0		
Date/Description		HRS/QTY	Rate	Total
See ticket 50136 of JB		1.000	675.000	675.00
Vacuum Truck 80 bbl 108	9308 stage 2	2.000	84.000	168.00
Vacuum Truck 80 bbl 111		2.000	84.000	168.00
Cement Bulk truck/ton		115.000	1.300	149.50
Cement Pozmix 60/40		194.000	12.000	2,328.00 T
Bentonite Gel		533.000	0.300	159.90 T
FLO Seal		48.000	2.150	103.20 T
City water		4,600.000	0.013	59.80 T
Top rubber plug 2 7/8"		1.000	25.000	25.00 T
Discount		1.000	133.790-	133.79-T
Discount		1.000	58.030-	58.03-

Net Invoice	3,644.58
Sales Tax: (7.15%)	181.76
Total	3,826.34

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Lakeshor	Lakeshore Operating			Customer No.:			Ticket No.:		50136	
Address					AFE No.:			P.O. No.:			
City, State, Zip:	p:			Job type	Cement Long	string - 2 7/	8 csg" , 5 7/8" h	ole			
Service District:	Service District: Garnett			Well Details:	2 7/8 casing @	<u> 1100 5 7</u>	/8 hole @ 1110			•	
Well name & No. Fuller LO-62		Well Location:	County: Woodson State			State:	Kansas				
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED				AM PM	TIME
26	Joe					ARRIVED AT JOB				AM PM	
231	Tom					START OPERATION				AM PM	
242	Troy					FINISH OPERATION				AM PW	
111	Tyler					RELEASED			AM PM		
108	Jeff					MILES FROM STATION TO WELL					

Hooked onto 2 7/8 casing and achieved circulation. Pumped 17 bbl gel sweep followed by 17 bbl water spacer and 194 sks of 60/40 poz mix 2% gel 1/4 flo seal.. Flushed pump and pumped plug to bottom and set float shoe. Left 500 psi on float shoe.. CEMENT TO SURFACE. Topped a wells off thats why it took more cement charged to this ticket..

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	4	let Amoun
00101	Heavy Equip. One Way	mi	- AHRIV	\$3.25	\$0.00			\$0.0
00102	Light Equip. One Way	mi	-	\$1.50	\$0.00			\$0.0
23103	Cement Pump (Multiple wells)	ea	1.00	\$675.00	\$675.00	5.00%		\$641.2
10800	Vacuum Truck 80 bbl	ea	2.00	\$84.00	\$168.00	5.00%		\$159.6
:11100	Vacuum Truck 80 bbl	ea	2.00	\$84.00	\$168.00	5.00%		\$159.6
24200	Cement Bulk Truck	tm	115.00	\$1.30	\$149.50	5.00%		\$142.0
01603	60/40 Pozmix Cement	sack	194.00	\$12.00	\$2,328.00	5.00%		\$2,211.6
01607	Bentonite Gel	lb	200.00	\$0.30	\$60.00	5.00%		\$57.0
01607	Bentonite Gel	lb	333.00	\$0.30	\$99.90	5.00%		\$94.9
01611	FLO-Seal	lb	48.00	\$2.15	\$103.20	5.00%		\$98.0
02000	H2O	gal	4,600.00	\$0.01	\$59.80	5.00%		\$56.8
01631	Rubber 2 7/8	ea	1.00	\$25.00	\$25.00	5.00%		\$23.7
	ince unless Hurricane Services Inc has approved credit prior to sale.			Gross:	\$ 3,836.40	Net:	\$	3,644.5
ne date of invoice. Pa	ist due accounts may pay interest on the balance past due at the rate of 1	Total	Taxable	\$2,542.11	Tax Rate:	7.150%	\geq	\leq
terest to a lesser am	maximum allowable by applicable state or federal laws if such laws limit ount. In the event it is necessary to employ an agency and/or attorney to		ervice treatments de			Sale Tax:	\$	181.7
affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent. HSI has the right to revoke any and all discounts previously applied in arriving at net			oduction on newly dr wells are not taxable		Total: \$ 3,8			3,826.3
voice price. Upon re	vocation, the full invoice price without discount will become immediately		Date of Service:			1/5/2015		
due and owing and subject to collection.		HSI Representative: Joe Blanchard					rd	
X		Custome	r Representative:		Gı	eg Jackma	an	
	CUSTOMER AUTHORIZED AGENT							- 19C
	Customer Comments or Concerns:							