Confidentiality Requested:

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1244747

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.xxxx) (e.gxxx.xxxx)				
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:				
G GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet				
CM (Coal Bed Methane)					
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?				
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 #: Dual Completion Permit #:	Dewatering method used:				
SWD Permit #:	Location of fluid disposal if hauled offsite:				
ENHR Permit #:	Location of huid disposal if hadied offshe.				
GSW Permit #:	Operator Name:				
	Lease Name: License #:				
Spud Date or Date Reached 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 III Approved by: Date:						

CORRECTION #1

Operator Name:				Lease Name:	_ Well #:		
Sec	Twp	S. R	East West	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 Taker (Attach Additional S	-	Yes No	L	Log Formation (Top), Depth and Datum Sample			Sample
Samples Sent to Geo	,	Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING Report all strings set-c	RECORD Ne		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 / SQUEEZE RECORD							
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used	s Used Type and Percent Additives			
Protect Casing							
Plug Off Zone							
Did you perform a hydraulic fracturing treatment on this well?							
		raulic fracturing treatment ex n submitted to the chemical c		Yes		o question 3) out Page Three c	of the ACO-1)
Shots Per Foot PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated			s Set/Type forated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			

	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth		
TUBING RECORD:	Si	ze:	Set At:	Pack	er At:	Liner F	Run:	No	
			Producing Method:	mping	Gas Lift	Other (Explain)			
Estimated Production Per 24 Hours		Oil Bb	ls.	Gas Mcf	Wa	ter	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:		METHOD OF COMPLETIO		ETION:		PRODUCTION INTER	RVAL:		
Vented Sold		Used on Lease		Open Hole Perf.	Duall (Submit	y Comp. <i>ACO-5)</i>	Commingled (Submit ACO-4)		
(If vented, Submit ACO-18.)		Other (Specify)				. , ,			

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Summary of Changes

Lease Name and Number: Cartwright KRI-26 API/Permit #: 15-121-30809-00-00 Doc ID: 1244747 Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	02/18/2015	03/04/2015
Perf_Record_1		489-502
Perf_Shots_1		3
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 42318	//kcc/detail/operatorE ditDetail.cfm?docID=12 44747