

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1249208

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	South Line of Section
City: S	tate: Zi	p:+	Fe	eet from East / V	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section Co	orner:
Phone: ()			□ NE □ NV	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:	We	ell #:
New Well Re	-Entry	Workover	Field Name:		
	_	_	Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW □ SIGW	Elevation: Ground:	Kelly Bushing: _	
☐ OG	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total De	epth:
CM (Coal Bed Methane)	dow	тетір. Ава.	Amount of Surface Pipe Se	et and Cemented at:	Feet
Cathodic Other (Con	e. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well In			If yes, show depth set:		Feet
Operator:			If Alternate II completion, of	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:	Original To	otal Depth:			
Deepening Re-perf.	Conv. to E	NHR Conv. to SWD	Drilling Fluid Manageme	nt Plan	
☐ Plug Back	Conv. to G	SW Conv. to Producer	(Data must be collected from t		
O constitued and	D		Chloride content:	ppm Fluid volume:	bbls
<ul><li>Commingled</li><li>Dual Completion</li></ul>			Dewatering method used:		
SWD			Location of fluid disposal if	f haulad offsita:	
☐ ENHR			Location of fluid disposal fi	nauled offsite.	
GSW			Operator Name:		
_			Lease Name:	License #:	
Spud Date or Date Rea	ached TD	Completion Date or	QuarterSec	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 l	Name: _			Well #:		
Sec Twp	S. R	East \	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in pres o surface test, along	sures, whether s with final chart(	shut-in pre s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bot d.	tom hole temp	erature, flui	d recovery,
Final Radioactivity Lo- files must be submitte						ogs must be ema	ailed to kcc-well-lo	gs@kcc.ks.go	v. Digital el	ectronic log
Drill Stem Tests Taker (Attach Additional S		Yes	☐ No		_		on (Top), Depth ar			mple
Samples Sent to Geo	logical Survey	Yes	No		Nam	е		Тор	Da	tum
Cores Taken Electric Log Run		Yes Yes	☐ No ☐ No							
List All E. Logs Run:										
			CASING		☐ Ne					
		1				ermediate, product		T	_	
Purpose of String	Size Hole Drilled	Size Cas Set (In O		Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		d Percent itives
		AD	DITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Ce	ement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
1 lug 0 li 20110										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to								p question 3)		
Was the hydraulic fractur	ing treatment information	on submitted to the	e chemical c	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1	)
Shots Per Foot		ION RECORD - I					cture, Shot, Cement		d	Depth
						,		,		
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or Ef		ducing Meth Flowing	od:	g 🗌	Gas Lift (	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er B	bls. 0	as-Oil Ratio		Gravity
DISPOSITIO	ON OF GAS:		N/	1ETHOD OF	COMPLE	TION:		PRODUCTION	)N INTER\/^	1.
Vented Sold		Open I	_	Perf.	Dually	Comp. Cor	mmingled	THODOCTIC	ZIN IIN I ERVA	<b>L.</b>
	bmit ACO-18.)	Other	(Specific)		(Submit )		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Triple Crown Operating LLC
Well Name	Shauers 1-26
Doc ID	1249208

#### Tops

Name	Тор	Datum
Anhydrite	1524	747
Heebner	3666	1395
Lansing	3720	1449
B/KC	4058	1787
Marmaton	4060	1789
Ft.Scott	4220	1949
Cherokee	4250	1979
Mississippian	4330	2059

## ALLIED OIL & GAS SERVICES, LLC 063064

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092

SERVICE POINT: Addicine Lodge KS TWP. RANGE CALLED OUT ON LOCATION JOB FINISH JOB START DATE 11/23/14 200 AM COUNTY STATE LOCATION Ness City KS, Zai West WELL# 1-26 LEASE Ness OLD OR NEW (Circle one) to mail box. East into CONTRACTOR OWNER Tripk Crown Operating TYPE OF JOB HOLE SIZE 12 CEMENT AMOUNT ORDERED 1751x Class A + 3%cc+ CASING SIZE **DEPTH TUBING SIZE** DEPTH 2% Gel DRILL PIPE DEPTH TOOL DEPTH PRES. MAX **MINIMUM** COMMON Class A 175x@ 1790 3132 50 MEAS. LINE SHOE JOINT POZMIX CEMENT LEFT IN CSG. 329#5@1.05 345.45 GEL. PERFS. CHLORIDE 49345 @ 1.10 DISPLACEMENT **EQUIPMENT** CEMENTER **PUMP TRUCK** #8 /302 HELPER **BULK TRUCK** DRIVER **BULK TRUCK** @ DRIVER HANDLING MILEAGE \_ REMARKS: TOTAL 4020.25 SERVICE DEPTH OF JOB \_\_\_ Z 38 PUMP TRUCK CHARGE 15/2,25 EXTRA FOOTAGE LV 44,00 MILEAGE MANIFOLD\_ @2. Handling CHARGE TO: Triple crown Operating TOTAL 2340.14 PLUG & FLOAT EQUIPMENT To: Allied Oil & Gas Services, LLC. You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was TOTAL done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL SALES TAX (If Any) \_\_\_ TERMS AND CONDITIONS" listed on the reverse side. TOTAL CHARGES 6360, 39 PRINTED NAME DISCOUNT IF PAID IN 30 DAYS

#### ALLIED OIL & GAS SERVICES, LLC 063925

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999

SERVICE POINT:

Great Resort

DATE 11-28-14 SEC. TWP. RANGE 24 CALLED OUT ON LOCATION JOB START JO

LEASE SHARKS WELL# 1-26 LOCATION LOCATIO

JOB FINISH 700AM 600 AM LEASE SHAURZS LOCATION WESS CITY WEST TO PRO SOUTH OLD OR WEW (Circle one) 5 miles to 90 RD 3/4 ON South East into CONTRACTOR HA OCILIAGE
TYPE OF JOB PRODUCTION THOLE SIZE 7 72 T
CASING SIZE 5 6 17463 17 OWNER т.d. 4430 depth 4407 so CEMENT AMOUNT ORDERED <u>!!& 7x C/BSS AX +2% GA) +</u> 10% SAIT + 6% Gye + 5<sup>#</sup>KOLSEN POLSEN D F 50 SX 60/40+4% + 1/4 Flo TUBING SIZE DEPTH DRILL PIPE DEPTH TOOL DEPTH PRES. MAX MINIMUM COMMON MEAS, LINE SHOE JOINT POZMIX @ CEMENT LEFT IN CSG. GEL @ PERFS. CHLORIDE (b) DISPLACEMENT 102.26 Fresh H20 ASC 116 5x ASC @ <u>23.5</u>0 2,726.00 @ <u>. 93</u> @ <u>9.50</u> @ <u>13.92</u> @ <u>2.9</u>7 575 Kol EQUIPMENT <u>563, So</u> DE 117,60 346-00 38-61 <u>505x 60/40+4%</u> CEMENTER Key DEddy PUMP TRUCK Flo <u># 597</u> HELPER Torinho Allen Materials Total 4391.71 BULK TRUCK 202 D:200172F 579 - 34 DRIVER Keun arghans #669*/23*9 **@ BULK TRUCK** 5evice @ DRIVER HANDLING Rol 25 x @ <u>248</u> 499.19 MILEAGE 5.683 15 2.75 358-45 REMARKS: ONLogation/Held BAFETY MEETING/RiguA Rig RAW OT Sta CASING - BLOKE CITE WIRIG Mud - Pump SBBIS FRESHHOO, Pump 10 BBB Flush Pump & BBIS BeHisso - Plus Rot + mouse Hole . Mix 116 5x ASC + 270 Ge) + 10 20 501+ +670 Gyr - 5 th DEPTH OF JOB PUMP TRUCK CHARGE 2765-75 Kolesen Persx + DF. SHUT DOWN Release Plug EXTRA FOOTAGE (c Displace 102. BBIS Fresh H20- (AND) Plug Q 1250 PSI - CEMENT DID CIRC R'9 DOWN @ 7.70 @ 275.00 MILEAGE HUM 15 115-50 275-00 MANIFOLD. @ 4.40 CUM 15 66.00 CHARGE TO: Triple COWN TOTAL 4079-49 STREET\_ STATE ZIP, PLUG & FLOAT EQUIPMENT ExpleTANK YOU 00-28 00.28 ® 1 Rubber Plus **(** (ä) To: Allied Oil & Gas Services, LLC. @ You are hereby requested to rent cementing equipment Ø and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was TOTAL \$5.00 Disc 20% 17.00 done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL SALES TAX (If Any) -TERMS AND CONDITIONS" listed on the reverse side. TOTAL CHARGES 8.556.30 20% 7.711. 89 30/20/20\_ DISCOUNT . IF PAID IN 30 DAYS PRINTED NAME 6,349.06

# ALLIED OIL & GAS SERVICES, LLC Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092

SERVICE POINT: Great Bend KS

ITEM.	1	~~~~~			***************************************	TOTAL .	14/1	
DATE 12-02-14	SEC. 26	TWP.	RANGE 24	C	ALLED OUT	ON LOCATION	108 START \$35 AM	JOS FINISH
SHAKKA LEASE	WELL#	1-26	LOCATION (UCS	55 C)	te west to	opka south	COUNTY	STATE
OLD OR KEDO (Ci	rcle one)		For 6 mile					7700
CONTRACTOR A	42 01	7/1/2×	<u> </u>		OWNER			
TYPE OF JOB S	uvfact		·/		200 1 100 100 100 100 100 100 100 100 10			
HOLESIZE 121		T.D.	240	*********	CEMENT			
CASING SIZE &			TH 238,93			RDERED <u>200</u>	5x5 C/05	c A
TUBING SIZE		DEF			39/0 00	2 % Gel	-3-4-3 C/XX-2	- <u></u>
DRILL PIPE	*****		STH.			<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>		
TOOL			PTH.				77-000	
PRES. MAX			IMUM		COMMON	and the	@ <u>17.90</u>	700 4-
MEAS, LINE	***************************************		DEJOINT	W/F10-7	POZMIX	3 <del>26 485</del> 75		
CEMENT LEFT IN	CSG	<i>⊂-7</i> /-	<u> </u>	***************************************			_@ <u>.50</u>	5188,00
PERFS.	<u> </u>	3			CIEC 2/8 7	3 <del>5 5 6 6 6</del> 5	@ <del>\$180 - \$2</del>	
DISPLACEMENT	13.63	Trans.	1120		CHLORIDE		@ _ <i></i>	<u>624-00</u>
DISPERCENTER			7720		ASC ZOGIC	o <u>als Total</u>		4392.8c
	EQU	IPMENT						<u> 578-46</u>
							@	
PUMP TRUCK (	CÉMENT	ER Keu	is Eddy				@	·
<u># 366</u>	HELPER	Hours	seich aux					w nwa
BULK TRUCK		710.07.77	weighous				@	
#371/112	DRIVER	Vat	Iracheta CT	(245			@	
BULK TRUCK	D1(1 / D1(		Line Congression			V/III = V-	_ @	
	DRIVER					.50	<u>~\^\Z\\</u>	
***************************************	D101 7 1,010					9.89×15	@ <u>გ.75</u>	407-13
					MILEAGE _	<u> 216,26 t                                    </u>	2.48	534.32
	RE	MARKS:						
CITE CS/RIG CITE CS/RIG HISO-MIVE DISO/ACE 13. RIG DOWN	00 u d - 1 10 5 X S 63 <i>BB</i> IS	Pump CIBSS E Fresh	5 <u>Allen</u> d Fir 13%cs 2%s 486-514+	رم وحرب د۲	PUMP TRUC EXTRA FOC	OB <u>238-93</u> IK CHARGE ITAGE	@	15/2
					MILEAGE		@	
					MANIFOLD			
					LUM	/5	_ @ <u>7·7</u> -	//5-50
					_HUM		@ 4.40	66-00
CHARGE TO: 7	chlo	C 131.11	ر ن				·	- 10
	77-1						70741	263-95
STREET								
CITY	61-7-	A -T- F-	710				Disc 36%	527- <i>3</i> 5
C11 1	51.	ATE	ZIP			PLUC & FLOA	*	
يعس								~ ~
Thai	36	1/5/1				710170100000000000000000000000000000000		
10141	JA,	<i>y</i> 000				71/2020404444	@	
	,						@	701
To: Allied Oil & (	Gas Servi	ces, LLC.						
You are hereby re	quested t	o rent cerr	enting equipmen	nt	***************************************		@	
and furnish cemer					PP-000100000000000000000000000000000000		@	
contractor to do w								
							ንፖርኒፕ-ላ ፣	cZS
done to satisfaction							7.5.00	, <del></del>
contractor. I have					CALECTAV	/16 A>	(Lycar O2	٥
TERMS AND CO	OITION	NS" listed	on the reverse s	ide.	SALES TAX			
	_		1		TOTAL CHA	RGES <u>7078</u> .		
PRINTED NAME	<u> </u>	rse	- (1XL	1/2		10% 1405 79	201	<i>えら/え</i> ら ID IN 30 DAYS
	1	C)	, ,	- ]	/	5623.1		
SIGNATURE	MOA	10x C	Other.		r	ا السمون ي	•	

#### ALLIED OIL & GAS SERVICES, LLC

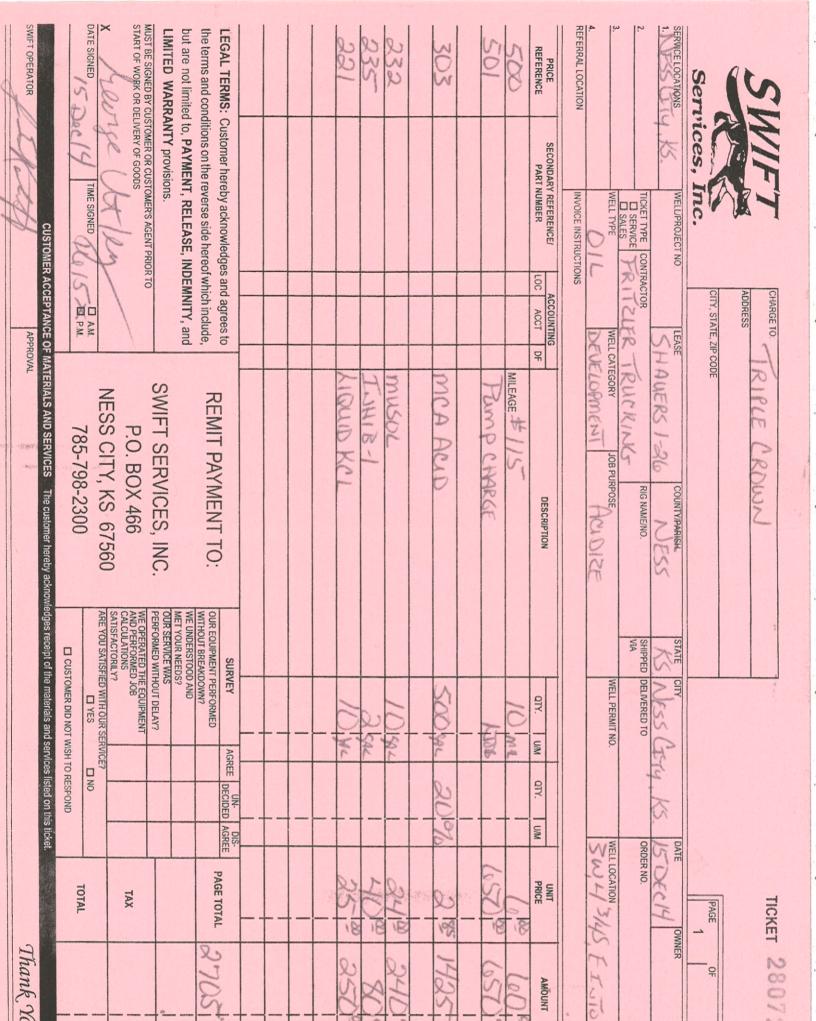
Federal Tax I.D. #20-5975804

067264

SERVICE POINT:

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092 C. Ko. 1 RANGEZ C/ JOB FINISH

230000
STATE CALLED OUT ON LOCATION JOB\_START DATE 17-11-14 LEASE 5/2 -26 # WELL كتمييز LOCATION 4115 OLD OR NEW (Circle one) North for 1 CONTRACTOR OWNER TYPE OF JOB Part Caller CEMENT T.D. HOLE SIZE AMOUNT ORDERED 1646 CASING SIZE DEPTH 6-301 19 Fla 7-34 TUBING SIZE DEPTH DRILL PIPE DEPTH TOOL DEPTH PRES. MAX MINIMUM COMMON MEAS, LINE SHOE JOINT POZMIX Ø CEMENT LEFT IN CSG GEL **(**() CHLORIDE 0 PERFS. 261 1-120 @ DISPLACEMENT ASC 2-5x 1-5/35 @ EQUIPMENT <u> C/e</u> 18714 (a) @ PUMPTRUCK # 366 CEMENTER CESS (SEC @ HELPER DOGG **(c)** BULK TRUCK @ # 371-112 @ **BULK TRUCK** # 609-239 DRIVER N TOTAL <u>51.57</u># DISCOUNT <u>Zo % (03/ 12</u> REMARKS: SERVICE 1000 ps1 @ 2.43 handling 309.03 53415. MILEAGE 12,95 × 15 × 2,75 - pressace test d Corsolace DEPTH OF JOB list Carry 2244 84 PUMP TRUCK CHARGE EXTRA FOOTAGE\_ @., 15 @ 7.70 HV MILEAGE 4.40 LV MILEAGE @ \_ Ø CHARGE TO: \_ TOTAL <u>.373/9</u>3 STREET. DISCOUNT <u>70%</u> 74638 ZIP. STATE\_ PLUG & FLOAT EQUIPMENT  $(\hat{a})$ To: Allied Oil & Gas Services, LLC. @ You are hereby reducated to rent cementing equipment Ø, and furnish cementer and helper(s) to assist owner or @ contractor to do work as is listed. The above work was (a) done to satisfaction and supervision of owner agent or TOTAL contractor. I have read and understand the "GENERAL DISCOUNT 6 TERMS AND CONDITIONS" listed on the reverse side. SALES TAX (If Any) TOTAL CHARGES 8889 92 PRINTED NAME DISCOUNT - 175 20 IF PAID IN 30 DAYS NEFTOTAL IF PAID IN 30 DAYS SIGNATURE



198

AMOUNT

TICKET 28072

PAGE

QF

OWNER

TAX

Thank You!

2705

SWIFT Services, Inc. DATE 15 DOC 14 PAGE NO. JOB LOG TRIPLE CROWN LEASE SHAUERS 1-26 JOB TYPE ACIDIZE PRESSURE (PSI)
TUBING. CASING VOLUME (BBL) (GAL) TIME DESCRIPTION OF OPERATION AND MATERIALS 1230 ON LOCATION PERFS 4320-42 1358 START ACIO DOWN WELL 12 6 START FLUSH 1421 25 CASING LOADED 100 1425 250 STAGING 300 400 500 600 102 700 104 800 900 1000 1100 108 12001 - LET PSI FALL 1/3 800 1085 1/3 1000 1/2 START I BAP OVERFLUSH 112 1000 TSIP 1547 1000 3 MIN SHUT IN. 700 10 MIN SHUTEN 500 15 MIN SHUT FN 400 RELEASE PSI - FLOW BACK I BW. TREAT WITH 500 SEMCA 20% JOB CompLETE 1615 TAANKS H 115 JASON DAUE

SWIFT OPERATOR START OF WORK OR DELIVERY OF GOODS MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO 1. NESS CATINS but are not limited to, PAYMENT, RELEASE, INDEMNITY, and the terms and conditions on the reverse side hereof which include, LEGAL TERMS: Customer hereby acknowledges and agrees to LIMITED WARRANTY provisions REFERRAL LOCATION 582 581 290 REFERENCE 286 578 325 575 PRICE 1-14-15 Services, Inc. WASSEM SKIPS SECONDARY REFERENCE/ PART NUMBER TIME SIGNED INVOICE INSTRUCTIONS WELL/PROJECT NO. WELL TYPE TICKET TYPE CONTRACTOR
SERVICE
SALES
FATT2 CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this licket FATTZUER TRUCKTUS 8 CITY, STATE, ZIP CODE ADDRESS ACCOUNTING MAR ACCT APPROVAL LEASE DENEUPMSOT PRIME (ROWN OPERITANS 무 0-AR MILEAGE MENDMUM DRAYAGE CHARGE SERVIZE CHARGE (EMPAIN Pump Charges STANDARD CEMPUT MUAD SWIFT SERVICES, INC. NESS CITY, KS 67560 REMIT PAYMENT TO: P.O. BOX 466 785-798-2300 112 JOB PURPOSE Soverze Perferrans RIG NAME/NO COUNTY/PARISH DESCRIPTION WE UNDERSTOOD AND MET YOUR NEEDS? OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? SHIPPED DELIVERED TO ARE YOU SATISFIED WITH OUR SERVICE? WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS PERFORMED WITHOUT DELAY? STATE CUSTOMER DID NOT WISH TO RESPOND SURVEY CITY WELL PERMIT NO. 7080 145 QTY. 75 SKS 75/545 30185 70 WE 2 Ses M AGREE 70,8 OND 43141万 QTY. DECIDED AGREE 3 MM SW/NESS GAY KS ORDER NO. 1-14-18 PAGE TOTAL 7688 TAX 15/ 250 00 PRICE 1500 00 TOTAL 42/00 14:50 TICKET 28107 8 50 PAGE 200 OWNER Thank You! SAME 1489 3404150 1087 50 1500 00 85 255 8 AMOUNT <u>15000</u> 150100 20 00 42 8

JOB LO		VETTONIE I MONTO				SWIFT	Serv	ices, Inc. Date 1-14-15 Page
COSTOMER LADPLE	CREIGH	Ofer,	WELL NO.	26		LEASE SH	AVERS	JOB TYPE PERFORMANCE 28107
CHART NO.	TIME	RATE (BPM)	C(BBL)XGAL)	PUN	IPS C	PRESSUR TUBING	•	DESCRIPTION OF OPERATION AND MATERIALS
	1350					VODING	ÇALING	ONLOCATION
							,	TV8526-23/8
								CASTIG - 51/2 - 17#
								PULFS - 4320-42
								RETAZOR - 4314
	1310		7					Loss this
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	1355	1	15	V		1500		" SHOT DOWN
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	1405					13:50		HOW PSZ
	1415					1250		STENG OUT RETAINED
	1420	2/2	30		/		700	REUSESE ELEAN L'ABOUE RETAZUER
								PULL NOTIGE
								WASH TRUCK
			}					BY SKS CEMENT IN PERFS
	1530							JOB CONPETE
			-					THANK YOU
								WAYNE JOHN J., PORTION
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### TREATMENT REPORT

Customer	in the Co	p** p**		Le	ase No.						Dat	e					
Customer Lease	Station			w	eil#	/ -	Casing				1/23/15"						
Field Order #	Station	Porce	y- \-y:				Casing		Depth		Cou	nty //	255		Ş	tate /<	ς. Σ
Type Job	30 n/e/	/3 m	mak do	12.20				Forr	nation	7755			Legal	Descriptio	n / 9	24	
PIPE	DATA	PE	RFORAT	ING	DATA		FLUID U	JSED	,			TREA	TMEN	r RESU	ME		
Casing Size	Tubing Siz	e Shot	ts/Ft			Acid	Congress / A	154	6		RAT	E PRE	SS	ISIP	Va	<u> </u>	
Depth	Depth	Fron	n 4 720	То	38	Pre F	Pa <b>d</b> 1/2	125		Max	73"			5 Min.			
Volume (	Volume	Fron	n .	То						Min	,			10 Mi		•	
Max Press	Max Press	Fron	n	То		Frac				Avg				15 Mi			
Well Connection	1	Fron	n	То		Florat				HHP Us					us Pres		<del>,</del>
Plug Depth	Packer De	Pron Fron	n	То	Station	Flush	149	136		Gas Volume Treater				LOBO /	11/3	ζ	
Customer Rep	resentative ( /*/ ,	وروس بسرخت			Station	wana		1	I			4416,	1975 P			<del>- 1</del>	
Service Units Driver			8-33	5.2		_										-	' //
Names	Casing	Tubing	1700						/">	.0. 4			<u> </u>				
Time	Pressure	Pressui		. Pum	ped	ř	Rate	1//	<u>5e) (</u>	<u> </u>	<u> </u>	Serv	ice Log	JAN James	···		
								> 6-1-	7 1	for phylic	<i>d d</i>	300 T	<del>~ ~ y</del>	وزير متذان كر محوكمر	77/17	<u>, 62</u>	
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1155 1157	yr reg			7		3.8 57			<u> </u>	graphy gr	<u> </u>						
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Thank You!		es receipt of the materials and services listed on this ticket	wledges receipt of the mater	CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledge APPROVAL	CE OF MATERIALS AN APPROVAL	ACCEPTANCE	Justr	SWIFT OPERATOR
25 00	TOTAL	T HSIM TON	1000	/85-/98-2300		N. P.M.	15 1256	0127
3	16.15/0	ITH OUR SERVICE?	SATISFACTORLY?  ARE YOU SATISFIED WITH OUR SERVICE?  ARE YOU SATISFIED WITH OUR SERVICE?	7560		MA []	TIME SIGNED	X DATE SIGNED
++	ness o	MENT LAY?	PERFORMED WITHOUT DELAY? WE OPERATED THE EQUIPMENT AND PERFORMED JOB	P.O. BOX 466	JAAO	10	MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS	MUST BE SIGNED BY CU START OF WORK OR DE
			WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS	T SERVICES IND		EMNITY, an	but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.	but are not limited to, PAYMENT, LIMITED WARRANTY provisions
25/100	PAGE TOTAL	AGREE DECIDED AGREE	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	REMIT PAYMENT TO:	***************************************	and agrees t which include	<b>LEGAL TERMS</b> : Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include,	the terms and cond
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25/00	25-100	9.0		LEQUED KCL	MILEAGE	-		221
AMOUNT	UNIT	C. UM QTY. UM	QIY	DESCRIPTION	DF	ACCOUNTING LOC ACCT	SECONDARY REFERENCE/ PART NUMBER	PRICE
						S	INVOICE INSTRUCTIONS	REFERRAL LOCATION
	WELLLOCATION	WELL PERMIT NO.	WELLP	JOB PURPOSE	WELL CATEGORY		WELLIYPE	
	ORDER NO.	Too	VIA LOCA:	RIG NAMEINO.		CONTRACTOR	SALES	2.
ER	0WNER	CIN K		COUNTYPARISH	LEASE SHOWERS		WELL/PROJECT NO.	1. NESS CE
OF /	PAGE 1				, ZIP CODE	CITY, STATE, ZIP CODE	Services, Inc.	Seri
				( Rown	I WIDTO	ADDRESS		10
28304	TICKET					CHARGE TO:	MIFT	J



#### TREATMENT REPORT

Customery		- v)		Lease No.			Date									
Lease	C & State of St			Well # /- Z_ () Casing Depth						2/11/15						
Field Order #	Station	Pram	7"			Casing	Depth	1	County	nty / ess S			State			
	r 11/2 1 20		مراسسراسر فالإس				Formation	Mij	55		Legal De	scription / 9	24			
PIPE		1	·	NG DATA FLUID U			SED			TREAT		RESUME				
Casing Size	Tubing Size	Shots/Ft			Acid	292/1	1 × 9 n		RATE PRESS		SS	ISIP //	20			
Depth	Depth	From ()	460	Το	Pre P	ad /		Max 9		O		5 Min.				
Volume	Volume	From		То	Pad	,		Min				10 Min.				
Max Press	Max Press	From		Ϋ́o	Frac			Avg				15 Min.				
Well Connection	Annulus Vol.	From	-	Τ̈́o				HHP Use	ď			Annulus Pre	ssure			
Plug Depth	Packer Depti	I HYOM	-	То	Flush	90	136	Gas Volur				Total Load	102 02			
Customer Repre	esentative 🔟	es sul no		Station	Manag	er			Trea	ter 🦯	7 6 / "					
Service Units	87547	/	57325	3												
Driver Names	771		13 3 10 1 5	<u> </u>												
Time	Casing Pressure I	Tubing Pressure	Bbls. I	Pumped	Ra	ate	1015	0/1 4	.os.	Servi	ce Log	, 1) m n 7°,				
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Paragraphic Committee Committee	i i dagaya i dagaya i i i i i i i i i i i i i i i i i i	5.8% 11.6	Lyndrywar			ari Tari kangantari	1 1 200			· .·						
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Yaylor Printing, Inc. 620-672-3656

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

April 15, 2015

Doyle Williams Triple Crown Operating LLC 2201 S. UTICA PL STE 100 TULSA, OK 74114-7099

Re: ACO-1 API 15-135-25818-00-00 Shauers 1-26 NW/4 Sec.26-19S-24W Ness County, Kansas

Dear Doyle Williams:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/22/2014 and the ACO-1 was received on April 14, 2015 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

**Production Department**