

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1251131  
OIL & GAS CONSERVATION DIVISION

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 # \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well       Re-Entry       Workover
- Oil       WSW       SWD       SIOW
- Gas       D&A       ENHR       SIGW
- OG       GSW       Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic       Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening       Re-perf.       Conv. to ENHR       Conv. to SWD
- Plug Back       Conv. to GSW       Conv. to Producer
- Commingled      Permit #: \_\_\_\_\_
- Dual Completion      Permit #: \_\_\_\_\_
- SWD      Permit #: \_\_\_\_\_
- ENHR      Permit #: \_\_\_\_\_
- GSW      Permit #: \_\_\_\_\_

|                                   |                 |   |
|-----------------------------------|-----------------|---|
| Spud Date or<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |
|-----------------------------------|-----------------|---|

API No. 15 - \_\_\_\_\_

Spot Description: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

\_\_\_\_\_ Feet from  North /  South Line of Section

\_\_\_\_\_ Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE       NW       SE       SW

GPS Location: Lat: \_\_\_\_\_, Long: \_\_\_\_\_  
(e.g. xx.xxxxx)      (e.g. -xxx.xxxxx)

Datum:  NAD27       NAD83       WGS84

County: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_

Total Vertical Depth: \_\_\_\_\_ Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: \_\_\_\_\_

feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls

Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite:

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

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: \_\_\_\_\_

1251131

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 Taken<br><i>(Attach Additional Sheets)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey                           | <input type="checkbox"/> Yes <input type="checkbox"/> No | Name                         | Top                              | Datum                           |
| Cores Taken   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                              |                                  |                                 |
| Electric Log Run  | <input type="checkbox"/> Yes <input type="checkbox"/> No |                              |                                  |                                 |
| List All E. Logs Run:                                       |  |                              |                                  |                                 |

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used  |                   |                           |                   |               |                |              |                            |
|---|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| Report all strings set-conductor, surface, intermediate, production, 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:                                | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate      |                  |                |              |                            |
| <input type="checkbox"/> Protect Casing |                  |                |              |                            |
| <input type="checkbox"/> Plug Back TD   |                  |                |              |                            |
| <input type="checkbox"/> Plug Off Zone  |                  |                |              |                            |

Did you perform a hydraulic fracturing treatment on this well?  Yes  No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?  Yes  No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?  Yes  No *(If No, fill out Page Three of the ACO-1)*

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |
|                |   |  |       |

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 Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
|                                   |           |         |             |               |         |

|  |  |   |
|--|--|---|
| <b>DISPOSITION OF GAS:</b><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--|--|---|



# ALLIED OIL & GAS SERVICES, LLC 063718

Federal Tax I.D. # 20-8661475

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

SERVICE POINT:  
*Medicine Lodge, KS*

|                                |                 |                            |                 |            |                           |                 |            |
|--------------------------------|-----------------|----------------------------|-----------------|------------|---------------------------|-----------------|------------|
| DATE <u>1-16-15</u>            | SEG <u>4</u>    | TWP <u>32</u>              | RANGE <u>1E</u> | CALLED OUT | ON LOCATION <u>7:30pm</u> | JOB START       | JOB FINISH |
| LEASE <u>Miller</u>            | WELL # <u>5</u> | LOCATION <u>Wellington</u> |                 |            | COUNTY <u>Summit</u>      | STATE <u>KS</u> |            |
| OLD OR <u>NEW</u> (Circle one) |                 |                            |                 |            |                           |                 |            |

|   |  |
|---|--|
| CONTRACTOR <u>Summit Dnlg</u>             | OWNER <u>Source Energy</u>                         |
| TYPE OF JOB <u>Surface</u>                | CEMENT   |
| HOLE SIZE <u>12 1/4</u> T.D.              | AMOUNT ORDERED <u>200 A</u>                        |
| CASING SIZE <u>8 5/8</u> DEPTH <u>322</u> | <u>370 CC</u>                                      |
| TUBING SIZE DEPTH                         |  |
| DRILL PIPE DEPTH                          |  |
| TOOL DEPTH                                |  |
| PRES. MAX MINIMUM                         | COMMON <u>195</u> SK @ <u>17.90</u> <u>3490.50</u> |
| MEAS. LINE SHOE JOINT <u>42</u>           | POZMIX @   |
| CEMENT LEFT IN CSG. <u>42</u>             | GEL @  |
| PERFS.                                    | CHLORIDE <u>550</u> @ <u>1.10</u> <u>605.00</u>    |
| DISPLACEMENT                              | ASC @  |

**EQUIPMENT**

|  |
|--|
| PUMP TRUCK CEMENTER <u>Roger Smith</u>       |
| # <u>8801499</u> HELPER <u>Coy Pace</u>      |
| BULK TRUCK                                   |
| # <u>8191823</u> DRIVER <u>James Clayton</u> |
| BULK TRUCK                                   |
| # DRIVER                                     |

REMARKS:

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|                     |  |
|---------------------|--|
| HANDLING @          |  |
| MILEAGE @           |  |
| <b>TOT: 4095.50</b> |  |

3000 = 1228.45

CHARGE TO: Source Energy

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**SERVICE**

|  |                |
|--|----------------|
| DEPTH OF JOB <u>322'</u>                 |                |
| PUMP TRUCK CHARGE                        | <u>152.25</u>  |
| EXTRA FOOTAGE <u>50</u> @ <u>4.40</u>    | <u>220.00</u>  |
| MILEAGE <u>50</u> @ <u>7.70</u>          | <u>385.00</u>  |
| MANIFOLD                                 | <u>275.00</u>  |
| Handling <u>205.89</u> @ <u>2.48</u>     | <u>510.60</u>  |
| Dryage miles <u>476.00</u> @ <u>2.75</u> | <u>1297.99</u> |
| <b>TOTA 4200.84</b>                      |                |

3000 = 1260.35

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 done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

**PLUG & FLOAT EQUIPMENT**

|                                |               |
|--------------------------------|---------------|
| 1 Rubber Plug @ <u>131.00</u>  | <u>131.00</u> |
| 1 Guide Shoe @ <u>460.00</u>   | <u>460.00</u> |
| 4 Connectors @ <u>75.00</u>    | <u>300.00</u> |
| 1 Bagels @ <u>320.00</u>       | <u>320.00</u> |
| 1/2 Thread Lock @ <u>85.00</u> | <u>85.00</u>  |
| <b>TOTAL 1396.00</b>           |               |

3000 = 399.87  
**9080.87**

PRINTED NAME \_\_\_\_\_

SIGNATURE Dnlg

SALES TAX (if Any) \_\_\_\_\_

TOTAL CHARGES 9592.34

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

**NET 6714.63**

# ALLIED OIL & GAS SERVICES, LLC 068745

Federal Tax I.D. # 20-8651475

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

SERVICE POINT:  
Great Bend KS

|                         |               |                 |   |            |                                |                              |                              |
|-------------------------|---------------|-----------------|---|------------|--------------------------------|------------------------------|------------------------------|
| DATE <u>01-25-15</u>    | SEC. <u>5</u> | TWP. <u>32</u>  | RANGE <u>01</u>                               | CALLED OUT | ON LOCATION<br><u>12:30 AM</u> | JOB START<br><u>12:00 PM</u> | JOB FINISH<br><u>1:00 PM</u> |
| LEASE <u>Miller</u>     |               | WELL # <u>5</u> | LOCATION <u>Wellington 3 East 1 3/4 North</u> |            | COUNTY<br><u>Sumner</u>        | STATE<br><u>KS</u>           |                              |
| OLD OR NEW (Circle one) |               |                 | <u>East into</u>                              |            |                                |                              |                              |

|   |                      |  |
|---|----------------------|--|
| CONTRACTOR <u>Summit</u>                      |                      | OWNER  |
| TYPE OF JOB <u>Production</u>                 |                      | CEMENT   |
| HOLE SIZE <u>7 7/8</u>                        | T.D. <u>4026.41</u>  | AMOUNT ORDERED <u>325 SXS Class A Allied</u>                   |
| CASING SIZE <u>5 1/2 17 CBS</u>               | DEPTH <u>4025.41</u> | <u>Special Blend - 6" 5/8 salt 5.5% bypassal 2%</u>            |
| TUBING SIZE                                   | DEPTH                | <u>Gal 3% Pt-160 5 1/8 salt seal 1/4" equip - 125 Plo Seal</u> |
| DRILL PIPE                                    | DEPTH                |  |
| TOOL  | DEPTH                |  |
| PRES. MAX                                     | MINIMUM              | COMMON _____ @ _____   |
| MEAS. LINE                                    | SHOE JOINT           | POZMIX _____ @ _____   |
| CEMENT LEFT IN CSG. <u>42.41</u>              |                      | GEL _____ @ _____  |
| PERFS.  |                      | CHLORIDE _____ @ _____   |
| DISPLACEMENT <u>92.40 BBIS Fresh H2O</u>      |                      | ASC _____ @ _____  |
| EQUIPMENT                                     |                      |  |
| PUMP TRUCK CEMENTER <u>Kevin Eddy</u>         |                      | <u>Allied special Blend 325 Sx @ 23.50 7637.50</u>             |
| # <u>577</u> HELPER <u>Josh ISAAC</u>         |                      | <u>Fluid Loss - FL-160 92 Pound @ 18.95 1738.90</u>            |
| BULK TRUCK                                    |                      | <u>Kal seal 1626 Pounds @ 0.99 1593.48</u>                     |
| # <u>609/239</u> DRIVER <u>Kevin Weighous</u> |                      | <u>Powdered Deaermer 46 Pounds @ 3.50 161.00</u>               |
| BULK TRUCK                                    |                      | <u>Plo Seal 40 Pounds @ 2.97 118.80</u>                        |
| # _____ DRIVER                                |                      | <u>Dis-1100 12 BBIS @ 25.00 300.00</u>                         |
|   |                      | <u>Maintenance 11.549.54</u>                                   |
|   |                      | <u>Service 31467.87</u>  |
|   |                      | HANDLING <u>425.32</u> @ <u>2.48</u> <u>1054.79</u>            |
|   |                      | MILEAGE <u>97.56</u> @ <u>2.75</u> <u>2523.30</u>              |

**REMARKS:**

on location / Held safety meeting / Rig up  
Rig Run 4025.41 ft 5 1/2 casing / float Equip.  
Break Circ w/ Rig mud Pump 5 ahead Fresh H2O  
Pump to BBIS Dis-1100. Pump 3 Bellisid. mix 325  
Sx Class A Allied special Blend. Shut Down  
Release Plug. Displace 92.04 BBIS Fresh H2O.  
Card Plug @ PST. Release Plug Acid.  
Rig Down

|                        |                               |
|------------------------|-------------------------------|
| DEPTH OF JOB           |                               |
| PUMP TRUCK CHARGE      | <u>2558.75 2558.75</u>        |
| EXTRA FOOTAGE          | @ _____                       |
| MILEAGE Heavy 50 miles | @ <u>7.70</u> <u>385.00</u>   |
| MANIFOLD               | @ <u>275.00</u> <u>275.00</u> |
| Light Vehicle 50 miles | @ <u>4.40</u> <u>220.00</u>   |
|                        | @ _____                       |

CHARGE TO: Source Energy  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 7.016.84  
Disc 30% 2105.06

THANK YOU!

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 done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

**PLUG & FLOAT EQUIPMENT**

|                             |                 |               |
|-----------------------------|-----------------|---------------|
| <u>1 Guide Shoe</u>         | @ <u>281.00</u> | <u>281.00</u> |
| <u>1 Insert float valve</u> | @ <u>335.00</u> | <u>335.00</u> |
| <u>12 Control R/C's</u>     | @ <u>684.00</u> | <u>684.00</u> |
| <u>1 Rubber Plug</u>        | @ <u>85.00</u>  | <u>85.00</u>  |
|                             | @ _____         |               |

TOTAL 1.385.00  
Disc 30% 415.50

|                     |                    |
|---------------------|--------------------|
| SALES TAX (If Any)  | _____              |
| TOTAL CHARGES       | <u>19,951.42</u>   |
| DISCOUNT <u>30%</u> | <u>5,985.43</u>    |
|                     | IF PAID IN 30 DAYS |

PRINTED NAME Dan Cox Roger Martin

SIGNATURE Dan Cox

13,965.99

**HYDRAULIC FRACTURING FLUID PRODUCT COMPONENT INFORMATION DISCLOSURE**



|                                 |                          |
|---------------------------------|--------------------------|
| Last Fracture Date:             | 2/24/15                  |
| County:                         | Sumner                   |
| API Number (14 Digits):         | 15-191-22769-00-00       |
| Operator Name:                  | Source Energy MidCon LLC |
| Well Name and Number:           | Miller 5-11-24           |
| Latitude:                       | 37.30111                 |
| Longitude:                      | -97.347158               |
| Datum:                          | NAD27                    |
| Production Type:                | OIL                      |
| True Vertical Depth (TVD):      | 3980 PBDT                |
| Total Base Fluid Volume (gal)*: | 579,600                  |

**Hydraulic Fracturing Fluid Composition:**

| Trade Name            | Supplier     | Purpose            | Ingredients                       | Chemical Abstract Service Number (CAS#) | Maximum Ingredient Concentration in Additive (% by mass)** | Maximum Ingredient Concentration in HF Fluid (% by mass)** | Authorized Representative's Name, Address and Phone Number         |
|-----------------------|--------------|--------------------|-----------------------------------|---|--|--|--|
| Water                 | Operator     | Carrier/Base Fluid | Water                             | 7732-18-5                               | 100.00%  | 95.60968%  |  |
| Sand (Proppant)       | Basic Energy | Proppant           | Silica Substrate                  | 1408-60-7                               | 100.00%  | 3.33649%   | Basic Energy Service, PO Box 8613, Pratt, KS 67124, (620) 672-1201 |
| FR-7                  | Basic Energy | friction reducer   | Cationic polymer                  | 7647-14-5                               | 75.00%   | 0.07869%   |  |
| Plexaid 673           | Basic Energy | Scale Inhibitor    | Ethylene Glycol                   | 107-21-1                                | 100.00%  | 0.01215%   |  |
| Oxygen Scavenger      | Basic Energy | Oygen Scavenger    | Ammonium Bisulfate                | 32503-27-8                              | 75.00%   | 0.03037%   |  |
| 580 ME                | Basic Energy | Surfactant         | Ethoxylated alcohol               | 66455-15-0                              | 25.00%   | 0.00607%   |  |
| Claymax               | Basic Energy | Clay Stabilizer    | Choline chloride aqueous solution | 67-48-1                                 | 70.00%   | 0.07065%   |  |
| Bio-7L                | Basic Energy | Biocide            | Glutaraldehyde                    | 7173-51-5                               | 100.00%  | 0.02405%   |  |
| Hydrochloric Acid 15% | Basic Energy | Acidizing          | Hydrochloric Acid                 | 7647-01-0                               | 15.00%   | 0.02099%   |  |
| Rock Salt             | Basic Energy | Diverter           | Sodium Chloride                   | 7647-14-5                               | 100.00%  | 0.54561%   |  |
| Breaker 10L           | Basic Energy | Gel Breaker        | Ammonium Persulfate               | 7727-54-0                               | 100.00%  | 0.00607%   |  |
| ProGel LG 200         | Basic Energy | Gel                | Guar gum                          | 9000-30-0                               | 75.00%   | 0.17654%   |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |
|                       |              |                    |                                   |   |  |  |  |

Ingredients shown above are subject to 29 CRF 1910.1200(i) and appear on Material Safety Data Sheets (MSDS). Ingredients shown below are Non-MSDS.

\*Total Water Volume sources may include fresh water, produced water, and/or recycled water. \*\*Information is based on the maximum potential for concentration and thus the total may be over 100%. Ingredient information for chemicals subject to 29 CFR 1910.1200(i) and Appendix D are obtained from suppliers' Material Safety Data Sheets (MSDS).