

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1253593

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
Recompletion Date

Date Reached TD

Completion Date or
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: _____

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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 <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:					

<div style="text-align: center;"> CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used </div> <div style="text-align: center;">Report all strings set-conductor, surface, intermediate, production, etc.</div>							
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)

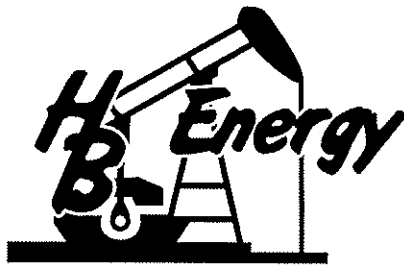
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth
TUBING RECORD: Size: Set At: Packer At:			Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date of First, Resumed Production, SWD or ENHR.		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease</p> <p><i>(If vented, Submit ACO-18.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled</p> <p><i>(Submit ACO-5)</i></p> <p><input type="checkbox"/> Other <i>(Specify)</i> _____</p>	<p>PRODUCTION INTERVAL:</p> <p>_____</p> <p>_____</p>
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Form	ACO1 - Well Completion
Operator	HB Energy LLC
Well Name	HB HB 2
Doc ID	1253593

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	11	7	10	21	Portland	8	50/50 POZ
Production	5.6250	2.8750	8	758	Portland	115	50/50 POZ



Fueling American
Prosperity™

Oil and Gas Well Drilling

3137 Virginia Rd, Wellsville KS 66092

Owners: Clay Hughes

Isaac Burbank

Phone: (785) 979-9493

(913) 963-9127

Fax: (785) 883-2305

Well Log

HB Energy, LLC

HB Well #: HB 2

Sec. 34 Twp. 16 Rng. 21

Franklin County

FSL: 1510 FEL: 1575

API: 15-059-27000

Start: 04/29/15

End: 05/02/15

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>	
7	Soil & Clay	7	
2	Broken Lime	9	
11	Shale	20	
27	Lime	47	
71	Shale	118	
20	Lime	138	
7	Shale	145	
11	Sand	156	Grey, approximately 3 gal/minute fresh water
11	Shale	167	
8	Lime	175	
29	Shale	204	
8	Lime	212	
3	Shale	215	
2	Lime	217	
17	Shale	234	
25	Lime	259	Making some water, oil show
8	Shale	267	
22	Lime	289	
5	Shale	294	
3	Lime	297	
4	Shale	301	
5	Lime	306	Base of the Kansas City / Hertha
22	Shale	328	
1	Sand	329	Hard
4	Sand	333	Grey, making some gas
116	Shale	449	
6	Lime	455	
4	Shale	459	
6	Lime	465	
3	Shale	468	
6	Lime	474	
37	Shale	511	

HB Lease #HB 2

5	Lime	516	
4	Broken Sand	520	Brown sand & limey sand, good bleed
2	Broken Sand	522	20% brown sand, 80% shale, light bleed
10	Shale	532	
3	Lime	535	Brown, no oil
6	Shale	541	
3	Lime	544	
9	Shale	553	
1	Lime	554	
8	Shale	562	
3	Lime	565	
3	Shale	568	Black
1	Lime	569	Brown, some porosity, good bleed
3	Lime	572	Sandy brown lime, very soft, very good bleed
2	Lime	574	Brown, light show, hard
7	Shale	581 CP	
2	Broken Sand	583	90% light brown sand, 10% shale, no oil
4.5	Sand	587.5	Light brown, no oil
.5	Lime	588	
2.5	Sand	590.5	Light brown, no oil
7	Broken Sand	597.5	25% brown sand, 75% shale, gassy, fair oil show
6	Silty Shale	604	
2	Broken Sand	606	Brown sand & shale, no oil
21	Shale	627	
1	Lime & Shells	628	
11	Shale	639	
2	Lime & Shells	641	
1	Shale	642	
3	Silty Shale	645	
7	Shale	652 CP	
1	Broken Sand	653	75% brown sand, 25% shale, light bleed
5.5	Shale	658.5	
.5	Broken Sand	659	20% brown sand, 80% shale, light bleed
53	Shale	712	
3	Sandy Shale	715	No oil
1	Sand	716	Brown, no oil
10	Shale	726	
7	Sand	733	Brown, no oil
25	Shale	758	
		TD	

Drilled an 11" hole to 21'
Drilled a 5 5/8" hole to 758'

04/29/15 set 21' of 7" surface casing, cemented with 8 sacks of cement.

04/30/15 Cored 1st Squirrel zone.

04/30/15 Cored 2nd/3rd Squirrel zones.

05/01/15 The open hole below permanent casing (657'-758') was filled with cement by Consolidated Oil Well Services, prior to cementing permanent casing.

05/01/15 set 657' of 2 7/8" 8 round upset tubing including 3 centralizers, 1 clamp, 1 float-shoe, and baffle.
Baffle set at 627'



PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

TICKET NUMBER 50955
LOCATION Oklawaha, KS
FOREMAN Casey Kennedy

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/11/15	3645	H2 #4B-2	SE34	16	21	FR
CUSTOMER						
AB Energy						
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
3131 Virginia Rd			467	Kei Car	✓ Safety	Meeting
			259	Gascon	✓	
CITY			570	Gar Moo	✓	
STATE						
ZIP CODE						
Weldonville						
KS						
66606						

JOB TYPE <u>long string</u>	HOLE SIZE <u>5 5/8"</u>	HOLE DEPTH <u>758'</u>	CASING SIZE & WEIGHT <u>2 7/8" EUE</u>
CASING DEPTH <u>657'</u>	DRILL PIPE <u>6027'</u>	TUBING <u>plug back to</u>	OTHER <u>657'</u>
SLURRY WEIGHT	SLURRY VOL.	WATER gal/sk	CEMENT LEFT in CASING <u>30'</u>
DISPLACEMENT <u>3.63 LL/s</u>	DISPLACEMENT PSI	MIX PSI	RATE <u>4 bpm</u>

REMARKS: hold solid, ingetting, established circulation, mixed & pumped 150 lbs
5% Premix cement w/ 2% gel & 1/4 # Floerol per stc to plug back open
hole to 657', pulled drill deep from well, landed casing on clamp,
mixed & pumped 200 # gel followed by 5 bbls fresh water, mixed &
pumped 100 stc cement, cement to surface, flushed pump down, pumped
2 1/2" collar plug to bottom w/ 3.63 bbls fresh water, pressured to 500
PSI, released pressure. Shut in casing.

Customer supplied H₂O

[illegible]

Rev'd 3/28/77

AUTHORIZTION

TITLE

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.