

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Confidentiality Requested:  
 Yes  No

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
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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: \_\_\_\_\_

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  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: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <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: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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Form	ACO1 - Well Completion
Operator	Fastrak Energy, LLC
Well Name	Compton 2
Doc ID	1255985

All Electric Logs Run

Composite
Borehole Volume
Phased Induction
Compensated Neutron



## Summary of Changes

Lease Name and Number: Compton 2

API/Permit #: 15-099-24694-00-00

Doc ID: 1255985

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	05/19/2015	07/08/2015
CasingAdd_Type_PctP DF_2	6% OWC	2% CaCl, 2% gel
CasingPurposeOfString PDF_2	Intermediate	Production
CasingTypeOfCementP DF_2	OWC	6% OWC
Disposition Of Gas - Sold	No	Yes
Disposition Of Gas - Used on lease	No	Yes
Method Of Completion - Perf	No	Yes
Perf_Depth_1		1146-1152
Perf_Record_1		24 shots 1146-1152
Perf_Shots_1		4

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Producing Formation	Arbuckle	Mississippi
Save Link	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 43437	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 55985
Tubing Record - Set At		1163
Tubing Size		2.375
Well Type	SWD	GAS

Company # 27654  
 FASTRACK ENERGY LLC  
 Cherryvale, KS

B. T. Lorenz  
 KCC# 33286  
 620-330-8443

508 21500 RD  
 Cherryvale, KS  
 67335

Lease: Compton                      API: 015-099-24694                      spud date 1/30/2015                      15  
 Well #                      2                      GPS: long                      SURF Bit: 12.25"  
 County: LB                      lat                      set depth 20'  
 Well TD: 1147                      SURF Dia. 8.685"  
 Hole Dia: 6.75"                      sacks                      5

Depth:	Material:	Formation:	Depth:	Mat:	Form:
0	11 dirt		568	620 sand	
11	16 lime		620	673 shale	
16	32 shale		673	676 lime	
32	37 lime		676	729 shale	
37	71 shale		729	731 sand	
71	74 lime		731	754 shale	
74	105 shale		754	755 coal	
105	138 lime		755	765 shale	
138	140 blk shale		765	775 lime	miss
140	178 sandy shale		775	1090 lime	
178	195 lime		1090	1094 gr shale	
195	211 sand	oil show	1094	1100 lime	
211	220 sandy shale		1100	1106 shale	
220	249 lime	Oswego	1106	1111 lime	
249	253 blk shale		1111	1127 bl shale	
253	271 lime		1127	1167 lime	arbucle
271	274 blk shale				
274	282 lime				
282	331 shale				
331	361 sandy shale				
361	375 shale				
375	377 lime				
377	383 shale				
383	384 coal				
384	396 sandy shale				
396	397 coal				
397	404 shale				
404	405 coal				
405	407 lime				
407	421 shale				
421	422 coal				
422	488 sand/oil				
488	508 sandy shale				
508	509 coal				
509	515 sandy shale				
515	528 sand	odor			
528	533 sandy shale				
533	568 sand	sl odor			

3/12/2015

C-2



CEMENT FIELD TICKET AND TREATMENT REPORT

Invoice # 003653

52200001084

JM 2359

FT 2294

Customer	Fastrack Energy LLC	State, County	Labette, Kansas	Cement Type	CLASS A
Job Type	Loss Slick	Section	28	Excess (%)	30%
Customer Acct #	9999	TWP	33S	Density	14
Well No.	Compton #2	RGE	19E	Water Required	7.8
Mailing Address		Formation		Yield	1.74
City & State		Tubing		Sacks of Cement	120
Zip Code		Drill Pipe		Slurry Volume	37.1
Contact		Casing Size	4 1/2	Displacement	18.3
Email		Hole Size	6 3/4	Displacement PSI	300
Cell	15-099-24694-000 AP#	Casing Depth	1156	MDX PSI	200
Dispatch Location	BARTLESVILLE	Hole Depth	1171	Rate	4
Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
5401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,085.00	\$ 1,085.00
5402	FOOTAGE	1183	PER FOOT	\$0.23	\$ 267.49
5408	EQUIPMENT MILEAGE (ONE-WAY)	62	PER MILE	\$4.20	\$ 260.40
5407	MIN. BULK DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$388.00	\$ 388.00
5621	4 1/2 INCH PLUG CONTAINER	1	PER UNIT	\$215.00	\$ 215.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
				<b>EQUIPMENT TOTAL</b>	<b>\$ 2,198.89</b>
<b>Cement, Chemicals and Water</b>					
1126	WC. CEMENT (GAL SEAL) (NOVC, 2% CAL. CHLORIDE 2% GE	120	0	\$19.76	\$ 2,370.00
1107A	PHENOSPAL	80	0	\$1.35	\$ 108.00
1110A	MOL SEAL (60 # BK)	700	0	\$0.46	\$ 322.00
1111	GRANULATED SALT (50#) SELL BY #	800	0	\$0.39	\$ 312.00
1111A	METASILICATE (GILLETTE BARTLESVILLE) (50#)	50	0	\$2.10	\$ 105.00
1118B	PREMIUM GEL/BENTONITE (50#)	200	0	\$0.22	\$ 44.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
1123	CITY WATER (PER 1000 GAL)	5400	Per Gal	\$0.02	\$ 93.42
				<b>Chemical Total</b>	<b>\$ 3,354.42</b>
<b>Cement Water Transports</b>					
5601C	WATER TRANSPORT (CEMENT)	4	TER TRANSPORT (CEME	\$120.00	\$ 480.00
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
				<b>Transports Total</b>	<b>\$ 480.00</b>
<b>Cement Floating Equipment (TAXABLE)</b>					
<b>Cement Basket</b>					
0		0		\$0.00	\$ -
<b>Centralizer</b>					
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
<b>Float Shoe</b>					
0		0		\$0.00	\$ -
<b>Float Collars</b>					
0		0		\$0.00	\$ -
<b>Guide Shoes</b>					
0		0		\$0.00	\$ -
<b>Baffle and Flapper Plates</b>					
0		0		\$0.00	\$ -
<b>Packer Shoes</b>					
0		0		\$0.00	\$ -
<b>DV Tools</b>					
0		0		\$0.00	\$ -
<b>Ball Valves, Swedges, Clamps, Misc.</b>					
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
0		0		\$0.00	\$ -
<b>Plugs and Ball Sealers</b>					
4404	4 1/2" RUBBER PLUG	1	PER UNIT	\$47.25	\$ 47.25
0		0		\$0.00	\$ -
				<b>CEMENT FLOATING EQUIPMENT TOTAL</b>	<b>\$ 47.25</b>
				<b>SUB TOTAL</b>	<b>\$ 5,077.56</b>
				<b>SALES TAX</b>	<b>\$ 257.72</b>
				<b>TOTAL</b>	<b>\$ 5,335.28</b>
<b>TRUCK #</b>		<b>DRIVER NAME</b>			
866		John Wade			
398		Cody Law, Bryan			
551		Scott Cox			
534784		Justin			

361

PAID OK #1317

AUTHORIZATION

DATE

3/12/15

TITLE

FOREMAN

[Signature]

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.







Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1243437  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
August 2013

Form must be Typed  
Form must be Signed  
All blanks must be Filled

**CONFIDENTIAL** 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
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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.

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- Confidentiality Requested  
Date: \_\_\_\_\_
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- Wireline Log Received
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