Confidentiality Requested:

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1257013

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		
Address 2:			I	Feet from North / South Line of Section	
City: Sta	ate: Zip	D:+	I	Feet from East / West Line of Section	
Contact Person:			Footages Calculated from	n Nearest Outside Section Corner:	
Phone: ()				W 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: Well #:		
	E we de une e		Field Name:		
New Well	Entry	Workover	Producing Formation:		
Oil WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing:	
Gas D&A		SIGW	Total Vertical Depth: Plug Back Total Depth:		
OG	GSW	Temp. Abd.		Set and Cemented at: Feet	
CM (Coal Bed Methane)					
Cathodic Other (Core,	Expl., etc.):			g Collar Used? Yes No	
If Workover/Re-entry: Old Well Info	o 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 To	tal Depth:			
Deepening Re-perf.	Conv. to EN	IHR Conv. to SWD	Drilling Fluid Managem	ent Plan	
Plug Back	Conv. to GS	SW Conv. to Producer	(Data must be collected from	the Reserve Pit)	
	Demail "		Chloride content:	ppm Fluid volume:bbls	
Commingled			Dewatering method used	:	
Dual Completion Permit #: SWD Permit #:					
	Permit #: Permit #:		Location of fluid disposal if hauled offsite:		
GSW Permit #:		Operator Name:			
			Lease Name:	License #:	
Spud Date or Date Read	ched 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:					

1257013

Operator Name:	Lease Name:	_ Well #:	
Sec TwpS. 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		Yes No	L	og Formatio	on (Top), Depth an	d Datum	Sample
Samples Sent to Geo	,	Yes No	Nam	Э		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 / SQL	EEZE RECORD			
Purpose: Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Pe	ercent Additives	
Protect Casing Plug Back TD Plug Off Zone							
Did you perform a hydrau	0	on this well? Iraulic fracturing treatment ex	ceed 350 000 gallons'	Yes		o questions 2 an o question 3)	d 3)
		n submitted to the chemical of		Yes		out Page Three o	of the ACO-1)
Shots Per Foot		ON RECORD - Bridge Plug Footage of Each Interval Perf			cture, Shot, Cement		d Depth

	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth		
TUBING RECORD:	Siz	ze:	Set At:	: Pack	ker At:	Liner F		No	
Date of First, Resumed	Product	ion, SWD or ENHF	٦.	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 COMPLET		ETION:		PRODUCTION INTER	VAL:	
Vented Sold	<u> </u>	Jsed on Lease		Open Hole Perf.		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: Stainbrook 4-14 API/Permit #: 15-107-24959-00-00

Doc ID: 1257013

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value	
Approved By	Deanna Garrison	NAOMI JAMES	
Approved Date	07/03/2014	07/07/2015	
Date of First or Resumed Production or		7/7/2015	
SWD or Enhr Electric Log Run?	No	Yes	
Elogs_PDF		Gamma Ray-Neutron-	
Method Of Completion - Perf	No	CCL Yes	
Perf_Material_1		Acid 250 gal 7.5% HCL	
Perf_Material_2		Acid 250 gal 7.5% HCL	
Perf_Material_3		Acid 250 gal 7.5% HCL	
Perf_Record_1		279-286	

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Perf_Record_2		286.5-296.5
Perf_Record_3		297-307
Perf_Shots_1		3
Perf_Shots_2		3
Perf_Shots_3		3
Producing Method Pumping	No	Yes
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 13020	//kcc/detail/operatorE ditDetail.cfm?docID=12 57013