



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1263832
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 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: _____



1263832

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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McGOWN

DRILLING, INC.

Operator:

Iantha Resources, LLC
Garnett, KS

Poss #35

Anderson Co., KS
11-20S-20E
API: 003-26424

Spud Date:	8/10/2015	Surface Bit:	11.0"
Surface Casing:	7.0"	Drill Bit:	5.875"
Surface Length:	22.8'	Longstring:	713.35'
Surface Cement:	6 sx	Longstring Date:	8/11/2015
Longstring:	2 7/8 EUE Used		

Driller's Log

Top	Bottom	Formation	Comments
0	3	Soil	
3	9	Clay	
9	12	Gravel	
12	66	Shale	
66	94	Lime	
94	113	Shale	
113	118	Lime	
118	165	Shale	
165	175	Lime	
175	184	Shale	
184	218	Lime	
218	225	Shale	
225	250	Lime	
250	252	Shale	
252	257	Lime	
257	260	Shale	
260	270	Lime	
270	273	Shale	
273	274	Lime	
274	297	Shale	
297	300	Sandy Shale	
300	308	Shale	
308	312	Sand	Good odor, slight bleed to pit
312	348	Sandy Shale	

Poss #35
Anderson Co., KS

348	402	Shale	
402	411	Sand	Laminated, most shale, fair odor
411	416	Sandy Shale	
416	439	Shale	
439	441	Lime	
441	447	Shale	
447	450	Lime	
450	454	Shale	
454	464	Lime	
464	470	Shale	
470	477	Sand	
477	490	Sandy Shale	
490	504	Sand	
504	508	Shale	
508	510	Coal	
510	512	Lime	
512	515	Shale	
515	524	Lime	
524	557	Shale	
557	570	Lime	
570	600	Shale	
600	606	Lime	
606	609	Bl. Shale	
609	625	Shale	
625	627	Coal	
627	640	Shale	
640	683	Sand	Good oil show, see below
683	690	Shale	
690	722	Sandy Shale	Faint odor, no bleed to pit
722		TD	

Coring

Run	Footage	Rec.
1		
2		

Sand Detail

640-649	Light brown sand, no odor, no bleed
649-650	Good sand, brown, good odor, good bleed
650-656	Good odor, lighter visible bleed in samples
656-662	Better sand, stronger odor than above
662-666	Good sand, odor is weaker
666-678	Good sand quality, good show to the pit, strong odor
678-682	Odor weakening and no odor by 682



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer:	lantha resources llc				Customer Name:				Ticket No.:	50037	
Address:					AFE No.:				Date:	8/11/2015	
City, State, Zip:					Job type:	Long string New well					
Service District:					Well Details:	5 5/8 hole 722' TD Tubing 2 7/8 713.35'					
Well name & No.:	Posa #35				Well Location:	County:		Anderson	State:		Ks.
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED				AM	TIME
230	Jeff G	25	Dwayne			ARRIVED AT JOB				PM	4pm
241	Troy					START OPERATION				AM	4:15pm
						FINISH OPERATION				AM	5:pm
148-150	Jesse					RELEASED				AM	
						MILES FROM STATION TO WELL					5
Job Summary											
Hook onto well and pump to establish circulation then pump 5 bbl gel flush followed by 15 bbl water spacer and start cement. Pump 107 sacks of cement stop to flush pump then pump a double wiper plugs to bottom and set float shoe and shut in well. (note: customer supplied wiper plugs) (Remaining 2500 gal. of water was put into drill pit tank for next well) (3 bbl of cement return to surface)											
Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	Net Amount				
p01604	50/50 Pozmix Cement	sack	107.00	\$11.30	\$1,209.10	16.00%	\$1,027.74				
p02000	H2O	gal	6,000.00	\$0.01	\$78.00	15.00%	\$66.30				
p01607	Bentonite Gel	lb	284.00	\$0.30	\$85.20	15.00%	\$72.42				
						15.00%					
p01611	FLO-Seal	lb	26.75	\$2.15	\$57.51	15.00%	\$48.89				
c24001	Cement Bulk Truck - Minimum	ea	1.00	\$300.00	\$300.00	66.00%	\$102.00				
						15.00%					
c15000	Transports 150 bbl	ea	1.25	\$105.00	\$131.25	15.00%	\$111.56				
c23100	Cement Pump	ea	1.00	\$950.00	\$950.00	35.00%	\$617.50				
<p>TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total Invoice due on or before the 30th day from the date of Invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full Invoice price without discount will become immediately due and owing and subject to collection.</p>											
						Gross:	\$ 2,811.06	Net:	\$ 2,046.40		
						Total Taxable	\$ -	Tax Rate:	7.400%		
						Free and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.		Sale Tax:	\$ -		
								Total:	\$ 2,046.40		
						Date of Service:	8/11/2015				
						HSI Representative:	Dwayne				
						Customer Representative:	Tom Miller				
						<p>X _____ CUSTOMER AUTHORIZED AGENT</p>					
Customer Comments or Concerns:											

Hurricane Services appreciates any Comments, Concerns or Criticisms from our valuable customers as Safety and Customer Satisfaction are our Number 1 goal. All Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.



MIDWEST SURVEYS
 LOGGING - PERFORATING - CONSULTING SERVICES
 P.O. Box 68, Osawatomie, KS 66064
 913 / 755 - 2128

GAMMA RAY / NEUTRON / CCL

File No. Company lantha Resources, LLC
 Well Poss No. - 35
 Field Garnett Shoestring
 County Anderson State Kansas

Location 4785' FSL & 4785' FEL
 SE-NW/NE-NW

Sec. 11 Twp. 20s Rge. 20e
 Permanent Datum GL Elevation 966'
 Log Measured From GL
 Drilling Measured From GL

Date 08-14-2015
 Run Number One
 Depth Diller 722.0
 Depth Logger 707.0
 Bottom Logged Interval 706.0
 Top Log Interval 20.0
 Fluid Level Full

RUN	BIT	FROM	TO	SIZE	WGT.	FROM	TO
One	11.00"	0.0	22.8	7.00"	17.0 #	0.0	22.80
Two	5.875"	22.8	722.0	2.875"	6.5 #	0.0	713.35

Type Fluid Water
 Density / Viscosity NA
 Salinity - PPM Cl NA
 Max Recorded Temp NA
 Estimated Cement Top 0.0
 Equipment No. 104
 Location Osawatomie
 Recorded By Steve Windisch
 Witnessed By David Lybarger

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All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

Drilling Contractor :
 McGown Drilling, Inc.

Database File: poss 35.db
 Dataset Pathname: pass1
 Presentation Format: gr-n-ccl
 Dataset Creation: Fri Aug 14 09:23:28 2015 by Log SCH 111116
 Charted by: Depth in Feet scaled 1:240

