

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1264197

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	Twp S. R	East _ West		
Address 2:			Fe	eet from	South Line of Section		
City:	State: Z	ip:+	Fe	eet from East / V	West Line of Section		
Contact Person:			Footages Calculated from Nearest Outside Section Corner:				
Phone: ()							
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-Entry	Workover	Field Name:				
	_		Producing Formation:				
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground: Kelly Bushing:				
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total De	epth:		
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet		
☐ Cathodic ☐ Other (Co	ore, Expl., etc.):		Multiple Stage Cementing (Collar Used? Yes	No		
If Workover/Re-entry: Old Well I			If yes, show depth set:		Feet		
Operator:			If Alternate II completion, ce	ement circulated from:			
Well Name:			feet depth to:	w/	sx cmt.		
Original Comp. Date:							
Deepening Re-perf	•	ENHR Conv. to SWD	Drilling Fluid Managemen	nt Dian			
☐ Plug Back	Conv. to G		(Data must be collected from the				
Commingled	Pormit #:		Chloride content:	ppm Fluid volume:	bbls		
Dual Completion			Dewatering method used:_				
SWD			Location of fluid disposal if	hauled offsite:			
☐ ENHR							
GSW Permit #:			Operator Name:				
_ _			Lease Name:	License #:			
Spud Date or Date R	eached 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 Approved by: Date:						

Page Two



Operator Name:				_ Lease I	Name: _			Well #:	
Sec Twp	S. R	East	West	County	:				
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whe	ther shut-in pre chart(s). Attach	ssure reac extra shee	hed stati	c level, hydrosta space is neede	tic pressures, b	ottom hole temp	erature, fluid recov
Final Radioactivity Lo files must be submitted						ogs must be ema	liled to kcc-well-	logs@kcc.ks.go	v. Digital electronic
Drill Stem Tests Taker (Attach Additional		Y	es No			J	on (Top), Depth		Sample
Samples Sent to Geo	logical Survey	Y	es No		Nam	е		Тор	Datum
Cores Taken Electric Log Run			es No						
List All E. Logs Run:									
				RECORD	Ne				
	0: 11.1					ermediate, product		" 0 1	T 15
Purpose of String	Size Hole Drilled		ze Casing t (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Percer Additives
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD			
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used	Type and Percent Additives			
Perforate Protect Casing	Top Dottern								
Plug Back TD Plug Off Zone									
1 lug 0 li 20 lio									
Did you perform a hydrau	ulic fracturing treatment	on this well	?			Yes	No (If No, s	skip questions 2 a	nd 3)
Does the volume of the t			-		-		_ ` `	skip question 3)	
Was the hydraulic fractur	ing treatment informatio	n submitted	to the chemical of	disclosure re	gistry?	Yes	No (If No, 1	ill out Page Three	of the ACO-1)
				cture, Shot, Ceme	nt Squeeze Recor	rd Depth			
Specify Footage of Each mervan Chorace (Amount and Nind of Material Osed)					200				
TUBING RECORD:	Size:	Set At:		Packer A	t·	Liner Run:			
		0017111				[Yes N	o	
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth	nod:	g 🗌	Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gravity
DIODOCITI	01.05.040			4ETUOD 05	. 00145/	TION:		DDOD! ICT!	
DISPOSITION Solo	ON OF GAS: Used on Lease		N Open Hole	∥ETHOD OF Perf.	_		nmingled	PRODUCTION	ON INTERVAL:
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)		



FIELD ORDER Nº C43093

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225

		316-524-1225	DATEJUL	110	20 15
	0 - 0		DAIL	7	20_10
IS AUTHORIZED BY:	Bear te	(NAME OF CUSTOMER)			
Address		City		State	
To Treat Well As Follows: Lease	ele	Well No	Custo	mer Order No	
Sec. Twp. Range		County Kingar	nen-	State 🕹	·
CONDITIONS: As a part of the ot to be held liable for any described, and no representation reatment is payable. There we ur invoicing department in ac	e consideration hereof it is amage that may accrue in as have been relied on, as ill be no discount allowed s cordance with latest publis	agreed that Copeland Acid Service is to connection with said service or treatme to what may be the results or effect of the subsequent to such date. 6% interest wi	service or treat at owners nt. Copeland Acid Servic ne servicing or treating sa Il be charged after 60 day	s risk, the hereinbefore e has made no repres aid well. The consider	entation, expressed ation of said service
HIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCE			Ву		
	T	Well Owner or Operator		Agent	
CODE QUANTITY	,	DESCRIPTION		UNIT	AMOUNT
\	Pump dry	1 for soverse is	de		950 00
50 sa	& Clars A C	on coment @ 12	Tack		637 50
5100	La lugu m	ley 8 400/ mile			204 50
	3				
			- 1980		
570	Bully Channel V)a >			1 300
11985		hin ghy			150
111	Bulk Truck Miles	Min Chyl			130-
	Process Lie	cense Fee on/	Gallons	_	
			TOTAL BILLING	G	
I certify that the above manner under the dir Copeland Representation	ection, supervision ar	accepted and used; that the about control of the owner, operator	ve service was perfor or his agent, whose	ormed in a good a e signature appea	nd workmanlike rs below.
A					
Station Bure	TON		Well Owner, Or	perator or Agent	



TREATME

				TREATMEN	T REPORT		
Acid &	Ceme	nt 🕮					Acid Stage No
		150			Type Treatment: Amt.	Type Fluid	Sand Size Pounds of Sand
1 plaken	IL SOM	DIMPICE BUR	eta P.	O. No	BkdownBbl.		
Company	Begg	K+			1		
Well Name & 2	vo Del	1 m					
		1			1		
County K	min		State 5				
	0						ft. No. ft
Cusing: Size	52	Type & Wt		Set atft.	(rom	ft. to	ft. No. ft
Formation:			Perf	to	from	ft. to	ft. No. ft
Formation:			Perf	to	Autual Volume of Oil /Wate	was lood Holes Vo	Bbl./Gul.
Formation:			Perf	to			
Liner: Sixe	Type & W	/t	Top atf	t. Bottom atft.	Pump Trucks. No. Used: St.	4323 sp	Twin
Ceme	ented: Yes/No	. Perforated fro	om	ft. toft.	Auxiliary Equipment		
Tubing: Size &	Wt		Swung at	t.	10000		Set at
Perf	orated from		ft. to	<u>(t.</u>	Auxiliary Tools	£ - \	C
					Plugging or Scaling Materia		
Onen Hole Size		T.D		B. toft.			Gals
					m	R	
Company R		sures		1	Treater /		
TIME a.m/p.m.	Tubing	Casing	Total Fluid Pumped		(RE	MARKS	
-				5 1 0	30 0	Steet movin	2021/12
900		 		UN ROC 1	Boom Jin	Stept moving	mud to pits
08: 6		 	0	To Make	4 Stret SUY	38h Feash 1	Weter
9:32		404	Y BB)	Certal Dogar	3 RPm 2	(D)	Ma 180
938		300	2-221	Brown C.	. HRAME ?	300	
12:10		280	SO-RRI	4 BAM @ 30	10# Ston 1011	no Shutton	860
:			0	Send Tank	tende Attend	more worter.	
10:10		SEO	0	Stree min	rundo 2500 is	hala 518 Sach	Sluce 4 RPB 28
:			1881	Breen De	colo		4
:			BBBL	50 sady	can quen we	sh up goin o	lown hale
:		260	0	Stept Fly	Sh 4 BAM 96	150=100	
:		30.0	6088	4BPm C	300	Α	
		12m2/02	100.001	Lin an Oak	7/ 0/1 0/-	1 120100 12	11/120

Tubing: Size	& Wt		Swung at	ft. Packer: Set at ft.					
Pe	rforated from		ft. to						
				Plugging or Sealing Materials: Type Deck Corn					
Own Hole 8	lxe	T.D.	ft. P.	B. to					
Company	Representati	ve		Treater As &					
TIME		SURES	Total Fluid	REMARKS					
a.m /p.m.	Tubing	Casing	Pumped	•					
900				ON LOC CSA Ris no Stept moving mud in Dits					
:				to make from I'm					
08: 6			0	The on 52 Start 80BBh Frosh Wester					
9:32		404	1/2 BB)	Certal Doeasur- 3 BPM 45D					
938		300	8-BB1	Brouch Case 43Pm 300					
JE: P		250	SORRI	4 BAM @ 300# Stop Dung Shut in 860"					
:			0	Send Tank teuch Ather More warter.					
10:10		DEO	0	Stopp mixy going down hale 518 sade Shang 4 8PB 2					
:			1881	Prent need					
:			13BB	50 such can given wash up going down take					
:		200	0	Stept Flys 4 BHO 250=1					
:		30.0	60 BB	4BA2 @ 300					
:		375/30	67 BB)	43 Am @ 355 Job in shu+ down 1517 300					
10:35		. /		Washing Kack up Let loc					
:									
:									
:									
:									
<u>:</u>		-							
	-								
:-	-								
		-							
<u>:</u> _	-	-							
:		-							
:									
<u>:</u>		1							
<u>:</u>									
- :		 							
:									
.									
:									
:									
When the second second	Assembly to the second		The state of the s						