Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1263306

Form ACO-1 November 2016 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.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD □ Gas □ DH □ EOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info 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 Total Depth:	
Deepening Re-perf. Conv. to EOR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of huid disposal if hauled offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached 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 Drill Stem Tests Received
Geologist Report / Mud Logs Received
UIC Distribution
ALT I II III Approved by: Date:

	Page Two	1263306
Operator Name:	Lease Name:	Well #:
Sec TwpS. R □ East □ West	County:	
INSTRUCTIONS: Show important tops of formations panetrated	Detail all cores Benort all final	conies of drill stems tests giving interval tested, time tool

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 Yes No (Attach Additional Sheets)				L	og Formatio	on (Top), Dep	oth and Datum	Sample	
Samples Sent to	Geological Su	rvey	Yes No		Nam	e		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / List All E. Logs F	/ Mud Logs		Yes No Yes No Yes No Yes No						
			CASIN	G RECORD	Ne	w Used			
			Report all strings se	et-conductor, su	rface, inte	ermediate, product	ion, etc.		
Purpose of St		ze Hole Drilled	Size Casing Set (In O.D.)	Weig Lbs. /		Setting Depth	Type of Cemen		Type and Percent Additives
	I	I	ADDITION	AL CEMENTIN	IG / SQL	JEEZE RECORD	1		1
Purpose:		Depth Bottom	Type of Cement # Sacks		Used Type and Percent Additives				
Protect Ca	то								
	e of the total base	e fluid of the hydra	n this well? aulic fracturing treatm submitted to the cher		-		No (If N	lo, skip questions 2 ar lo, skip question 3) lo, fill out Page Three	
Date of first Produ Injection:	ction/Injection or	Resumed Produc	tion/ Producing M	ethod:	9	Gas Lift 🗌	Other <i>(Explain)</i>		
Estimated Produc Per 24 Hours	tion	Oil Bbls.	. Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio	Gravity
DISPO	OSITION OF GAS	6:		METHOD OF	COMPLE	TION:		PRODUCTIO	ON INTERVAL:
Vented	Sold Use	ed on Lease	Open Hole	Perf.	Dually Comp. Commingled		Тор	Bottom	
(If vented, Submit ACO-18.)					(Submit	ACO-5) (Sub	omit ACO-4)		
			Bridge Plu Set At	g	Acid		t, Cementing Squeeze d Kind of Material Used)		

Packer At:

TUBING RECORD:

Size:

Set At:



1263306

HYDRAULIC FRACTURING FLUID PRODUCT COMPONENT INFORMATION DISCLOSURE

Last Fracture Date:	County:		API Number:
Operator Name:		Well Name and Number:	
Latitude:	_ Longitude:		Datum:
Production Type:	_ True Vertical Depth (TVD):		Total Base Fluid Volume (gal)*:

Hydraulic Fracturing Fluid Composition:

Trade Name	Supplier	Purpose	Ingredients	Chemical Abstract Service Number (CAS #)	Maximum Ingredient Concentration in Additive (% by mass)**	Maximum Ingredient Concentration in HF Fluid (% by mass)**	Authorized Representative's Name, Address, and Phone Number

Ingredients shown above are subject to 29 CRF 1910.1200(i) and appear on Material Safety Data Sheets (MSDS). Ingredients shown below are Non-MSDS.

* Total Water Vol	* Total Water Volume sources may include fresh water, produced water, and/or recycled water. ** Information is based on the maximum potential for concentration and thus the total may be over 100%.								

Ingredient information for chemicals subject to 29 CFR 1910.1200(i) and Appendix D are obtained from suppliers Material Safety Data Sheets (MSDS).

Form	ACO1 - Well Completion
Operator	Fossil Energy, LLC
Well Name	Ropa Unit #1
Doc ID	1263306

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Type and Percent Additives
Surface	12.25	8.625	23	370	Common	2%gel,3% cc

Phone 785-483-2025	Н	ome Office	P.O. Box	32 Russ	sell, KS 67665	No.	101	6 blos		
Cell 785-324-1041	Twp.	Range	Co	unty	State	On Location	F	Finish		
Date 7-28-15 4	16	10	CINCO BOL M	worth	KS	const finemed stud of	8:4	5 PM		
$\frac{\text{Date } (20)}{(20)}$	110			Wilson	Sto NR	d E to 4th	Red	YUN		
R A L	ereby is o	Well No. #1	2 21 JUAN 648 64	Aord by Dino	<u> </u>			Win		
Lease Ropa Unit Contractor Royal #1	to notes	Well No. 🛱 (ou are hereb	well Cementing, Inc.	cementing equipment	and fu	rnish		
Type Job Surface		1000 A. 1911 (2010) (201)			helper to assist own	ner or contractor to do	work a	as listed.		
Hole Size 1214	T.D.	370'		harge Fos	sil Energy	Y FEES: In any legal	anao	ITA-		
Csg. 8 5/4	Depth	370'	S	street	Obhtract, the preva	ic to the term of this	hidughð Emire re	o yaw waa		
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Tool	Depth	the ed tiede V	T	he above was	done to satisfaction a	nd supervision of owner	agent o	r contractor.		
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Mouse Hole		and an	ĸ	Kol-Seal						
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Baskets	e damage	esiver bes. o	C	CFL-117 or C	D110 CAF 38	collution, surface of) High Hi	IAE TIERWO O (EI)		
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