



1263977

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Geologist Report / Mud Logs	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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)*

Date of first Production/Injection or Resumed Production/Injection:	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

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>			PRODUCTION INTERVAL: Top _____ Bottom _____	

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:
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BH Drilling, L.L.C.  
11551 Ash Street, Suite # 205  
Leawood, Kansas 66211  
Office (913) 499-8373  
Fax (913) 766-1310

August 25, 2015

Company: Haas Petroleum, LLC  
11551 Ash Street, # 205  
Leawood, Kansas 66211

Lease: East Lidikay – Well # 45 I HP  
County: Franklin  
Spot: E2 SW SE SE of Sec 4, Twp 16, R 21 E  
API: 15-059-26960-00-00  
Spud: August 11, 2015  
TD: 760'

8/11/15: Set 20' of 7" – Cemented with 5 sacks  
8/14/15: Drilled from 20' to 760' TD. Ran 751' of 2 7/8 casing  
8/14/15: Cemented with 106 sacks



**CONSOLIDATED**  
Oil Well Services, LLC

3957  
3876

TICKET NUMBER 49762  
LOCATION Ottawa, KS  
FOREMAN Cassy Kennedy

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

Invoice # **805438**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/14/15	3451	East Lidikay #451-HP	SE 4	16	21	FR

CUSTOMER  
Haas Petroleum

MAILING ADDRESS  
11551 Ash St Suite 205

CITY Leawood STATE KS ZIP CODE 66201

TRUCK #	DRIVER	TRUCK #	DRIVER
729	Caskan	Safety	Meeting
467	Kei Car		
558	Trotter		
675	Kei Det		

JOB TYPE long string HOLE SIZE 5 5/8" HOLE DEPTH 700' CASING SIZE & WEIGHT 2 7/8" EUE

CASING DEPTH 751' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_

SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_

DISPLACEMENT 4.35 bbls DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE 4 bpm

REMARKS: held safety, inactive, established circulation, mixed & pumped 200# Gel followed by 5 bbls fresh water, mixed & pumped 106 sks Pozblend IA w/ 2% gel per sk, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to casing TD w/ 4.35 bbls fresh water, pressured to 800 PSI, well held pressure for 30 min MTT, released pressure, shut in casing.

*Handwritten signature/initials*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	1500.00	
CE0002	20 mi	MILEAGE	143.00	
CE0711	min	ten mileage	660.00	
WE0853	2 hrs	80 Utc	200.00	
		trucks	2503.00	
		- 39%	976.14	
		subtotal		1526.83
CC5840	106 sks	Pozblend IA	1431.00	
CC5965	378 #	Gel	113.40	
CP8176	1	2 1/2" rubber plug	45.00	
		materials	1589.40	
		- 39%	619.87	
		subtotal		969.53
		8%		
		SALES TAX		77.56
		ESTIMATED TOTAL		2573.92
				(4219.55)

5794

Revin 3787

AUTHORIZATION No Co Rep TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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