KOLAR Document ID: 1271709

Confiden	tiality Re	quested:
Yes	No	

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 November 2016 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WELL	HISTORY -	DESCRIPT	FII &	
VVELL	HISIONI -	DESCRIPT		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.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane) Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
	If yes, show depth set: Feet
If Workover/Re-entry: Old Well Info as follows:	
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)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. 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:

KOLAR Document ID: 1271709

Operator Name:	Lease Name:	Well #:
Sec TwpS. R East 🗌 West	County:	

Page Two

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			og Formatio	on (Top), Depth a	nd Datum	Sample
(Attach Additional Sheets) Samples Sent to Geological TCores aken Electric Log Run Geologist Report / Mu List All E. Logs Run:	-	 Yes Yes Yes Yes 	No No		Nam	e		Тор	Datum
		Report	CASING all strings set-c		Ne	w Used	ion, etc.		
Purpose of String	Size Hole Drilled	Size	Casing In O.D.)	Weigh Lbs. / F	nt	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Purpose: Depth		Туре о	ADDITIONAL f Cement	# Sacks U		EEZE RECORD	Type and F	Percent Additives	
Perforate Protect Casing Plug Back TD Plug Off Zone	Top Bottom								
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Estimated Production Per 24 Hours Oil Bbls. Gas			Mcf	Wate			Gas-Oil Ratio	Gravity	
DISPOSITION OF	Used on Lease	C Op	M Den Hole	IETHOD OF (_	Comp. Com	mmingled	PRODUCTIC Top	DN INTERVAL: Bottom
Shots Per Perforatio Foot Top	on Perforatio Bottom	on B	ridge Plug Type	Bridge Plug Set At		Acid	, Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	
TUBING RECORD: S	ize:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	BEREXCO LLC
Well Name	Leona Unit 11-1R
Doc ID	1271709

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	.251	8.625	23	1667	65/35 POZ, Class A		6% gel, 1/4# flakes, 3% CC
Production	7.875	5.50	14	5203	65/35 POZ, ASC		6% gel, 1/4# flakes, 10% salt, 6# Gilsonite, 1/2% fluid loss, 1/4% defoamer

ALLIED OIL & GAS SERVICES, LLC

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Federal Tax I.D. #20-5975804

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To: Allied Oil & Gas Services, LLC,	
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SIGNATURE IF PAID IN 30 E	
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CEMENTING LOG

STAGE NO.

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Company	Distr Distribution			Ticket No. <u>CC</u> Rig <u>Bered</u>	the second s	Spacer Type: Amt Sks Yield ft³/sk D	
Lease <u>Ler</u>	1401 6 A	- p to fin		Well No. 1/			PlensityPl
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ALLIED OIL & GAS SERVICES, LLC

Federal Tax I.D. #20-5975804

REMIT TO P.O. BOX 93999 SOUTHLAKE, TEXAS 76092		SERV	ICE POINT	_kg
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PUMPTRUCK CEMENTER Allan Kycn	(12) 21A	111 16	018-20	2092
# 495-281 HELPER Karn Ruch	Claserk	10316	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	2132
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BULKTRUCK				· : ج:
# 818 DRIVER COM Drown	<u>с</u>		TOTAL	17,993.09
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	RV.	<i>r</i>	Ø	22522
To: Allied Oil & Gas Services, LLC.	Vipat Clark			THE E
You are hereby requested to rent cementing equipment	Aprilian	~	0 201	110000
and furnish cementer and helper(s) to assist owner or	Contral une	 its	0 87.00	912

Tatch Dam,

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT 18

NET TOTAL

0 34

8

DISCOUNT 48% 4

TOTAL

483) IF PAID IN 30 DAYS

IF PAID IN 30 DAYS

and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

γJ. ¥ ne PRINTED NAME SIGNATURE

	ATTTN
	ALLEI
物社民	OIL & GAS SERVICES, LLC

CEMENTING LOG

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STAGE	MO

Date 10 1						CEMENT DATA:
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Lease (el)	ne hist	<u> </u>		Vell No. /1- /	R	
County Ha	sHell			tate KS	·	Bottom
Location				ield		LEAD: Pump Time hrs. Type 25 4K 65/35 6 20/141P
CASING DATA:					Aisc 🗌	Amt. 235 Sks Yield 1-94 ft³/sk Density4.7 PPG TAIL: Pump Time hrs. The 340 65/356 70/1470
Size 5/11	Surface	Intermed		oduction M Li		TAIL: Pump Time hrs. type ### 69/39# ***/1402 .5D FIL 144C Excess
Size <u>-9.16</u>	Туре		jn,	Conar		Amt, <u>425</u> Sks Yield <u>1, 9</u> ft ³ /sk Density <u>12, 7</u> PPG
			,		······································	WATER: Lead 6 2 gals/sk Tail 6 gals/sk Total Bbls.
Casing Depths: T	op		Bottom	· · · · · · · · · · · · · · · · · · ·		Pump Trucks Used 499
En allera.						Bulk Equip 8/8
					-	
	, Tl.				<u>_</u>	· · · · · · · · · · · · · · · · · · ·
Drill Pipe: Size	911	-		Collars		
Open Hole: Size _	118	, T.D	ft.	P.B. to	ft.	Float Equip: Manufacturer
CAPACITY FACTO	ORS;	1210			,	Shoe: Type Depth
Casing:				3bl		Float: Type Depth
Open Holes:	Bbls/Lin. ft	AN IN		3bl		Centralizers: Quantity Plugs Top Btm
Drill Pipe:				3bi		Stage Collars
Annulus:	Bbls/Lin, ft		Lin. ft./£	3bl	· · · · · · · · · · · · · · · · · · ·	Special Equip
	Bbls/Lin. ft	<u> </u>	Lin. ft./8	3bl		Disp. Fluid Type Amt Bbls. Weight PPG
Perforations: F	From	ft. to		ft. Amt	·····	Mud Type Weight PPG
COMPANY REPR	ESENTATIVE			•		CEMENTER
			, 			
TIME	PRESSU	1				REMARKS
AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min.	
						or low fior ATS MAS, Situp
<u></u>						1
···· · · · · · · · · · · · · · · · · ·	1000			220	>/0,	Manloy, Granleth
	300			20.0	372	mx 25 5/L 65/35
	400			30.0	312	MAX 185 AGC
	-			115364	100	WEAK Touch
······	Ø.			47.14	6.0	Displace up Hoo
	1300	·		79 '	40	W/ Rig Mmd
	2200	· · · · ·				Cond Plan
	800			·		Upon 700/
						Sr. 4 prs
	300			8.0 JU.0	2.0	Mix 30 SIL Att 30 SIL M /f-
	3010			80.0	31/2	THEX BOO THE ALW
	300		·		3/12	MAY 5V 512 175C
						Wash Truck
	1300			29	41/2	Displace for 140
	2310			ļ	+	and plug
	ļ	ļ				TVO Clored
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-7:00 A-				4	1	
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THANK YOU