

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1275871

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	TwpS. R	East West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from I	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
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:	W	/ell #:
	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 C	Depth:
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, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	•	NHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
☐ Plug Back	Conv. to G		(Data must be collected from the		
Commingled	Pormit #:		Chloride content:	ppm Fluid volume	e: bbls
Dual Completion			Dewatering method used: _		
SWD			Location of fluid disposal if	hauled offsite	
☐ ENHR			1		
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 III Approved by: Date:									

Page Two



Operator Name:				Lease N	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
	ow important tops of fo ing and shut-in pressu o surface test, along wi	res, whe	ther shut-in pre	ssure reacl	hed stati	c level, hydrosta	tic pressures, bo			
Final Radioactivity Logilles must be submitted						gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.go	v. Digital	electronic log
Drill Stem Tests Taken (Attach Additional S		Ye	es No			3	on (Top), Depth a			Sample
Samples Sent to Geol	ogical Survey	Ye	es 🗌 No		Nam	9		Тор	L	Datum
Cores Taken Electric Log Run		☐ Y€								
List All E. Logs Run:										
			CASING	RECORD	│ Ne	w Used				
		Repo				rmediate, producti	on, etc.			
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used		and Percent dditives
									<u> </u>	
Purpose	Depth					EEZE RECORD				
Purpose: Perforate	Top Bottom	Туре	of Cement	# Sacks	Used		Type and I	Percent Additives		
Protect Casing Plug Back TD										
Plug Off Zone										
Did you perform a hydrau	ilic fracturing treatment or	n this well?	·			Yes	No (If No, sk	ip questions 2 ar	nd 3)	
	otal base fluid of the hydra		•		•			ip question 3)		
Was the hydraulic fractur	ing treatment information	submitted	to the chemical of	disclosure reg	gistry?	Yes	No (If No, file	out Page Three	of the ACC)-1)
Shots Per Foot			ID - Bridge Plug Each Interval Perl				cture, Shot, Cemen		b	Depth
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or ENH	R.	Producing Meth Flowing	nod:	g 🗌	Gas Lift C	other (Explain)			
Estimated Production Per 24 Hours	Oil Bl	bls.	Gas	Mcf	Wate	er Bl	ols.	Gas-Oil Ratio		Gravity
DIODOGITI	ON OF CAC			ACTUOD OF	COMPLE	TION		DDODUGT		
Vented Sold	ON OF GAS: Used on Lease		N Open Hole	METHOD OF \Box Perf.	Dually	Comp. Con	nmingled	PRODUCTIO	λΝ ΙΝΙΕΚ\	/AL:
(If vented, Sub			Other (Specify)		(Submit A		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	lantha Resources LLC
Well Name	Poss 6I
Doc ID	1275871

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	11	7	35	23	Portland	6	0
Production	5.875	2.875	8.7	720	50/50 Poz	121	3.4



Operator:

lantha Resources, LLC Garnett, KS

Poss #6I

Anderson Co., KS 11-20S-20E API: 003-26499

 Spud Date:
 12/18/2015
 Surface Bit:
 11.0"

 Surface Casing:
 7.0"
 Drill Bit:
 5.875"

 Surface Length:
 42.8'
 Longstring:
 719.7'

 Surface Cement:
 10 sx
 Longstring Date:
 12/22/2015

Longstring: 2 7/8 EUE New LS

Driller's Log

-	D - 11		2
Top	Bottom	Formation	Comments
0	2	Soil	
2	30	Clay & Grave	l
30	79	Shale	
79	106	Lime	
106	109	Shale	
109	112	Lime	
112	176	Shale	
176	187	Lime	
187	195	Shale	
195	232	Lime	
232	240	Shale	
240	260	Lime	
260	265	Shale	
265	279	Lime	
279	308	Shale	
308	317	Sandy shale	
317	320	Sand	Good odor, slight bleed to pit
320	409	Shale	
409	411	Lime	
411	419	Sand	Good odor, hard, rainbow to pit
419	435	Sandy shale	
435	448	Shale	
448	458	Lime	
458	461	Shale	

Poss #6i

See below

	ι 033 π01
	Anderson Co., KS
473	Lime
478	Shale
462	Lime
495	Shale
497	Coal
503	Sand
516	Shale
518	Coal
520	Shale
522	Lime
541	Shale
545	Lime
567	Shale
580	Lime
596	Shale
600	Lime
	478 462 495 497 503 516 518 520 522 541 545 567 580 596

Shale

Sand

Shale

TD

	Coring	
Run	Footage	Rec.
1		
2		

657

680

730

600

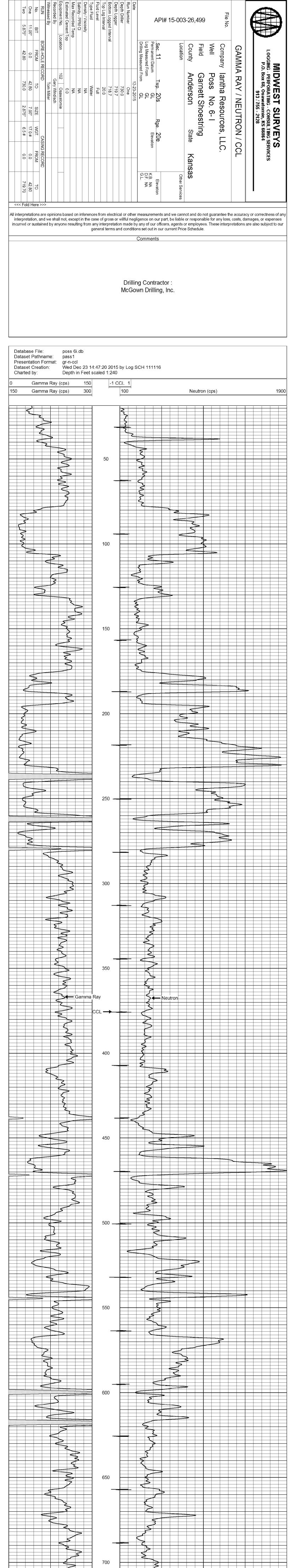
657

680

730

Sand Detail

657-664	Sand, soft, good odor, good bleed to pit
664-666	Laminated, mostly shale, slight odor
666-670	Sandy shale, slight odor
670-674	Sand, faint odor
674-676	Fair odor, slight bleed in samples
676-678	Laminated shale, no odor



0

150

150

300

Gamma Ray (cps)

Gamma Ray (cps)

-1 CCL 1

100

Neutron (cps)

1900



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

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Custome	lantha Res	oures LLC			stomer Name:	Tom Miller		Ticket Ne.:	<u> </u>	5075	6
Addross					AFE No.:			Date:	12/23/201	5	
City, State, Zip:					Job typa	cement longs	tring (new	well)			
Sarvice District:			····		Woll Datalis:	5 5/8 hole 730) 27/8 cas	ing @ 719			
Well name & No.	 				Well Location:		Countys	Anderson	State:	кs	
	Driver	Equipment#	Driver	Equipment#	Hours	TRUCK CALL		Anderson		AM I	8:00
Equipment #	Tom	Edaiburant#	Dilvei	Equipment #	110013	ARRIVED AT				PN AN PN	8:05
240	Troy		<u> </u>			START OPER				AV PN	8:34
110	Amos					FINISH OPER				AM PM	9:09
111	Ben				•	RELEASED				NA NA	9:20
25	Joe		j			MILES FROM	STATION T	O WELL			
Annual Control of the	en e	overne sident i venerali de primer de la companio	e en de la companya d	AND THE PROPERTY OF THE PROPER							
Product/Service Code	Description				Unit of Measure	Quantity	List Price/Unit	Gross Amount	ltem Discount		Net Amour
p01604	50/50 Pozr	nix Cement			sack	121.00	\$11.30	\$1,367.30	25.00%		\$1,025.4
p01607	Bentonite (lb 	208.00	\$0.30	\$62.40	25.00%		\$46.8
01607	Bentonite (Gel			lb .	200.00	\$0.30	\$60.00	25.00%		\$45.0
02000	H2O				gal	3,000.00	\$0.01	\$39.00	25.00% 25.00%		\$29.5 \$40.5
p01611	FLO-Seal Pheno Sea	.1	·····		lb lb	25.00 30.00	\$2.15 \$1.70	\$53.75 \$51.00	25.00%		\$38.2
01618	Heno Geo						* * * * * * * * * * * * * * * * * * * *				
23103	Cement Pu				ea	1.00	\$675.00	\$675.00	25.00%		\$506.2
24001	· · · · · · · · · · · · · · · · · · ·	ılk Truck - Minii	mum		ea	1.00	\$300,00 \$84.00	\$300.00 \$84.00	50.00% 25.00%		\$150,0 \$63.0
C11000 C11100	Vacuum Tr				ea ea	1,00	\$84.00	\$84.00	25.00%		\$63.0
		cane Services Inc ha					Gross:	\$ 2,776.45	Net:	\$	
redit terms of sale fo	r approved accou st due accounts	ints are total invoice of	due on or before he balance past	the 30th day from due at the rate of 1	Total	Taxable	Gross:	\$ 2,776.45 Tax Rate:	Net: 7,650%	\$	
Credit terms of sale for the date of invoice. Par 4% per month or the renterest to a lesser am officel the collection of a directly incurred for second	r approved accounts st due accounts maximum allowat ount. In the even said account, Cu such collection. In	ints are total invoice of may pay interest on the ole by applicable state till is necessary to en instomer hereby agree to the event that Custo	due on or before the balance past to or federal laws inploy an agency is to pay all fees timer's account w	the 30th day from due at the rate of 1 if such laws limit and/or attorney to directly or fith HSI becomes	Frac and Acid s	Taxable service troatments de reduction on newly di wells are not taxable	\$ - signed with Intent filled or existing	Tax Rate:		\$	2,007.
credit terms of sale for the date of invoice. Parties a per month or the raterest to a lesser amusified the collection of directly incurred for selinguent. HSI has the	r approved accounts aximum allowat ount. In the even said account, Cu such collection. In e right to revoke vocation, the full	ints are total invoice of may pay interest on to the by applicable state to it is necessary to en estomer hereby agree in the event that Customy and all discounts invoice price without.	due on or before he balance past e or federal laws nploy an agency s to pay all fees omer's account w previously appli	the 30th day from due at the rate of 1 if such laws limit and/or attorney to directly or ith HSI becomes ed in arriving at not	Frac and Acid s	service treatments de reduction on newly de	\$ - signed with Intent filled or existing	Tax Rate:	7.650% Sale Tax:	\$	2,007.3

CUSTOMER AUTHORIZED AGENT

Customer Comments or Concerns:

Customer Representative:



HURRICANE SERVICES INC

Customen	lantha Reso	urces Inc.			Date:	12/23/2015	SO#		1286	
Representative:									-	
Address:										
City, State:	Garnett	Kansas								
<u> </u>	ļ		<u> </u>							
County, Zip:	Ande	erson			L				CARE TAXON MENNAMENTAL PROPERTY.	
Fiel	ld Order No.:	50	756	1	Open Hole:	5 5/8	7	Porf De	pths (ft)	Perfs
110	Well Name:		s 6I	c	asing Depth:	0 0/0	-			
	Location:		nett	ł	Casing Size:		1		<u> </u>	İ
	Formation:				ubing Depth:	719	1			
Туре	e of Service:	Long	string	ł.	Tubing Size:	2 7/8	1			
	Well Type:				Liner Depth:		1			
	Age of Well:	NI	EW		Liner Size:					
P	acker Type:				Liner Top:		1			
l	cker Depth:				iner Bottom:		4			
Tre	eatment Via:			'	Total Depth:	719	_			
									Total Perfs	0
	IMIEOTI	ON RATE	DDEC	CHDE	AVAGE HANDES	NEW PROPERTY OF THE PROPERTY O		PROP	Hou	FLUID :
TIME		N2/CQ2	STP	SURE ANNULUS		REMARKS		(lbs)	(gls)	(bbis)
8:00am					Called Out					
8:00am					Leave Shop					
8:05am				_	1	casting in the hole				
		···········			Ran Wireline / ta	g TD @ 719				
					Safty Meeting		***			ļ
8;20am			400.0		Rig up to 27/8 c					5.00
8:34am	3.5 3.5		100.0		Started pumping Start pump dow					8,00
8:36am 8:38am	3.5		200.0			water to bring gel to surface			***************************************	12.00
8:40am	3.5		200,0			4bbl of dye water				4.00
				***************************************		50 2% 121sx @ 14.2ppg				
8:42am	4.0		200,0		Cement up to we	eight starte d it down behind dye		**************************************		27.00
8:52am					Flush pumpand	lines				
8:54am	3.0		200.0		Pump down plug)				3.50
8:56am			1,220.0		Plug landed					<u> </u>
					Start MIT					
9:11am			1,250.0			up truck and flush out lines				
· · · · · · · · · · · · · · · · · · ·	L				6 bbl of good ce	ment to surrace	TOTAL:			59.50
							IVIAL.		<u> </u>	03,00
		SUMM			1	PRODUCTS USED	·	·		ı
ı	Max FI. Rate 4.0	Avg Fl. Rate 1.5 bpm	Max PSI 1,250.0	Avg PSI 750.0						
1	4.0	1.0 Optil	1,200.0	0.00,0	'					
						101 FOIFO DOL	N			
						121sx 50/50 2% gel / .25 F	neno seal			l

Treater: Tom Goodner

Customer: lantha Resources LLC



HURRICANE SERVICES INC

				5955		DROP.	HCI	(FLUID)
TIME	INUECTI(FLUID	ON RATE N2/CO2	STP	SURE ANNULUS	REMARKS	PROP (lbs)	(gls)	FLUID (bbls)
9:20am				2.2311.0 at 1.00.0 t 1.00.0 min == 1.	Leave location			
					THANKS			
					TOM JEFF TROY JR JOE BEN			
								· · · · · · · · · · · · · · · · · · ·
								1
						,		1
								<u> </u>
						<u> </u>		<u> </u>
						<u> </u>		<u> </u>
		<u> </u>	<u> </u>			<u> </u>		
								ļ
			<u> </u>					<u> </u>
		<u> </u>						
			<u> </u>			<u> </u>	<u> </u>	<u> </u>
		ļ					 	
							 	
		<u> </u>					ļ	<u> </u>
							 	
							ļ	
	İ			l		<u> </u>	<u> </u>	<u></u>

Activity provided on this page is calculated in the summary and totals on page 1