

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1276772

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:							
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 Nearest Outside Section 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 #:		
New Well Re-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 D	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:				
Operator:			If Alternate II completion, c	cement circulated from:			
Well Name:			feet depth to:	w/	sx cmt.		
Original Comp. Date:							
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan			
Plug Back	Conv. to G		(Data must be collected from to				
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls		
Dual Completion			Dewatering method used:_				
SWD			Location of fluid disposal if	hauled offsite:			
ENHR	Permit #:						
GSW	Permit #:		Operator Name:				
			Lease Name:				
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 Name: _			Well #:		
Sec Twp	S. R	East West	County:					
open and closed, flow and flow rates if gas t	ving and shut-in presson to surface test, along w	formations penetrated. I ures, whether shut-in pro vith final chart(s). Attach	essure reached stati n extra sheet if more	c level, hydrosta space is neede	atic pressures, both d.	tom hole tempe	erature, fluid r	recovery,
		otain Geophysical Data a or newer AND an image		egs must be ema	ailed to kcc-well-lo	gs@kcc.ks.gov	v. Digital elec	tronic log
Drill Stem Tests Taken (Attach Additional	•	Yes No		_	on (Top), Depth ar		Samp	
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	e		Тор	Datur	m
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No						
List All E. Logs Run:								
		CASING	RECORD Ne	ew Used				
		Report all strings set-	conductor, surface, inte	ermediate, product	tion, 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 P Additiv	
		ADDITIONAL	OFMENTING / OOL					
Purpose:	Depth		CEMENTING / SQL	JEEZE RECORD		araant Additiraa		
Perforate Top Bottom		Type of Cement	# Sacks Used	Type and Percent Additives				
Protect Casing Plug Back TD								
Plug Off Zone								
Did you perform a hydra	ulic fracturing treatment o	on this well?		Yes	No (If No, ski	p questions 2 ar	nd 3)	
	=	raulic fracturing treatment ex	xceed 350,000 gallons			p question 3)	,	
Was the hydraulic fractu	ring treatment information	n submitted to the chemical	disclosure registry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ON RECORD - Bridge Plug Footage of Each Interval Per				re, Shot, Cement Squeeze Record unt and Kind of Material Used) Depth		
	Сроспу Г	octago of Laon morvari of	ioratou	(>1	mount and rand or ma	teriar Good)		<u> Борин</u>
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No			
Date of First, Resumed	Production, SWD or EN							
Fotimeted Device C	0" -	Flowing			Other (Explain)) O" D "		
Estimated Production Per 24 Hours	Oil E	Bbls. Gas	Mcf Wate	er B	Bbls. G	Gas-Oil Ratio	Gr 	ravity
DISPOSITI	ON OF GAS:	1	METHOD OF COMPLE	ETION:		PRODUCTIO	ON INTERVAL:	
Vented Sold		Open Hole	Perf. Dually	Comp. Con	mmingled			
	bmit ACO-18.)	Other (Specify)	(Submit)	ACO-5) (Sub	omit ACO-4)		-	

Form	ACO1 - Well Completion
Operator	Wilson County Holdings LLC
Well Name	Fortner 1-C
Doc ID	1276772

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	8.5	6	24.5	40	portland	12	15ppg

PURCHASE ORDER #152466 **Sections shaded are assigned by Purchasing Date Issued: WILSON COUNTY HOLDINGS Quotation / Order#: 1442599 DRILLING Ext.#/Department: Vendor ID: CL0001 Suggested Name: CLEAVERS FARM AND HOME AFE FR-016 AFE/Cost Code: Vendor: Address: 2103 S. SANTA FE G/L Code: CHANUTE, KS 66720 G/L Description: Fax: Phone: 620.431.6070 Terms: Net 30 Invoice $\underline{\mathsf{Email}: \mathsf{nick}.\mathsf{whitworth}@\mathsf{cleaver} \mathsf{farm}.\mathsf{com}} \quad \mathsf{Contact:} \ \mathsf{NICK} \ \mathsf{WHITWORTH}$ Ship Via: Best Available Way FORMATION REPAIR AND CASING INSTALLATION Justification: Ship to: Fredonia Facility 1135 N. 15th Street Fredonia, KS 66736 Bill to: Wilson County Holdings 907 North Poplar Drive, Suite 235 Casper, Wyoming 82601 wchbilling@stranded-oil.com Item Quantity Unit of Measure Unit Price Total Price Description Part Number CEMENT STANDARD TYPE 1, 94LB, MONARCH 10.10 \$ 300 EΑ 3,030.00 CEMENT PALLET (DEPOSIT) 180.00 10 EΑ 18.00 \$ Notes: Sub-Total 3,210.00 Plus Tax of 6.50% 208.65 3,418.65

Authorized by: BUYER / BRECK ADAY
Signature Title / Printed Name Date

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

January 14, 2016

Forrest Sutherland Wilson County Holdings LLC 1135 N. 15TH ST. FREDONIA, KS 66736

Re: ACO-1 API 15-205-28060-00-00 Fortner 1-C NE/4 Sec.12-29S-14E Wilson County, Kansas

Dear Forrest Sutherland:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 10/20/2012 and the ACO-1 was received on January 14, 2016 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department