



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1278224
OIL & GAS CONSERVATION DIVISION

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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: _____

1278224

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Operator:
lantha Resources, LLC
Garnett, KS

Poss #1A
Anderson Co., KS
11-20S-20E
API: 003-26497

Spud Date:	12/11/2016	Surface Bit:	11.0"
Surface Casing:	7.0"	Drill Bit:	5.875"
Surface Length:	21.5'	Longstring:	719.0'
Surface Cement:	5 sx	Longstring Date:	12/17/2015
Longstring:	2 7/8 EUE New LS		

Driller's Log

Top	Bottom	Formation	Comments
0	2	Soil	
2	15	Clay & Gravel	
15	80	Shale	
80	110	Lime	
110	119	Sandy shale	
119	120	Coal	
120	177	Shale	
177	189	Lime	
189	196	Shale	
196	233	Lime	
233	240	Shale	
240	279	Lime	
279	317	Shale	
317	320	Sand	Faint odor
320	409	Shale	
409	411	Lime	
411	414	Sandy shale	
414	416	Lime	
416	422	Sand	Good odor, slight bleed, very shaley
422	452	Shale	
452	461	Lime	
461	468	Shale	
468	473	Sand	
473	496	Sandy shale	

Poss #1A
Anderson Co., KS

496	498	Coal	
498	530	Sandy shale	w/some sand, faint odor
530	561	Shale	
561	601	Lime	Limey shale
601	610	Bl. Shale	
610	624	Lime	Limey shale
624	626	Coal	
626	640	Shale	
640	691	Sand	See below
691	702	Sandy shale	
702		TD	

	Coring	
Run	Footage	Rec.
1		
2		

Sand Detail

640-656	Sand, soft, faint to no odor, no bleed
656-662	Muddy sandy shale
662-672	Fair odor, good soft sand, not a lot of visible bleed
672-676	Good odor, slight bleed to pit
676-678	Dark sand, fair odor, rainbow in samples
678-682	Shale
682-689	Sand, good odor, hard
689-691	Laminated, faint odor
691-693	Shale



MIDWEST SURVEYS
 LOGGING - PERFORATING - CONSULTING SERVICES
 P.O. Box 68, Osawatomie, KS 66064
 913 / 755 - 2128

GAMMA RAY / NEUTRON / CCL

File No. Company lantha Resources, LLC.
 Well Poss No. 1- A

Field Garnett Shoesting
 County Anderson State Kansas

Location 3816' FSL & 4838' FEL
 NE-NW-SW-NW

Sec. 11 Twp. 20S Rge. 20E
 Permanent Datum GL Elevation 956'
 Log Measured From GL
 Drilling Measured From GL

Date 12-23-2015
 Run Number One
 Depth Dialer 730.0
 Depth Logger 718.8
 Bottom Logged Interval 717.8
 Top Log Interval 20.0
 Fluid Level Full

Type Fluid Water
 Density / Viscosity NA
 Salinity - PPM Cl NA
 Max Recorded Temp NA
 Estimated Cement Top 0.0
 Equipment No. 102
 Location Osawatomie
 Recorded By Gary Windisch
 Witnessed By Tom Miller

BORE-HOLE RECORD				CASING RECORD			
Run	BIT	FROM	TO	SIZE	WGT.	FROM	TO
One	11.00"	0.0	20.70	7.00"	17.0 #	0.0	20.70
Two	5.875"	20.70	730.0	2.875"	6.5 #	0.0	719.0

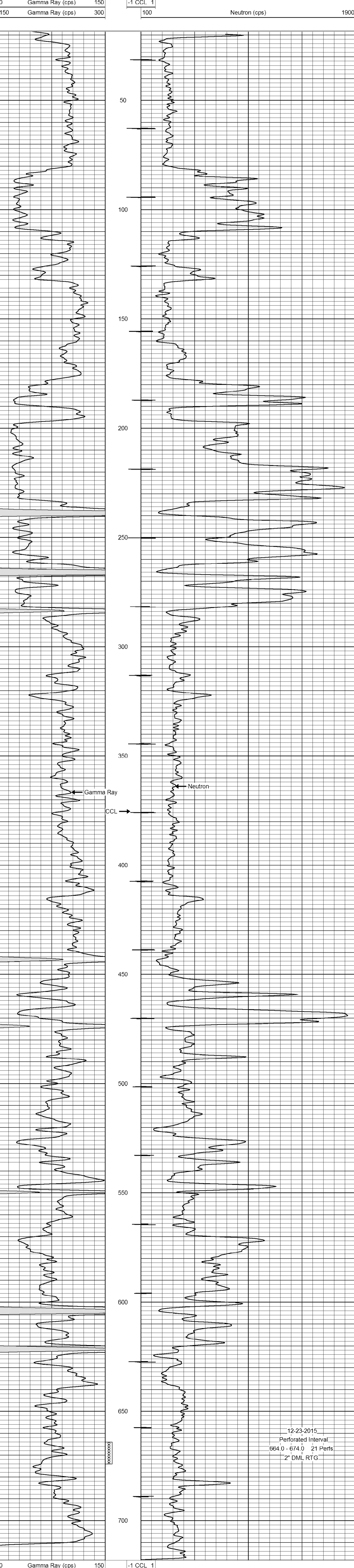
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All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

Drilling Contractor :
 McGown Drilling, Inc.

Database File: poss 1a.cb
 Dataset Pathname: pass1
 Presentation Format: gr-n-ccl
 Dataset Creation: Wed Dec 23 13:13:33 2015 by Log SCH 111116
 Charted by: Depth in Feet scaled 1:240



3613A Y Road
Madison, KS 66860
Ph: 620-437-2661
Fax: 620-437-2881



HURRICANE SERVICES INC

104 Prairie Plaza Parkway
Garnett, KS 66032
Ph: 785-448-3100
Fax: 785-448-3102

FED ID# 48-1214033
MC ID# 165290

Remit to: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202

Customer:
IANTHA RESOURCES LLC
21517 NW 1650 RD
GARNETT, KS 66032

Invoice Date: 12/18/2015
Invoice #: 0020942
Lease Name: POSS
Well #: 1-A
County: ANDERSON

Date/Description	HRS/QTY	Rate	Total
See ticket 50694 of Joe B	0.000	0.000	0.00
Cement Pozmix 50/50	120.000	11.300	1,356.00 T
Bentonite Gel	408.000	0.300	122.40
City water	3,000.000	0.013	39.00
Pheno Seal	30.000	1.700	51.00
Cement pump -Longstring/Plug	1.000	675.000	675.00
Bulk truck #242	1.000	300.000	300.00
80bbl Vac truck 108	1.000	84.000	84.00
80bbl Vac truck 110	1.000	84.000	84.00
Bid price	1.000	752.850-	752.85-

pd

Net Invoice 1,958.55
Sales Tax: (8.00%) 108.48
Total 2,067.03

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!



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

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer:	Iantha Resources	Customer Name:		Ticket No.:	50694				
Address:	21517 NW 1650 RD	AFE No.:		Date:	10/9/2015 12-18-15				
City, State, Zip:	Garnett Ks 66032	Job type:	cement longstring (new well)						
Service District:		Well Details:	5 5/8 hole @ 730 2 7/8 casing @ 719						
Well name & No.:	Poss 1A	Well Location:	County:	Anderson	State: KS				
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED	AM	PM	TIME
230	Jeff					ARRIVED AT JOB	AM	PM	
26	Joe					START OPERATION	AM	PM	
242	Jr					FINISH OPERATION	AM	PM	
108	Willie					RELEASED	AM	PM	
110	Danny					MILES FROM STATION TO WELL			

Treatment Summary

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	Net Amount
p01604	50/50 Pozmix Cement	sack	120.00	\$11.30	\$1,356.00	25.00%	\$1,017.00
p01607	Bentonite Gel	lb	200.00	\$0.30	\$60.00	25.00%	\$45.00
p01607	Bentonite Gel	lb	208.00	\$0.30	\$62.40	25.00%	\$46.80
p02000	H2O	gal	3,000.00	\$0.01	\$39.00	25.00%	\$29.25
p01618	Pheno Seal	lb	30.00	\$1.70	\$51.00	25.00%	\$38.25
c23002	Cement Pump	ea	1.00	\$675.00	\$675.00	25.00%	\$506.25
c24201	Cement Bulk Truck - Minimum	ea	1.00	\$300.00	\$300.00	50.00%	\$150.00
c11000	Vacuum Truck 80 bbl	ea	1.00	\$84.00	\$84.00	25.00%	\$63.00
c10800	Vacuum Truck 80 bbl	ea	1.00	\$84.00	\$84.00	25.00%	\$63.00

TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/4% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and owing and subject to collection.

Gross:	\$ 2,711.40	Net:	\$ 1,958.55
Total Taxable	\$ -	Tax Rate:	7.650%
Frac and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.		Sale Tax:	\$ -
		Total:	\$ 1,958.55

X _____
CUSTOMER AUTHORIZED AGENT

Date of Service: 12/18/2015
 HSI Representative: Joe Blanchard
 Customer Representative:

Customer Comments or Concerns:

Hurricane Services appreciates any Comments, Concerns or Criticism's from our valuable customers as Safety and Customer Satisfaction are our Number 1 goal. All Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.

TREATMENT REPORT



HURRICANE SERVICES INC

Customer:	Iantha Resources	Date:	12/18/2015	SO#:		1286
Representative:						
Address:	21517 NW 1650 RD					
City, State:	Garnett Ks					
County, Zip:	Anderson 66032					

Field Order No.:	50694
Well Name:	Poss 1A
Location:	Garnett
Formation:	
Type of Service:	Longstring
Well Type:	Injection
Age of Well:	NEW
Packer Type:	
Packer Depth:	
Treatment Via:	Tubing

Open Hole:	5 5/8
Casing Depth:	
Casing Size:	
Tubing Depth:	719
Tubing Size:	2 7/8
Liner Depth:	
Liner Size:	
Liner Top:	
Liner Bottom:	
Total Depth:	730

Perf Depths (ft)	Perfs
Total Perfs	0

TIME	INJECTION RATE		PRESSURE		REMARKS	PROP (lbs)	HCL (gls)	FLUID (bbls)
	FLUID	N2/CO2	STP	ANNULUS				
8:30AM					Called Out			
8:45AM					Leave Shop			
9:00AM					On location with casing in the hole			
9:00AM					Ran Wireline			
9:00AM					Safety Meeting			
9:05AM					Rig up to 2 7/8 tubing 6.4#			5.00
9:15AM			75.0		Started pumping 5bbl ahead			8.00
9:22AM	3.5		75.0		Start pump down gel			15.00
9:23AM	3.5		100.0		Start down with water to bring gel to surface			4.00
9:25AM	3.5		150.0		Start down with 4bbl of dye water			
9:26AM	3.5				Start mixing 50/50 POZ 2% GEL 1/4 PHENO 14.4 PPG			26.00
9:27AM			200.0		Cement up to weight started it down behind dye			
9:30AM	4.0				Flush pump and lines			
9:42AM			225.0		Start displacement			3.80
9:43AM	2.0		1,100.0		Plug landed 1200psi			
9:44AM			1,100.0		Hold pressure for 15 minutes M.I.T			
9:45AM			500.0		Closed well in and released pressure			
10:00AM					Clean up truck and flush out lines			
10:05AM								
TOTAL:						-	-	71.00

Max Fl. Rate	Avg Fl. Rate	Max PSI	Avg PSI
3.8		1,200.0	

PRODUCTS USED

120 SKS 50/50 POZ 2%GEL 1/4 PHENO SEAL

Treater: Joe Blanchard

Customer: IANTHA RESOURCES

poss 1-A

