KOLAR Document ID: 1278750

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1
January 2018
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.:
Name:	Spot Description:
Address 1:	SecTwpS. R East West
Address 2:	Feet from
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxxx) Datum: NAD27 NAD83 WGS84
Wellsite Geologist:	
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
□ Oil □ WSW □ SWD	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
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)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #:	Leading of fleth diseased if headed offether
EOR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Canad Date on Date Decembed TD Completing Date on	Quarter Sec TwpS. R
Spud Date or Date Reached TD Completion Date or 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 Approved by: Date:

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Page Two

Operator Name:				Lease Name:		Well #:						
Sec Twp.	S. R.	Ea	st West	County:								
	lowing and shu	ıt-in pressures, w	hether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,				
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log				
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample				
Samples Sent to G	eological Surv	ey	Yes No	Na	me		Тор	Datum				
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No									
		Re			New Used	ion, etc.						
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives				
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	l						
Purpose:		epth Ty Bottom	pe of Cement	# Sacks Used	ed Type and Percent Additives							
Protect Casi												
Plug Off Zon												
 Did you perform a Does the volume o Was the hydraulic 	of the total base f	luid of the hydraulic	fracturing treatment	_	_	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,				
Date of first Producti Injection:	on/Injection or Re	esumed Production	/ Producing Meth	nod:	Gas Lift 0	Other <i>(Explain)</i>						
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity				
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			ON INTERVAL:				
	_	on Lease	Open Hole			mmingled mit ACO-4)	Тор	Bottom				
,	Submit ACO-18.)											
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record				
TUBING RECORD:	Size:	Set /	At:	Packer At:								
. 5513 1200 10.	5120.		···	. 30.0.71								

Form	ACO1 - Well Completion
Operator	Diamond Star Oil, Inc.
Well Name	Shofner D2
Doc ID	1278750

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	0	22	50/50 POZ	5	NA
Production	5.625	2.875	0	713	60/40 POZ		See Service Co. Ticket



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

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer	Diamond	Star Oil,inc			stomer Name:	John Paulsen Ticket No.:				100617	
Address:	219 Broo	kside Dr.			AFE No.:	Date: 10/6/201			10/6/2015		
City, State, Zip:	City, State, Zipt Paola, Ks. 66071					Longstring New					
Service District: Madison, Ks						5 5/8" hole @ 720' 2 7/8" set @ 713'					
Well name & No. Shofner # D-2				Well Location:	3-17s-22e	County:	Miami	State:	Kansas		
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALL	AM PM				
#201	Jerry					ARRIVED AT	AM PM				
#202	Bryan					START OPERATION				AM PM	
146-156	Billy					FINISH OPERATION				AM FM	
#30	Brad					RELEASED				AM HM	
	Zack					MILES FROM					

Rig up to 2 7/8" tubing, ran wire line into well and taged float shoe at 713'. Break circulation with water,pumped 8 Bbls gel flush, circulated gel around to condition hole. Mixed 98 sks 60/40 Pozmix w/ 2% gel @ 14.4 lb. per/gal. shut down, wash out pump & lines, release plug- Displace plug with 4 Bbls of water. Final pumping 400psi, landed plug with 1200psi - well held 1200psi. release pressure to 750psi and closed tubing in. Job Complete with good cement returns w/ 4 Bbls of slurry. washup & teardown "Thank You"

Product/Serv Code	ce Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount		Net Amou
							-	
c20103	Cement Pump (Multiple wells)	ea	1.00	\$675.00	\$675.00	25.00%		\$506.
c00101	Heavy Equip. One Way	mi	15.00	\$3.25	\$48.75	25.00%		\$36.
p01603	60/40 Pozmix Cement	sack	98.00	\$12.00	\$1,176.00	25.00%		\$882.
p01607	Bentonite Gel	lb	168.00	\$0.30	\$50.40	25.00%		\$37.
p01607	Bentonite Gel	lb	200.00	\$0.30	\$60.00	25.00%		\$45.
c00104	Minimum Ton Mile Charge	ea	1.00	\$300.00	\$300.00	50.00%		\$150.
c15000	Transports 150 bbl	ea	2.50	\$105.00	\$262.50	25.00%	711-112-	\$196.
p02000	H2O	gal	3,000.00	\$0.01	\$39.00	25.00%		\$29.2
00102	Light Equip. One Way	mi	15.00	\$1.50	\$22.50	25.00%		\$16.8
001631	Rubber Plug 2 7/8	ea	1.00	\$30.00	\$30.00	25.00%		\$22.5
redit terms of sale	Ivance unless Hurricane Services Inc has approved credit prior to sale, for approved accounts are total invoice due on or before the 30th day from			Gross:	\$ 2,664.15	Net:	\$	1,923.1
1/2% per month or	Past due accounts may pay interest on the balance past due at the rate of the maximum allowable by applicable state or federal laws if such laws limit.	Total Taxable \$1,016.55 Frac and Acid service treatments designed with			Tax Rate:	7.650%	_	_
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 nuffrectly incurred for such collection. In the event that Customer's account with HSI becomes felinquent, 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		intent to incre-	ase production on n		Sale Tax:	\$	77.7	
		existing wells are not taxable. Total: \$ 2,000.						
nmediately due an	d owing and subject to collection.		Date of Service: Representative: I	10/6/2015 Brad Butler		Thank You		
X			Representative:					
	CUSTOMER AUTHORIZED AGENT							
	Customer Comments or Concerns:							