Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1295156

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 &	

OPERATOR: License #		API No. 15
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.gxxx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entry Wo	orkover	Field Name:
		Producing Formation:
☐ Oil ☐ WSW ☐ SWD □ Gas □ D&A □ ENHR	SIOW SIGW	Elevation: Ground: Kelly Bushing:
	Temp. Abd.	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 Dep	oth:	
Deepening Re-perf. Conv. to ENHR	Conv. to SWD	Drilling Fluid Management Plan
Plug Back 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:
ENHR Permit #:		
GSW Permit #:		Operator Name:
		Lease Name: License #:
	pletion Date or	Quarter Sec. Twp. S. R. East West
Recompletion Date Reco	mpletion 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 Approved by: Date:

CORRECTION #1

1295156

Operator Nar	me:			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	Drill Stem Tests Taken Yes No (Attach Additional Sheets)			_og Formati	ion (Top), Depth an	d Datum	Sample
Samples Sent to Geol	,	Yes No	Nan	ie		Тор	Datum
Cores Taken Electric Log Run		☐ Yes ☐ No ☐ Yes ☐ No					
List All E. Logs Run:							
		CASING Report all strings set-c		ew Used ermediate, produc	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 Percent Additives
			CEMENTING / SQ				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used			ercent Additives	
Perforate Protect Casing Plug Back TD Plug Off Zone							
Did you perform a hydraulic fracturing treatment on this well? Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 Was the hydraulic fracturing treatment information submitted to the chemical disclosure regis			Yes Yes Yes Yes	No (If No, ski	p questions 2 ar p question 3) out Page Three		
Shots Per Foot	PERFORATIO Specify F	ON RECORD - Bridge Plug Footage of Each Interval Perl	s Set/Type orated		acture, Shot, Cement Amount and Kind of Ma		d Depth

		_		Other (Evaluin)		
	Tiowing					
s.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:						TERVAL:
	Open Hole	Perf.	Dually Comp.	Commingled		
(If vented, Submit ACO-18.)				(
	s.	Flowing	Gas Mcf METHOD C Open Hole Perf.	Flowing Pumping Gas Lift Gas Mcf Water METHOD OF COMPLETION: Open Hole Perf. Dually Comp. (Submit ACO-5)	Flowing Pumping Gas Lift Other (Explain) - S. Gas Mcf Water Bbls. METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled (Submit ACO-5)	Image: Flowing Pumping Gas Lift Other (Explain) S. Gas Mcf Water Bbls. Gas-Oil Ratio METHOD OF COMPLETION: Image: Open Hole Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4) Image: Open Hole Image: Open Hole

Packer At:

Liner Run:

Yes

No

TUBING RECORD:

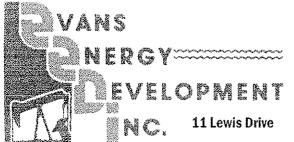
Size:

Set At:

Form	ACO1 - Well Completion
Operator	Kansas Resource Exploration & Development, LLC
Well Name	Joeckel KRI-24
Doc ID	1295156

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	U U	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	14	22.5	Portland	5	NA
Production	5.875	2.875	6.5	803.80	50/50 POZ	119	NA



OII & Gas Well Drilling Water Wells Geo-Loop Installation

Phone: 913-557-9083 Fax: 913-557-9084

WELL LOG Kansas Resource Exploration & Development, LLC Joeckel #KRI-24 API # 15-121-30,333 April 30 - May 1, 2014

Paola, KS 66071

Thickness of Strata	Formation	Total
2	soil & clay	2
10	shale	12
12	lime	24
107	shale	131
21	lime	152
18	shale	170
7	lime	177
33	shale	210
14	lime	224
12	shale	236
12	lime	248
2	shale	250
15	lime	265
5	shale	270
20	lime	290
2	shale	292
3	lime	295
3	shale	298
12	lime	310
2	shale	312
2	líme	314 base of the Kansas City
29	shale	343
3	sand	346 green
113	shale	459
15	limey sand	474 white & brown hard, good bleeding
5	broken sand	479 70% soft brown sand 30% limey sand, good bleeding
2	shale	481
2	oil sand	483 brown, good bleeding
16	shale	499
8	lime	507
8	shale	515
3 .	lime	518
19	shale	537
5	lime	542
16	shale	558
3	lime	561
13	shale	574
10	lime	584
12	shale	596
5	lime	601

Joeckel #KRI-24

Page 2

24	shale	625
1	coal	626
13	shale	639
9	silty shale	648
13	broken sand	661 light brown sand, & shale, no oil
10	silty shale	671
19	broken sand	690 grey & brown, makes water, no oil
1	coal	691
12	shale	703
1		703
3	coal shale	704
2	broken sand	
2 3		709 25% brown sand 75% shale, light bleeding
1	silty shale lime/sand/shale	712 712 10% cond 20% line 70% choic light blooding
1		713 10% sand 20% lime 70% shale, light bleeding
	silty shale	714 745 0000 house and 0000 shale. Vield blasting
1	broken sand	715 20% brown sand 80% shale, light bleeding
5	silty shale	720
1	lime	721
1	silty shale	722
1	broken sand	723 15% brown sand 85% shale
1	silty shale	724
1	broken sand	725 15% brown sand, 85% shale
4	silty shale	729
3.5	oil sand	732.5 brown sand, good bleeding
0.5	shale	733
1.5	lime	734.5
0.5	lime/sand/shale	735 5% sand 45% shale 50% lime light bleeding
8	shale	743
1.5	coal	744.5
65.5	shale	810 TD

Drilled a 9 7/8" hole to 22.5' Drilled a 5 5/8" hole to 810'

Set 22.5' of 7" surface casing cemented with 5 sacks of cement

Set 803.8' of 2 7/8" 8 round upset tubing with 3 centralizers, 1 float shoe, 1 clamp and 1 baffle. Baffle set 29' from bottom of tally.

Joeckel #KRI_24

Page 3

Core Times

	Minutes	Seconds
738		57
739		38
740		43
741		38
742		41
743		54
744	1	14
745		54
746		42
747		48
748		47
749	1	4
750		57
751		46
752		32
753		36
754		47
755		50
756		44
757		34

C °	ONSOLIDATED	267833		TICKET NUMB	ttawa	133
PO Bon 884, 0	hanute, KS 66720 F	ELD TICKET & TREAT			······································	
DATE	or 800-467-8676	CEMEN			DANOT	
F. I. I	HWW8 Top	ELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
CUSTOMER	1110 Joec	Kel KKI ·24	Sw 13		<u>a</u> 2	101.
Kansa.	5 hesources	ELD	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRE	ESS the the		730	AlaMad	Safety -	Meet
9393 CITY	W11074		358	AcIMCD		
Dverlan	A PROV 16.5	ZIP CODE [16210	558	Mat Coc		
JOB TYPE		578 HOLE DEPTH	Ø)	CASING SIZE & W	EIGHT 2	8
CASING DEPTH	12-1 5	TUBING			OTHER 27	4.8 66
SLURRY WEIGH			k	CEMENT LEFT in		
DISPLACEMENT	4.5 DISPLACEM	ENT PSI 800 MIX PSI	200	RATE 46	om '	
REMARKS: He	la meeting.	Established	rate.	Mixed L		d
1012# ce	1 tollowed by	, 119 SK 5015				sel 2
·V2#JP	henosed per	· SACK Circh		centent.		4ed
prop.	Pumped plug	to baffle, h	vell he	12 800	PSL S.	<u>et-</u>
float.	Closed valo	-e		• • • • • • • • • • • • • • • • • • •	······	
E.	15 Mitchell		<u></u>	1/~	An	······
Evan	5 MULTURE		1	law Mo	<i>v</i> - <i>v</i>	
			- AA	Con -		
ACCOUNT	QUANITY or UNITS	DESCRIPTION of	SERVICES or PF	RODUCT	UNIT PRICE	TOTAL
CODE THO		PUMP CHARGE		368		108500
5400	25	MILEAGE		368		105001
THO1	803.8	Casine Popi	Fase	3108		
5407	Min.			538		36800
5407 3502C	2	80 VGC	2	370		20000
200010	<i>(</i> /)					0.00
					1	
1124	1/9	50/50 CANG	, t		1368.50	
1118B	300#	5.el	·····		66.00	
	60 #	Phenoseal			81.00	
1107A	QD.~	1000003000	nateria	al e la	1515.50	,
				s 30%	- 454 6	-
						110102
1402	1	212plus	M	aterial to	2 par l	1040.8
1402		airpins	<u></u>	<u></u>		a-1.36
		····	••••••••••••••••••••••••••••••••••••••			
				N S	·	
_	۱۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰				- 201	
				ompieied	3421.	0
in 3737	······			-	SALES TA	'n
					ESTIMATE TOTAL	29.31;
THORIZTION	11	TITLE			DATE	<u> </u>

icknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's ccount records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

Summary of Changes

Lease Name and Number: Joeckel KRI-24 API/Permit #: 15-121-30333-00-00 Doc ID: 1295156 Correction Number: 1 Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	Deanna Garrison	Karen Ritter
Approved Date	05/23/2014	03/08/2016
CasingAdd_Type_PctP DF_1		NA
CasingAdd_Type_PctP DF_2		NA
CasingPurposeOfString PDF_2	Longstring	Production
CasingSizeCasingSetP DF_1	2.875	7
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 05715	//kcc/detail/operatorE ditDetail.cfm?docID=12 95156

Summary of Attachments

Lease Name and Number: Joeckel KRI-24 API: 15-121-30333-00-00 Doc ID: 1295156 Correction Number: 1 Attachment Name

Cement ticket/ Driller Log