KOLAR Document ID: 1299124

Confiden	tiality 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:	
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.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	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 #: SWD Permit #:	
SWD Permit #: EOR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
Recompletion Date Reached TD 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 III Approved by: Date:

KOLAR Document ID: 1299124

Operator Name:	Lease Name: Well #:
Sec TwpS. R East 🗌 West	County:

Page Two

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 (Attach Additional Sh	acate)	Y	′es 🗌 No			og Formatio	n (Top), Depth a	and Datum	Sample
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	Yes ☐ No Yes ☐ No Yes ☐ No						
		Rep	CASING ort all strings set-c] Ne	w Used rmediate, productio	on. etc.		
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
[ADDITIONAL	CEMENTING /	SQU	EEZE RECORD			
Purpose:	Depth Top Bottom	Туре	e of Cement	# Sacks Use	d		Type and	Percent Additives	
Protect Casing Plug Back TD Plug Off Zone									
 Did you perform a hydra Does the volume of the Was the hydraulic fracture 	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wate	er Bb	ls.	Gas-Oil Ratio	Gravity
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	DN INTERVAL: Bottom
Vented Sold (If vented, Subn	Used on Lease		Open Hole		-	·	nit ACO-4)	юр	Bollom
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Colt Energy Inc
Well Name	SCHAFER CS-19
Doc ID	1299124

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	11.25	8.625	22	40	PORTLAN D	14	NONE
Production	6.75	4.50	10.50	1377	"THICK SET"	150	PHENO- SEAL 2#/SX

	Mud Kotary Drilling Andrew King - Manager/Driller	ıg ınager/Driller			Pho	Phone: (719) 210-8806	210-8806				ž	Yates Center, KS 66783	inter, KS 66783
$\begin tabular transform to the second transform to the second transform to the second transform to the second transform tra$	Company	/Operator	Well No.	Leas	e Name		Well Locat	ion	-		Sec.	Twp.	Rge,
$\begin to the term of the term of te$	Colt Energy Inc.		cs 19	S	thafer		1867' fnl, 23	5' fwl	-	_	23	26s	14e
	P.O. Box 388		Well API #		Type/We	lí	County		-	otal Depth	Date Started	-	Date Completed
Indiant (Creation) Surface Record Indiant (Creation) Surface Record Indiant (Creation) Surface Record Indiant (Creation) Inditect Indiant(Creat)	lola, KS 66749		15-207-293	331	lio		Woodsol	F	KS	1382	2/26/2016		3/2/2016
	Job/Project	t Name/No.	Cfood			Bit F	Record				Coring Record	ord	
			ouriace rei	nio	Type	Size	From	To	Core #	Size	From	То	% Rec.
$ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Driller	/Crew	Bit Size:	11 1/4	PDC	11 1/4	0	40.1'	٢	3"	1279	1308	100
	Andy King		Casing Size:	8 5/8	PDC	6 3/4	40.1	1382					
Ament Used: 14x	Charles King		Casing Length:	40.1									
Image: Image in the image. Image in the image in the image in the image in the image.			Cement Used:	14sx									
Formation From Formation To Formation From Formation 10 Overburden From From Formation 203 shale P P Formation 347 lansing line P P Formation 541 shale P P Formation 541 shale P P P 717 Kc line P P P 813 shale P P P 814 Inne P P P 815 Inne P P P 814 Inne P P P 915 Inne P P P 9101 Inne P P P P			Cement Type:	Portland									
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1382		mostly shale											
		Miss lime.											

	67045	2			Date	Invoice #
			CEMENTING & AC	CID SERVICE, LLC	3/4/2016	2731
Bill To					Job Date	3/2/2016
Colt Energy			9	CANNED	Lease In	formation
PO Box 388 Iola, KS 66				J1208	Schafer	#CS-19
					County	Woodson
			-		Foreman	SM
Custome	er ID#	1003				
			15-207-29	331	Terms	Net 15
Item		Descri	iption	Qty	Rate	Amount
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\$4,192.3	Subtotal	business!	ciate your	ve appre		
\$230.0	Sales Tax (7.5%)	E-mail	Fax #	Phone #		
]	rene@elitecementing.com	620-583-5524	620-583-5561		
\$4,422.3	Total	Send payment to: Elite Cementing & Acidizing of KS, LLC				
\$0.0	Payments/Credits	Lang of KS, LLX	PO Box 92 Eureka, KS 67045			
\$4,422.3	Balance Due		BARCERE INF WORKS			

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810 PO B	-			TI				nt or Acid Fiel	_
EUREKA,								No. 273	
(620) 58				ERVICE.	LLC			an STEVE N	lead
15-207-		CEN	MENTING & ACID S	DEITIVICE.	X		Camp	Euroka	
Date	Cust. ID #	Leas	e & Well Number C	5-19	Section	Township	Range	County	State
3-2-16	1000	Scha	fortes	-19	23	26	142	Woodson	hs
Customer				Safety Meeting	Unit #		river	Unit #	Driver
CalTF	werey	Inc		weeting	10-1		0.00		
Mailing Address		~		1 5			<u>10 h/t</u>		
City	icx 385	State	Zip Code						
Ida		Ks	66749			-			
Job Type 4			oth <u>1382</u>		Slurry Vol.			lubing	
			1 7 7 ~~		Slurry Wt.			Drill Pipe	
Casing Depth			e 13,25						
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Casing Depth	W14/2 10,	SZEP Cement L					(Other	
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Code	Qty or Units	Description of Product or Services	Unit Price	Total
(102	1	Pump Charge	840,00	840.00
(107	25	Mileage	N/C	NC
	e			
C201	150sts	Thickset Censent	19.50	2925,00
C208	300 4	Phanascal 2ª Patisk	,60	180.00
C206	300 1	GelFlush	120	60.00
C214	Hot	Hulls	.415	18.00
(ISAA	8.25 TUP	Toomileose Bulkreack	MC	345.60
(403	1	412 Top Rubber plug	45.04	45.00
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		the second has been and a second has been a seco		
		1/1/26-34/		
			SubToral	4413.00
	-7	7.50%	Sales Tax	24210
Authorization Title Total				41 18KIO

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.