Kansas Corporation Commission Confidentiality Requested: OIL & GAS CONSERVATION DIVISION Yes No

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:	SecTwpS. R 🔲 East 🗌 West				
Address 2:	Feet from North / South Line of Section				
City:	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.xxxxx) Datum: NAD27 NAD83 WGS84				
Wellsite Geologist:					
Purchaser:	County:				
Designate Type of Completion:	Lease Name: Well #:				
☐ New Well ☐ Re-Entry ☐ Workover	Field Name: Producing Formation:				
☐ Oil ☐ WSW ☐ SWD ☐ SIOW					
Gas D&A ENHR SIGW	Elevation: Ground: Kelly Bushing:				
☐ OG ☐ GSW ☐ 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? Yes No				
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 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 #:				
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. R East West				
Recompletion Date Recompletion Date	Countv: 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:

1304855 CORRECTION #1

Operator Name:				_ Lease I	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in presson surface test, along	sures, whether with final chart	shut-in pre (s). Attach	ssure reac extra shee	hed stati t if more	c level, hydrosta space is neede	tic pressures, bot d.	tom hole temp	erature, fluid	recovery,
Final Radioactivity Lo- files must be submitte						ogs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital elec	tronic log
Drill Stem Tests Taker (Attach Additional S		Yes	No				on (Top), Depth ar		Sam	
Samples Sent to Geo	logical Survey	Yes	☐ No		Nam	e		Тор	Datu	m
Cores Taken Electric Log Run		Yes Yes	☐ No ☐ No							
List All E. Logs Run:										
				RECORD	Ne					
	0	· ·				ermediate, product		T "0 1	I	
Purpose of String	Size Hole Drilled	Size Ca Set (In 0		Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and I Additiv	
		Al	DDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Type of C	ement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing	Top Bottom									
Plug Back TD Plug Off Zone										
r lug on zone										
Did you perform a hydrau	ulic fracturing treatment	on this well?				Yes	No (If No, ski	p questions 2 ar	nd 3)	
Does the volume of the to								p question 3)		
Was the hydraulic fractur	ing treatment information	on submitted to th	ne chemical o	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot		ON RECORD -					cture, Shot, Cement		d	Depth
	Specify Footage of Each Interval Perforated				(A	THOURT AND KIND OF MA	teriai Oseu)		Берит	
TUBING RECORD:	Size:	Set At:		Packer A	+-	Liner Run:				
TOBING FILEGORIS.	0.20	001711.		r donor 7	••	[Yes No			
Date of First, Resumed	Production, SWD or EN	NHR. Pro	oducing Meth		a \Box	Coo Lift 0	Other (Evelein)			
Estimated Dradustics	0.11	Dhla	Flowing	Pumpin			Other (Explain)	Nee Oil D-#-		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Wat	eı B	bls. C	Gas-Oil Ratio	G	iravity
	ON OF GAS:	Open		METHOD OF Perf.			nmingled	PRODUCTION	ON INTERVAL:	
Vented Sold	Used on Lease bmit ACO-18.)		(Specify)	_ 1 011.	(Submit		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Reusch Well Service, Inc.
Well Name	WAMSLEY I-6
Doc ID	1304855

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	20	22.4	PORTLAN D	5	NONE
Production	5.625	5.875	6	909.4	50/50 POZ	138	2% GEL

Summary of Changes

Lease Name and Number: WAMSLEY I-6

API/Permit #: 15-091-24248-00-00

Doc ID: 1304855

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved By	Deanna Garrison	Karen Ritter
Approved Date	05/19/2014	04/25/2016
CasingAdd_Type_PctP DF_1		NONE
CasingPurposeOfString PDF_1	SURFACE	Surface
CasingPurposeOfString PDF_2	PRODUCTION	Production
CasingSizeCasingSetP DF_2	6	5.875
CasingTypeOfCementP DF_2	50/50/POZ	50/50 POZ
Footages Reference Corner		SE
Ground Surface Elevation	1014	1024
If Alternate II Completion - Sacks of Cement		138

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Kelly Bushing Elevation	1014	1024
LocationInfoLink	https://kolar.kgs.ku.edu/kcc/detail/locationInform	https://kolar.kgs.ku.edu/kcc/detail/locationInform
Number of Feet East or West From Section Line	ation.cfm?section=19&t 2500	ation.cfm?section=19&t 1443
Number of Feet North or South From Section Line	1420	2385
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 05371	//kcc/detail/operatorE ditDetail.cfm?docID=13 04855
Subdivision3	SW	NE
Subdivision4Smallest	SW	NE