

1315754

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
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:				

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: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

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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Jackman Oilfield Services
1 West Mulberry St.
Colony, KS 66015
620-852-3350

WELL LOG
Lakeshore Operating, LLC
Sturdivan 3 LO-39

May 26, 2016

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total</u>
7.00	Soil/clay	7.00
36.00	Lime	43.00
134.00	Shale	177.00
89.00	Lime	266.00
18.00	Shale	284.00
119.00	Lime	403.00
4.00	Shale	407.00
97.00	Lime	504.00
18.00	Shale	522.00
19.00	Lime	541.00
3.00	Shale	544.00
132.00	Lime	676.00
14.00	Sandy Shale	690.00
155.00	Shale	845.00
3.00	Lime	848.00
9.00	Shale	857.00
15.00	Lime	872.00
50.00	Shale	922.00
1.00	Lime	923.00
3.00	Shale	926.00
7.00	Lime	933.00
1.00	Coal	934.00
24.00	Lime	958.00
10.00	Shale	968.00
8.00	Lime	976.00
6.00	Shale	982.00
8.00	Lime	990.00
12.00	Shale	1,002.00
8.00	Lime	1,010.00
5.00	Shale	1,015.00
3.00	Very broken sand	1,018.00
1.00	Oil sand	1,019.00

2.00	Very broken sand	1,021.00	
27.00	Shale	1,048.00	
1.00	Lime	1,049.00	
5.00	Oil sand	1,054.00	
0.50	Sand	1,054.50	
0.50	Oil sand	1,055.00	
0.50	Oil sand	1,055.50	
1.50	Oil sand	1,057.00	
2.50	Sandy Shale	1,059.50	
2.50	Oil sand	1,062.00	
4.50	Sandy Shale	1,066.50	
0.50	Shale	1,067.00	
8.00	Sandy Shale	1,075.00	
32.00	Shale	1,107.00	TD

Drilled a 9 7/8" hole to 39'7"

Drilled a 5 7/8" hole to 1107'

Set 40' of 7" surface casing cemented with 9 sacks of portland cement

Ran 1100' of 2 7/8"

2 cores

Cored 1019

No seating nipple

Sturdivan 3 LO-39



CONSOLIDATED
Oil Well Services, LLC

PO Box 886, Chanute, KS 66720
620-431-9210 or 800-467-8676

Invoice # **807646**

5815
5720

TICKET NUMBER **50071**

LOCATION **Ottawa KS**

FOREMAN **Fred Maden**

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-26-77	4807	Sturdivan 3 4039	NW 34	23	16	W.D.

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Lakeshore Operating LLC	712	Fred Maden		
Mailing Address	467	Kel Car		
340 So. Laura	675	Kel Det		
CITY	804	Art Mad		
Wichita				
STATE				
KS				
ZIP CODE				
67211				

JOB TYPE Logging HOLE SIZE 5 7/8 HOLE DEPTH 1107 CASING SIZE & WEIGHT 2 1/4 EUE
 CASING DEPTH 1100' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gals _____ CEMENT LEFT IN CASING 200# Plug
 DISPLACEMENT 6.4 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.8 BPM

REMARKS: Hold Safety Meeting. Establish Circulation. Mix & Pump 100# Gel Flush. Mix & Pump 143 SKS Poz Blend II A Cement 2% Gel 5" Kel Seal 1" Pheno Seal/SK. Cement to surface. Flush pump & lines clean. Displace 2 1/2" Rubber plug to casing TD. Pressure to 800# PSI. Release pressure to set Check Valve. Shut in Casing.

Jackman Drilling Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	
CE0450	1	PUMP CHARGE	467
CE0002	40 mi	MILEAGE	467
CE0711	minimum	Ten Miles Delivery	804
WE0853	5 hrs	80 BBL Vac Truck	675
		Sub Total	
		less	47%
CE0450	143 SKS	Poz Blend II A Cement	
CE5965	346#	Bentonite Gel	
CE6077	715#	Kel Seal	
CE6079	143#	Pheno Seal	
CE6176	1	2 1/2" Rubber Plug	
		Sub Total	
		less	47%
			2.58

Form 5737

AUTHORIZATION

[Signature]

TITLE

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

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Jay Scott Emler, Chairman
Shari Feist Albrecht, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

October 11, 2016

Wesley Ketcham
Lakeshore Operating, LLC
23 1/2 E. MADISON AVE SUITE A
IOLA, KS 66749

Re: ACO-1
API 15-207-29339-00-00
STURDIVAN 3 LO-39
NW/4 Sec.34-23S-16E
Woodson County, Kansas

Dear Wesley Ketcham:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 5/22/2016 and the ACO-1 was received on October 11, 2016 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department