Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1317630

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM

WELL HISTC)RY - C	DESCRI	PTION OF '	WELL a	& LEASE

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 #	
Name:	(e.g. xx.xxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	
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. Ab	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:	
Original Comp. Date: Original Total Depth:	
Deepening Re-perf. Conv. to ENHR Conv. to SWI	D Drilling Fluid Management Plan
Plug Back Conv. to GSW Conv. to Proc	
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
Dual Completion Permit #: SWD Permit #:	
SWD Permit #: ENHR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East 🗌 West
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								
Geologist Report Received								
UIC Distribution								
ALT I II III Approved by: Date:								

CORRECTION #1

1317630

Operator Nam	e:			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 Taker	า	Yes No		.og Formatio	on (Top), Depth an	d Datum	Sample
(Attach Additional Sheets)				-	(- F // - F // - F		
Samples Sent to Geological Survey		Yes No	Nam	e		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING Report all strings set-c	RECORD Ne Ne Ne Ne		ion, 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 / SQL				
Purpose:	Depth	Type of Cement	# Sacks Used				
Perforate Protect Casing	Top Bottom						
Plug Back TD Plug Off Zone							
Did you perform a hydrau	0			Yes [p questions 2 an	nd 3)
		raulic fracturing treatment ex n submitted to the chemical c		? Yes ?		o question 3) out Page Three (of the ACO-1)
	PEBEOBATI	ON RECORD - Bridge Plugs	s Set/Type	Acid Fra	cture, Shot, Cement	Squeeze Becord	d
Shots Per Foot	Shots Per Foot Specify Footage of Each Interval Perforated				mount and Kind of Ma		Depth

Estimated Production Per 24 Hours	Oil Bb	ls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS:		METHOD OF COMPLETION:				PRODUCTION INTE	RVAL:	
Vented Sold	Used on Lease		Open Hole	Perf.	Dually Comp.	Commingled		
(If vented, Submit ACC	D-18.)		Other (Specify	•)	(Submit ACO-5)	(Submit ACO-4)		
			Suici (Opeeny	/				

Packer At:

Pumping

Producing Method:

Flowing

Liner Run:

Gas Lift

No

Yes

Other (Explain)

TUBING RECORD:

Size:

Date of First, Resumed Production, SWD or ENHR.

Set At:

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	GRIFFIN COX CHESTER UNIT 202W
Doc ID	1317630

All Electric Logs Run

ANNULAR HOLE VOLUME PLOT 5 INCH CASING
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 5 INCH
BOREHOLE COMPENSATED SONIC LOG
MICROLOG
QUAD COMBO LOG
REPEAT SECTION

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	GRIFFIN COX CHESTER UNIT 202W
Doc ID	1317630

Tops

Name	Тор	Datum
Heebner	4121	
Toronto	4143	
Lansing	4214	
Kansas City	4618	
Marmaton	4771	
Pawnee	4874	
Cherokee	4914	
Atoka	5138	
Morrow	5189	
Chester	5288	
St Genevieve	5436	

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
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Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	1622	Class A	490	See Attached
Production	7.875	5.5	17	5574	Class H & A	325	See Attached

Summary of Changes

Lease Name and Number: GRIFFIN COX CHESTER UNIT 202W API/Permit #: 15-081-22132-00-00 Doc ID: 1317630 Correction Number: 1 Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved Date	08/11/2016	09/23/2016
ENHR - Permit Number	D-32.358	E-32.358
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=13 13517	//kcc/detail/operatorE ditDetail.cfm?docID=13 17630