

Confidentiality 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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD

Gas DH EOR

OG GSW

CM (Coal Bed Methane)

Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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: _____

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 <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|--|---|

| 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 | | | | |
| | | | | |

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
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)*

| | | | | | |
|---|--|---------|-------------|---------------|---------|
| Date of first Production/Injection or Resumed Production/Injection: | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____ | | | | |
| 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> <i>(Submit ACO-4)</i> | PRODUCTION INTERVAL: Top Bottom |
|---|---|------------------------------------|

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | | | |
|----------------|-------|---------|------------|--|
| TUBING RECORD: | Size: | Set At: | Packer At: | |
|----------------|-------|---------|------------|--|

| | |
|-----------|--------------------------------|
| Form | ACO1 - Well Completion |
| Operator | K3 Oil & Gas Operating Company |
| Well Name | JELINEK 5-11 |
| Doc ID | 1316617 |

All Electric Logs Run

| |
|------------------------|
| |
| Dual Induction |
| Dual Comp Porosity |
| Borehole Com Sonic Log |
| Microresistivity |
| Interpretation |

| | |
|-----------|--------------------------------|
| Form | ACO1 - Well Completion |
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| Well Name | JELINEK 5-11 |
| Doc ID | 1316617 |

Tops

| Name | Top | Datum |
|-------------|------|-------|
| HB | 3029 | -1785 |
| Stalnaker | 3385 | -2141 |
| Kansas City | 3704 | -2460 |
| Marmaton | 4028 | -2784 |
| Cherokee | 4159 | -2915 |
| Miss | 4354 | -3110 |
| Miss Lime | 4354 | -3110 |
| Kinderhook | 4678 | -3434 |
| Simpson | 4752 | -3508 |
| Arbuckle | 4956 | -3508 |



| | | | |
|----------------|---------|--------|--------------|
| PAGE | CUST NO | YARD # | INVOICE DATE |
| 1 of 1 | 1009504 | 1718 | 09/04/2016 |
| INVOICE NUMBER | | | |
| 92217313 | | | |

Pratt
 B K3 OIL & GAS
 I 24900 PITKIN RD, SUITE 305
 L THE WOODLANDS
 L TX US 77386
 T O ATTN: SELIGMAN

J LEASE NAME Jelinek 5-11
 O LOCATION
 B COUNTY Harper
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

| JOB # | EQUIPMENT # | PURCHASE ORDER NO. | TERMS | DUE DATE | | |
|---|-------------|--------------------|---------------|------------|------------|----------------|
| 40962431 | 19843 | | Net - 30 days | 10/04/2016 | | |
| For Service Dates: 08/23/2016 to 08/23/2016 0040962431 171813964A Cement-New Well Casing/Pi 08/23/2016 Cement 8 5/8 Surface | | | QTY | U of M | UNIT PRICE | INVOICE AMOUNT |
| | | | 165.00 | EA | 5.20 | 858.00 T |
| | | | 110.00 | EA | 4.80 | 528.00 T |
| | | | 70.00 | EA | 1.48 | 103.60 T |
| | | | 717.00 | EA | 0.42 | 301.14 T |
| A-Serv Lite 60/40 POZ Celloflake Calcium Chloride | | | | | | |

"Top Rubber Cont Bl... 6 5/8"

BASIC

energy services, L.P.

TREATMENT REPORT

Customer: MS OIL & GAS OPERATIONS CO. Lease No. 8-23-16
 Well # 5-11
 Field Order # 15464 Station PIATT Casing 8 5/8 Depth 516.10 County HARRIS State TX
 Type Job CNW 8 5/8 Sucker Formation 11.34 s.s.w Legal Description 11.34 s.s.w

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | | | |
|-----------------|--------------|------------------|------|------------|-----|------------------|-------|------------|-------|------------------|
| Casing Size | Tubing Size | Shots/Ft | Acid | Pre Pad | Pad | Frac | Flush | Rate | Press | ISIP |
| 8 5/8 | | | | | | | | | | |
| Depth | 516.40 | From | To | 110 | 6 | | | Max | 79.5 | 32.5 |
| Volume | 32.8 | From | To | | | | | Min | 10 | 32.5 |
| Max Press | 300 | From | To | | | | | Avg | | 15 Min. |
| Well Connection | Annulus Vol. | From | To | | | | | HHP Used | | Annulus Pressure |
| Plug Depth | 496.40 | From | To | | | | | Gas Volume | | Total Load |
| | | | | | | | | | | |

Customer Representative DON Station Manager Kevin Gaudy Treater Mike Barral

| Service Units | 1981 | 1983 | 1986 | 1988 | Rate | Service Log |
|---------------|-------------|-------|-------|-------|------|------------------------------|
| 37586 | 24981 | 19843 | 19860 | 19860 | | |
| Driver Names | White Field | | | | | |
| Time | | | | | | |
| 9:00 | | | | | | |
| 10:10 | | | | | | ON LOCATION / SAFETY MEETING |
| 12:00 | | | | | | RUN 8 5/8 CASING |

RIG # 2

TOOLPUSHER WELL DATA SHEET

Trucking companies used to move rig in: Duke & Rainbow

OPERATOR: K-3 Oil & Gas
WELL NAME: Jelinek # 5-11
SPOT LOC.: Sec 11 T34s R5W
COUNTY: Harper

SPUD: 8-22-2016 6:00pm
(Date & Time)

CASINGS: CONDUCTOR -Set Jts. ()
" X # @ ' W/ SX

* ELEVATIONS: 1236 GL 1244 KB
GEOLOGIST: Tom Williams

PLUG DOWN: DATE:
CEMENT COMPANY:
SET BY:

WATER INFORMATION

Owe: \$ To:
Address:
Soc.Sec.#
POND X WELL HAUL
Location: 1 mile east

SURFACE - Set 12 Jts. (505 ')
8 5/8 " x 23 # @ 576 ' w/ 160 sx
A-Serv Life & 110 sks 60/40
per 2 1/2 cc 1/4" Cellflake per
Sack. Cement did Circ.
PLUG DOWN: 1:00pm DATE: 8-23-16
PIPE HAULED BY: Tatal oilfield Service
CEMENT COMPANY: Basic Energy

(legal from SE corner if you have it)

Plt Liner From Attica oilfield
Pump/Line From Attica oilfield

PRODUCTION - Set Jts. ()
" X # @ ' W/ SX

Hauled by
Hauled From

PLUG DOWN: DATE:
CEMENT COMPANY:
CASING COMPANY:

Water Well By

SAMPLE BAGS USED: 2 Boxes
2 bags of Cups

DATE REACHED RTD 9-02-2016
RTD 4989 LTD 4988
STATE AGENT: Virgil Clothier
DATE CALLED: 9-01-2016

DIRT WORK: X Steel Pits
Dozer: Flatlanders Dirt Service
Cellar/Runaround: Same
Dozer to Help Move IN OUT
Whose:

1st Plug 35 sx @ 4952
2nd Plug 35 sx @ 650
3rd Plug 35 sx @ 545
4th Plug 25 sx @ 60
5th Plug sx @

Rathole w/ 25 sx Mousehole w/ sx

ANHYDRITE:
WELDER: Spivey oilfield Service
MUD COMPANY: Mud-Co
MUD LOGGER: MBC
TESTER: Trilobite
LOGGER: Pioneer
FRAC TANK: Midwest oilfield Service

CEMENT TYPE: 60/40 per 470 gal
1/4" Flo-seal per sack

Time Plugging Started: 1:15 pm 9-03-2016
PLUG DOWN: 5:30 pm DATE: 9-03-2016
CEMENT COMPANY: Basic Energy
FLUIDS HAULED OFF BY: Midwest oilfield

USED: 4500 gal. @ \$ 1.92



K3 Oil & Gas Operating Company
24900 Pitkin Road, Suite 305
The Woodlands, TX 77386
Office 832-813.8558
Fax 832-234-0825

September 23, 2016

Ms. Nancy A. Jelinek &
Mr. Willard G. Corns
827 N. Edwards Ave. Apt 9
Wichita, KS 67203

Mr. Jeff Jelinek
P. O.Box 27
Danville, KS 67036

RE: Jelinek 5-11
Sec 11-T34S-R5W
2281' FNL – 985' FWL
Harper County, Kansas

Dear Mr. Jelinek;

Per KCC requirements, we are notifying you that the above named well was plugged on September 5, 2016. The Operator of the captioned well is:

K3 Oil & Gas
24900 Pitkin Road
Suite 305
The Woodlands, TX 77386
Contact: John Rigas 832.813.8496

I am enclosing a copy of the well plugging application (Form CP-1) filed with the KCC.

If you have any questions, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read 'John A. Rigas'.

John A. Rigas
K3 Oil & Gas