

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 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 | | | | |
| | | | | |

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|--|---|---|

Summary of Changes

Lease Name and Number: Kretchmer KT-32

API/Permit #: 15-003-26329-00-00

Doc ID: 1347244

Correction Number: 1

Approved By: Karen Ritter

| Field Name | Previous Value | New Value |
|--|----------------|---------------------|
| Approved By | NAOMI JAMES | Karen Ritter |
| Approved Date | 02/23/2015 | 03/07/2017 |
| Completion Or Recompletion Date | 09/12/2014 | 12/01/2016 |
| Date of First or Resumed Production or SWD or Enhr | | 12/01/2016 |
| Disposition Of Gas - Used on lease | No | Yes |
| Electric Log Run? | No | Yes |
| Elogs_PDF | | Gamma Ray & Neutron |
| Method Of Completion - Perf | No | Yes |
| Perf_Depth_1 | | 606'-642' |
| Perf_Depth_2 | | 741'-751' |

Summary of changes for correction 1 continued

| Field Name | Previous Value | New Value |
|-------------------------------|----------------|---|
| Perf_Material_1 | | Fractured perforations with 5500 lbs of 12/20 sand. |
| Perf_Material_2 | | Fractured perforations with 1000 lbs of 12/20 sand. |
| Perf_Record_1 | | 606'-642' 76 holes |
| Perf_Record_2 | | 741'-751' 21 holes |
| Perf_Shots_1 | 0 | 2 |
| Perf_Shots_2 | | 2 |
| Producing Method Pumping | No | Yes |
| Production - Barrels Oil | | 2 |
| Production - Barrels of Water | | 3 |
| Production - Gas-Oil Ratio | | 0 |
| Production - MCF Gas | | 0 |
| Production - Oil Gravity | | 36 |
| Production Interval #1 | | 606'-642' |

Summary of changes for correction 1 continued

| Field Name | Previous Value | New Value |
|------------------------|---|---|
| Production Interval #2 | | 741'-751' |
| Save Link | ../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 43464 | ../../../../kcc/detail/operatorE ditDetail.cfm?docID=13 47244 |
| Tubing Set At | | 757' |
| Tubing Size | | 1.315 |