

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1351672
OIL & GAS CONSERVATION DIVISION

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 # _____

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 SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- 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 ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

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
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1351672

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> _____ <input type="checkbox"/> Commingled <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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HUGHES DRILLING REPORT

Well No. #1
 Farm Haleem
 SURFACE CASING
 Size 7"
 Feet 27.20
 Circulated 8 ex cement

PERMANENT CSG.
 Size 2 7/8" 8rd 200 (new)
 Feet 934.11
Baffle of 904.05
 T. D. at Completion 950

OPERATOR H Energy, LLC
for Sandstone Resources, LLC

Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
4	soil	4
25	clay	29
29	shale	58
21	lime	79
7	shale	86
11	lime	97
3	shale	100
18	lime	118
21	shale	139
2	lime	141
7	shale	148
26	lime	174
29	shale	203
24	lime	227
9	shale	236
6	lime	242
8	shale	250
12	lime	262
17	shale	279
6	lime	285
11	shale	296
5	lime	301
43	shale	344
23	lime	367
8	shale	375
22	lime	397
5	shale	402
4	lime	406
4	shale	410
5	lime	415
171	shale	586
10	lime	596
12	shale	608
5	lime	613
17	shale	630
3	lime	633
8	shale	641
8	lime	649
5	shale	654
9	Red Bed	663
7	shale	670

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
11/16/16	0	4	soil	(1) 21.5-21.5
22'	4	29	clay	(2) 27.5-41.5
11/17/16	29	58	shale	(3) 32.5-66.5
48 5/8" ODC	58	79	lime (shale 62-63)	(4) 22.5-89.0
5" nipple	79	86	shale 12" dia	(5) 22.5-111.5
	86	97	lime	(6) 22.5-134.0
	97	100	shale	(7) 22.5-156.5
	100	118	lime	(8) 22.5-179.0
	118	139	shale	(9) 22.5-201.5
	139	141	lime	(10) 22.5-224.0
	141	148	shale	(11) 22.5-246.5
	148	174	lime	(12) 22.5-269.0
	174	203	shale	(13) 22.5-291.5
	203	227	lime	(14) 22.5-314.0
	227	236	shale	(15) 22.5-336.5
	236	242	lime	(16) 22.5-359.0
	242	250	shale	(17) 22.5-381.5
	250	262	lime	(18) 22.5-404.0
	262	279	shale (bit 270-271)	(19) 22.5-426.5
	279	285	lime	(20) 22.5-449.0
	285	296	shale	(21) 22.5-471.5
	296	301	lime	(22) 22.5-494.0
	301	344	shale	(23) 22.5-516.5
30'	344	367	lime	(24) 22.5-539.0
	367	375	shale (slate 368-369)	(25) 22.5-561.5
20'	375	397	lime	(26) 22.5-584.0
	397	402	shale (slate 401-402)	(27) 22.5-606.5

HUGHES DRILLING REPORT

SURFACE CASING

PERMANENT CSG.

Well No. #1
 Farm Haleem
 Size.....
 Feet.....
 Circulated _____ ex cement

Size.....
 Feet.....
 T. D. at Completion 950

OPERATOR HB Energy, LLC

Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
4	lime	674
52	shale	726
1	lime	727
8	shale	735
1	lime	736
12	shale	748
1	lime	749
3	sand	752
24	shale	776
2	lime	778
71	shale	849
2	slate	851
24	shale	875
6	oil sand	881
3	white sand	884
49	shale	922
5	Red Bed	938
12	shale	950
		T.D.

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
	402	406	lime	28225-629.0
	406	410	shale	29225-651.5
"Henthca"	410	415	lime	30225-674.0
	415	580	shale	31225-696.5
	580	590	lime (broken)	32225-719.0
	590	608	shale	33225-741.5
	608	613	lime	34225-764.0
	613	630	shale	35225-786.5
	630	633	lime (brown)	36225-809.0
	633	641	shale (slate 638-640)	37225-831.5
	641	649	lime	38225-854.0
	649	654	shale	39225-876.5
	654	663	Red Bed	40225-899.0
	663	670	shale (slate 669-670)	41225-921.5
	670	674	lime	42225-944.0
	674	726	shale	
	726	727	lime	
	727	735	shale	
	735	736	lime	
	736	748	shale	
	748	749	lime	
	749	752	Brown sand	
	752	776	shale	
	776	778	lime	
	778	849	shale (some Red Bed 798-802)	
	849	851	slate	
	851	875	shale (Red Bed 865-868)	

BM

HUGHES DRILLING CO.

Wellsville, Kansas 66092

Roger 913-883-2235
Darrel 913-883-4027

CORE TIME

Ray 913-883-4655
Clay 913-883-4583

LEASE Haleem #1
FORMATION Bartlesville
DATE: 11-17-16

~~2 1/2"~~ 3" Shave Bit

FROM	FEET TO	TIME	MINUTES	REMARKS
875	876	chip sample	—	sdv Lime (some bleed)
① 876	877	4:34:00 - 4:35:15	1:15	solid sand 876-878 (exc. bleed)
② 877	878	4:36:15	1:00	
③ 878	879	4:37:30	1:15	sand slightly lamin. w/white sand (exc. bleed)
④ 879	880	4:38:30	1:00	sand very lamin. w/white sand & shale (Good bleed)
⑤ 880	881	4:39:30	1:00	
⑥ 881	882	4:40:30	1:00	white sand lamin. w/shale
⑦ 882	883	4:42:30	2:00	
⑧ 883	884	4:45:15	2:45	
⑨ 884	885	4:48:00	2:45	shale
⑩ 885	886	4:50:45	2:45	
⑪ 886	887	STOP		
⑫ 887	888			(Best Perf Zone) 876-881 FA cch
⑬ 888	889			
⑭ 889	890			
⑮ 890	891			
⑯ 891	892			
⑰ 892	893			
⑱ 893	894			
⑲ 894	895			
⑳ 895	896			



CONSOLIDATED
Oil Well Services, LLC

PO Box 694, Chanute, KS 66720
620-431-9210 or 800-467-8676

7075
6977

TICKET NUMBER 50339
LOCATION outside KS
FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

INVOICE # 809056

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-18-16	7414	Naleam #1	NW 1	15	21	JO
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Sandstone Resources LLC			712	Frc Mad		
MAILING ADDRESS			467	Ki Car		
3131 Virginia Rd			675	A-Mad		
CITY	STATE	ZIP CODE	503	Caskey		
Wellsville	KS	66092				

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 950 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 835 DRILL PIPE Baffle in TUBING 905 OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20' + Plug
 DISPLACEMENT 5.26 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.3 BPM

REMARKS: Hold safety meeting. Establish circulation. Mix Pump 100# Gel
 Flush. Mix on Pump 125 sks Per Blend I A Cement 2% Gel 4"
 Flo Seal 1sk. Cement to surface. Flush pump & lines clean.
 Displace 2 1/2" Rubber plug to baffle in casing. Pressure to
 800# PSI. Monitor pressure for 30 min MIT. Release
 pressure to set float valve.

Hughes Drilling Co.

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
CE0450	1	PUMP CHARGE	467	15.00
CE0602	30 mi	MILEAGE	407	214.50
CE0602021	Minimum	Ten Miles Delivery	503	660.00
WE0853	1 1/2 hr	80 Bbl Vac Truck	675	150.00
		Sub Total		2524.50
		Less 62%	-1565.25	959.25
CP8176	1	2 1/2 plug	45.00	
CC5840	125 sks	Per Blend I A Cement	16.67	2083.75
CC5865	310#	Benstone Gel	93.00	
CC6075	32#	Flo Seal - CelloFlake	64.00	
		Sub Total		1889.50
		Less 62%	-1171.45	718.05
		Tax @ 7.75%		55.47
		SALES TAX		55.47
		ESTIMATED TOTAL		1732.79
				(215.59.96)

Revin 3737

AUTHORIZATION Clay TITLE _____ DATE _____

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.