

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 Recompletion Date _____ 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
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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) (Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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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:	
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Cement Job Summary

Job Number: Lib1704211600		Job Purpose: 03 Plug	
Customer:	Suemaur Exploration & Production, LLC		Date: 4/23/2017
Well Name: Moss	Number: 1-15		API/UWI:
County: Sheridan	City: Hoxie, Kansas		State: KS
Cust. Rep:	Phone:	Rig Phone:	
Legal Desc:		Rig Name: Murfin#7	
Distance: 50 miles (one way)		Supervisor:	James Peppin

Employees:	Emp. ID:	Employees:	Emp. ID:
James Peppin		Jose Trejo	
Carlos Ibarra			

Equipment:	Emp. ID:
994-4/550-5	994-4 / 467-5

Well Information

Open Hole Section

Description:	Size (in):	Excess	Top MD (ft)	Btm MD (ft)	
OPEN HOLE	7 7/8			5,950	TAIL CEMENT
OPEN HOLE	7 7/8				LEAD CEMENT
OPEN HOLE	7 7/8				
OPEN HOLE	7 7/8				

Tubulars

Description:	Size (in):	Wgt. (lb/ft)	ID (in)	Grade:	Top MD (ft)	Btm MD (ft)
PREVIOUS CASING	8 5/8	24	8.097		0	1,740

Materials - Pumping Schedule

Fluid Name	Description	Rqstd Qty	Density	Yield	Water (gal/sk)
Tail 1	ALLIED 40/60/4 POZ BLEND - CLASS A	260	13.78	1.43	6.90
Addl. Additive	Description	Conc. (lb/sk)	Determined by	Load Volume	UOM
CLC-CPF	CELLOPHANE FLAKES	0.25	lb/sk	65.0	lbm

Job Number: Lib1704211600		Job Purpose: 03 Plug	
Customer:	Suemaur Exploration & Production, LLC		Date: 4/23/2017
Well Name: Moss	Number: 1-15		API/UWI:
County: Sheridan	City: Hoxie, Kansas		State: KS
Cust. Rep:	Phone:	Rig Phone: 0	
Distance: 50 miles (one way)		Supervisor:	James Peppin

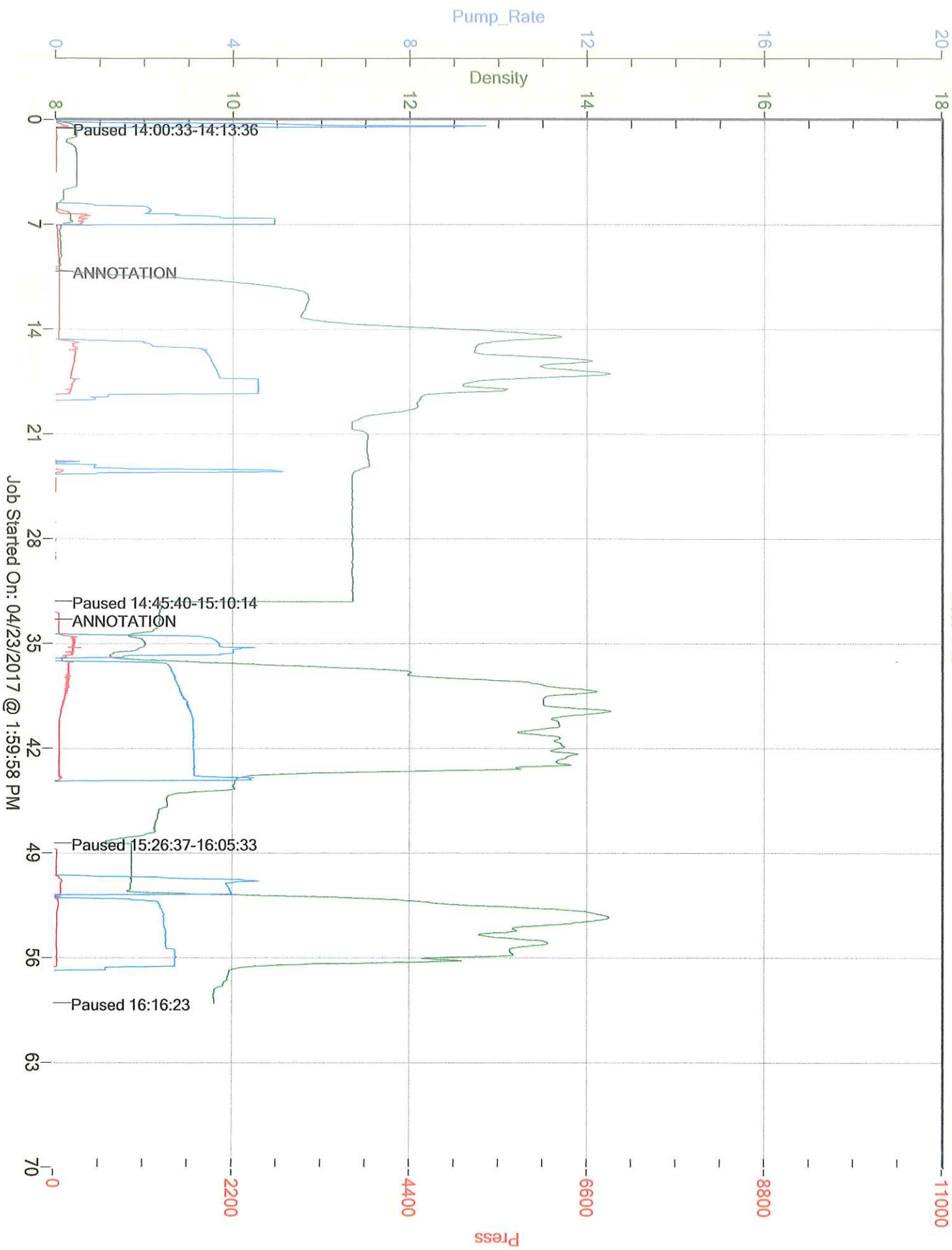
TIME	PRESSURE - (PSI)		FLUID PUMPED DATA		COMMENTS
	CASING	ANNULUS	VOLUME	RATE (BPM)	
12:26					On location @12:26 pm
					Rigging up to well head
13:00					Safety meeting with company man
13:20	340		3	4	Plug @ 2550' 3 bbls of water ahead of cement
13:29	280		12	3	Mixing 50sk of cement @ 13.6 wt
13:32	210		1	2	displacement of 1 bbls of h20 behind
13:33			30		rig disp 30 bbls of mud behind
14:12	230		3	3	Plug @ 1700' Pumping 3bbls of water
13:14	170		25	3	mixing 100 sks cement @ 13.6 wt
14:22	80		1	2	Displacement of 1 bbls h20 behind



Cement Job Summary

14:23			17		rig disp 17 bbls of mud
15:00	100		3	3	Plug @ 350' Plug pump 3 bbl h20 ahead
15:03	50		12	3	mix 50 sks of cement @ 13.6 wt
15:08	20		1	3	disp 1 bbl of h20 behind
15:30	30		25	3	Plug @ 40 ' pump 10 sks cmenet @ 13.6
					circ cment to surf
15:40			7	2	fill up rat hole with cement
15:45			5	2	fill up mouse hole with cement
					shut down and rig down the crew and
					I thank the customer for the job

Suemaur Moss 1-15





CEMENT MIXING WATER GUIDELINES

Company Name: Suemaur Exploration & Production, LLC

Lease Name: Moss # 1-15

County Sheridan State KS

Water Source: TANK

Submitted By: James Peppin Date: 4/23/2017

pH Level 7 Must be less than 8.5

Sulfates 400 Must be less than 1,000 PPM

Chlorides 0 Must be less than 3,000 PPM

Temperature 64

COMMENTS

Thank You

Customer Signature _____

GEOLOGIST'S REPORT

DRILLING TIME AND SAMPLE LOG

SUEMAUR EXPLORATION & PROD., LLC

MOSS #1-15
 SEC. 15 TWP 7S RGE 28W
 NW NE SE NW
 1385' FNL & 2072' FWL
 SHERIDAN COUNTY, KANSAS
 API: 15-179-21435-00-00

ELEVATION
 KB: 2790
 GL: 2785
 LOG MEASURED
 FROM: KB

SURFACE CASING
 8^{5/8}" Set @302' w/280SX

PRODUCTION CASING

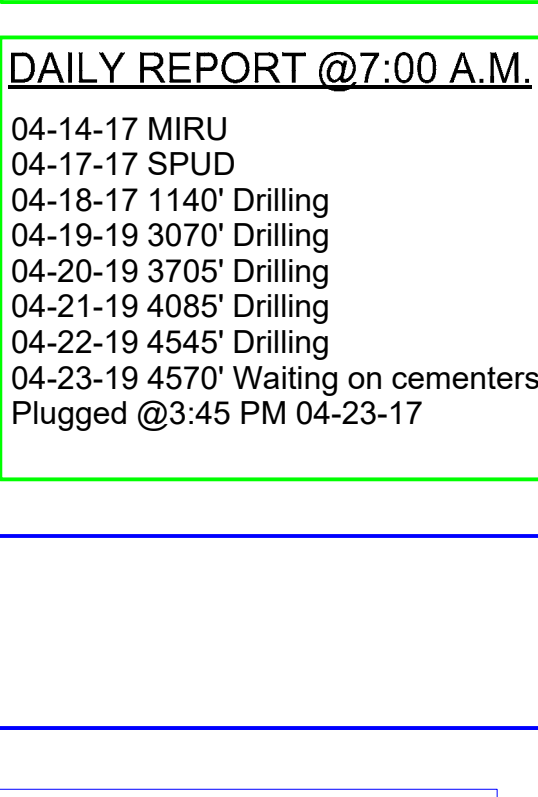
D&A

DRILLING CONTR.: MURFIN RIG #7
 SPUD: 04-17-2017 COMP:04-23-2017
 MUD UP: 3322' TYPE MUD: CHEM.
 DRILL TIME: 3400' to RTD
 RTD: 4570' LTD:4570'
 SAMPLES SAVED: 3450 to RTD
 GEOLOGIST: ROBERT J. PETERSEN

WELL LOG SURVEYS
 WEATHERFORD
 HI-Res AIL-DNL-ML-GR-SP

ELECTRIC LOG TOPS

FORMATION	DEPTH	DATUM	REF A	REF B
Anh	2501	+289	FLAT	+13
EA	2535	+255	+2	+12
Stotler	3573	-783	+16	+10
Topeka	3703	-913	+10	+7
Heebner	3910	-1120	+13	+6
Toronto	3935	-1145	+12	+7
Lansing	3951	-1161	+12	+5
C	3981	-1191	+12	+5
G Zone	4035	-1245	+14	+7
Stark	4127	-1337	+5	-3
BKC	4176	-1386	+12	-4
Pawnee	4279	-1489	+6	-8
Cherokee LS	4377	-1587	+7	-8
Wea. Miss	4491	-1701	N/A	N/A
Miss	4497	-1707	FLAT	-7
LTD	4570	-1780	-	-



REFERENCE WELL A
 Theodore Gore
 15-179-00184-00-00
 Watkins #1
 SE SE SW
 Sec. 15-7-28W

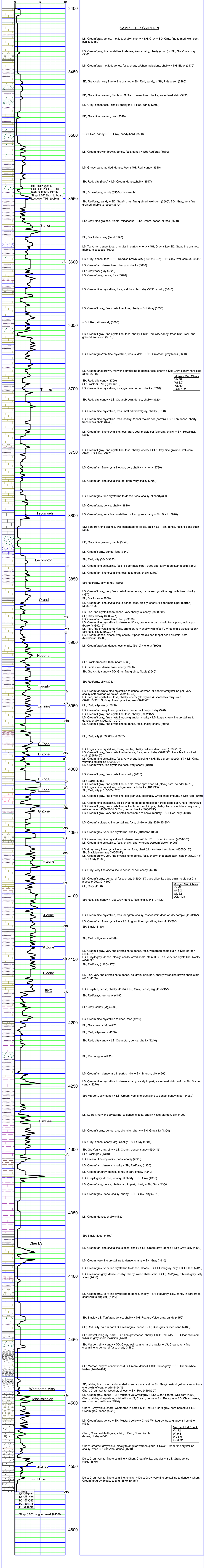
REFERENCE WELL B
 Sueaur
 15-179-21413-00-00
 Campbell #1-3
 1448 FSL & 546' FWL
 Sec. 3-7-28W

DAILY REPORT @7:00 A.M.

04-14-17 MURU
 04-18-17 SPUD
 04-19-17 1140' Drilling
 04-20-19 3705' Drilling
 04-21-19 4085' Drilling
 04-22-19 4545' Drilling
 04-23-19 4570' Waiting on cementers
 Plugged @3:45 PM 04-23-17

REMARKS AND RECOMMENDATIONS

The operator plugged and abandoned this well.



Superv
 7/8" @302'
 1/2" @1520'
 1/2" @3547'
 1/2" @4176'
 1" @4570'

Strap 0.65' Long to board @4570'

Morgan Mud Check
 Vis 72
 Wt 62
 WL 6.0
 LCM 7#



Cement Job Summary

Job Number: Lib1704171607		Job Purpose: 01 Surface	
Customer:	Suemaaur Exploration & Production, LLC		Date: 4/17/2017
Well Name: Moss	Number: 1-15		API/UWI:
County: Sheridan	City:		State: KS
Cust. Rep:	Phone:	Rig Phone:	
Legal Desc:	Rig Name: Murfin#7		
Distance: 50 miles (one way)	Supervisor:		

Employees:	Emp. ID:	Employees:	Emp. ID:
Erik Chavez		Jaime Torrez	
		Jose Calderon	
Equipment:			
1080-4 / 989-5		993-4 / 842-5	

Well Information						
Open Hole Section						
Description:	Size (in):	Excess	Top MD (ft)	Btm MD (ft)		
OPEN HOLE	12 1/4	200%	0	310	TAIL CEMENT	
OPEN HOLE	12 1/4			0	LEAD CEMENT	
Tubulars						
Description:	Size (in):	Wgt. (lb/ft)	ID (in)	Grade:	Top MD (ft)	Btm MD (ft)
PREVIOUS CASING				J-55		
TOTAL CASING	8 5/8	24	8.097	J-55	0	302
SHOE	8 5/8	24	8.097	J-55	287	302

Materials - Pumping Schedule						
STAGE #1						
Fluid Name	Description	Rqstd Qty	Density	Yield	Water (gal/sk)	
Spacer 1	FRESH WATER	5	8.33	n/a	n/a	
Fluid Name	Description	Rqstd Qty	Density	Yield	Water (gal/sk)	
Tail 1	CLASS A COMMON	280	14.89	1.33	6.20	
Addl. Additive	Description	Conc. (lb/sk)	Determined by	Load Volume	UOM	
CA-100	CALCIUM CHLORIDE, PELLETS OR FLAKE	2.82	% BWOC	789.6	lbm	
CLC-CPF	CELLOPHANE FLAKES	0.25	lb/sk	70.0	lbm	
Fluid Name	Description	Rqstd Qty	Density	Yield	Water (gal/sk)	
Disp. 1	Dispalcement	18.27718166	8.33	n/a	n/a	

Job Number: Lib1704171607		Job Purpose: 01 Surface		
Customer:	Suemaaur Exploration & Production, LLC		Date: 4/17/2017	
Well Name: Moss	Number: 1-15		API/UWI:	
County: Sheridan	City:		State: KS	
Cust. Rep:	Phone:	Rig Phone: 0		
Distance: 50 miles (one way)	Supervisor: 0			
TIME	PRESSURE - (PSI)		FLUID PUMPED DATA	COMMENTS
AM/PM	CASING	ANNULUS	VOLUME RATE (BPM)	
14:00				Arrive on Location
14:10				Pre-Rig up Safety Meeting
14:20				Rig up Equipment
15:20				Safety Meeting
15:24	2000			Test Lines
15:38	90		5 4.5	Spacer 1 / H2O



Cement Job Summary

					Cmt 280 sks @ 14.9 ppg
15:41	140		15	4.4	Pressure / Volume / Rate
15:45	160		30	4.3	Pressure / Volume / Rate
15:48	140		45	4.2	Pressure / Volume / Rate
15:51	160		60	4.3	Pressure / Volume / Rate
15:53	170		67	4.0	Pressure / Volume / Rate
15:58					Shutdown Drop Plug
					Displacement
16:02	40		5	4	Pressure / Volume / Rate
16:04	80		10	2	Slow Rate
16:07	390		16.5	2	Bump Plug
16:09					Cement Container Closed in with Pressure
16:15					Pre-Rig Down Safety Meeting
16:30					Rig down Equipment
17:00					Wait on Location For Cement Container
18:00					Leave Location
					25 bbls of cement to surface