Confiden	tiality R	equested:
Yes	No	

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1355343

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 #		API No. 15			
Name:		Spot Description:			
Address 1:					
Address 2:		Feet from Dorth / South Line of Section			
City: State	e: Zip:+	Feet from East / West Line of Section			
Contact Person:		Footages Calculated from Nearest Outside Section Corner:			
Phone: ()					
		GPS Location: Lat:, Long:, (e.gxxx.xxxxx)			
Name:		Datum: NAD27 NAD83 WGS84			
Wellsite Geologist:		County:			
Purchaser:		Lease Name: Well #:			
Designate Type of Completion:		Field Name:			
New Well Re-En	try Workover	Producing Formation:			
Oil WSW	SWD SIOW				
Gas D&A	ENHR SIGW				
OG [	GSW Temp. Abd.	Amount of Surface Pipe Set and Cemented at: Feet			
CM (Coal Bed Methane)					
	xpl., etc.):	Multiple Stage Cementing Collar Used?			
If Workover/Re-entry: Old Well Info a	as follows:	If yes, show depth set: Feet			
Operator:		If Alternate II completion, cement circulated from:			
Well Name:		feet depth to:w/sx cmt.			
Original Comp. Date:	_ Original Total Depth:				
Deepening     Re-perf.     Plug Back	Conv. to ENHR Conv. to SWD	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)			
	<b>x</b>	Chloride content: ppm Fluid volume: bbls			
	Permit #:	Dewatering method used:			
	Permit #: Permit #:				
	Permit #:	Location of fluid disposal if hauled offsite:			
	Permit #:	Operator Name:			
		Lease Name: License #:			
Spud Date or Date Reach Recompletion Date	ed TD Completion Date or Recompletion Date	Quarter Sec TwpS. 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:					

### **CORRECTION #1**

1355343

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 (Attach Additional Sh	eets)	Yes	No			og F	ormatio	n (Top), Dep	th and Datum		] Sample
Samples Sent to Geolog	gical Survey	Yes	No		Nam	e			Тор		Datum
Cores Taken Electric Log Run		Yes	No No								
List All E. Logs Run:											
		Report all st		RECORD	Ne		sed productio	on, etc.			
Purpose of String	Size Hole	Size Casi	-	Wei	ght	Set		Type of	# Sac	cks Typ	e and Percent
	Drilled	Set (In O.I	D.)	Lbs.	/ Ft.	De	oth	Cement	Use	d	Additives
		ADI			NG / SQU	FE7E BI	-COBD				
Purpose: Depth Type o		Type of Cen	ADDITIONAL CEMENTING / SQU of Cement # Sacks Used			200110	Туре а	and Percent Add	ditives		
Perforate Protect Casing Plug Back TD											
Plug Off Zone											
Did you perform a hydraulic Does the volume of the tota Was the hydraulic fracturing	al base fluid of the hyd	raulic fracturing tre			-		s	No (If N	o, skip question o, skip question o, fill out Page	n 3)	CO-1)
Shots Per Foot PERFORATION RECORD - Brid Specify Footage of Each Inte				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			Depth				
TUBING RECORD:	Size:	Set At:		Packer A	At:	Liner R	_	Yes	No		
Date of First, Resumed Pr	roduction, SWD or EN		ucing Meth Iowing	nod:	ng	Gas Lift	o	ther <i>(Explain)</i> _			
Estimated Production Per 24 Hours	Oil	Bbls. (	Gas	Mcf	Wate	er	Bb	ols.	Gas-Oil Rat	tio	Gravity
		Open H	_	IETHOD OF	_	Comp.	Corr	mingled	PROD	UCTION INTE	:nvAL:

(Submit ACO-5)

(Submit ACO-4)

Used on Lease

Other (Specify)

Vented

Sold

(If vented, Submit ACO-18.)

Form	ACO1 - Well Completion
Operator	SM Oil & Gas, Inc.
Well Name	Fulsom B 1A
Doc ID	1355343

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set		Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11	8.625	22	40	Port	20	NA
Production	6.75	4.5	11.6	1644	50/50 Poz	170	6% KCL

### Summary of Changes

Lease Name and Number: Fulsom B 1A

API/Permit #: 15-019-27529-00-00

Doc ID: 1355343

Correction Number: 1

Approved By: Karen Ritter

Field Name	Previous Value	New Value
Approved Date	03/08/2016	05/18/2017
Contractor License Number	34103	35116
Contractor Name	Lamamco Drilling Co., a General Partnership	SM Oil & Gas, Inc.
Date of First or Resumed Production or SWD or Enhr		10/5/2015
Disposition Of Gas - Used on lease	No	Yes
Field Name		Leniton
If Alternate II Completion - Cement Circulated From		1644
If Alternate II Completion - Cement Circulated To		0
If Alternate II Completion - Sacks of Cement		170
Liner Run?		No

# Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Plug Back Total Depth		1644
Producing Method Pumping	No	Yes
Production - Barrels Oil		4
Production - Barrels of Water		100
Production Interval #1		Wayside Sandstone, 1506-26
Purchaser's Name		CVR
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 87853	//kcc/detail/operatorE ditDetail.cfm?docID=13 55343