

Confidentiality Requested:

☐ Yes ☐ No

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1361004

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

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: \_\_\_\_\_

1361004

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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>List All E. Logs Run: _____ | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>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 |
| ____ Perforate                        |                  |                |              |                            |
| ____ Protect Casing                   |                  |                |              |                            |
| ____ Plug Back TD                     |                  |                |              |                            |
| ____ 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------|
|                |                                                                                           |                                                                                          |       |
|                |                                                                                           |                                                                                          |       |
|                |                                                                                           |                                                                                          |       |
|                |                                                                                           |                                                                                          |       |
|                |                                                                                           |                                                                                          |       |

|                |       |         |            |                                                                     |
|----------------|-------|---------|------------|---------------------------------------------------------------------|
| TUBING RECORD: | Size: | Set At: | Packer At: | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------|-------|---------|------------|---------------------------------------------------------------------|

|                                                 |                                                                                                                                                                                |
|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date of First, Resumed Production, SWD or ENHR. | Producing Method:<br><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 |
|-----------------------------------|-----------|---------|-------------|---------------|---------|

|                                                                                                                                                                          |                                                                                                                                                                                                                                                                                     |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <b>DISPOSITION OF GAS:</b><br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | <b>METHOD OF COMPLETION:</b><br><input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i><br><input type="checkbox"/> Other <i>(Specify)</i> _____ | <b>PRODUCTION INTERVAL:</b><br>_____<br>_____ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|

|           |                        |
|-----------|------------------------|
| Form      | ACO1 - Well Completion |
| Operator  | Mikol Oil LLC          |
| Well Name | SAUER 1-22             |
| Doc ID    | 1361004                |

#### Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | Number of Sacks Used | Type and Percent Additives |
|-------------------|-------------------|-----------------|--------|---------------|----------------|----------------------|----------------------------|
| Surface           | 12.25             | 8.625           | 23     | 221           | 80/20 Poz      | 170                  | 2%Gel&3%CC                 |
|                   |                   |                 |        |               |                |                      |                            |
|                   |                   |                 |        |               |                |                      |                            |
|                   |                   |                 |        |               |                |                      |                            |

# QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-2025

Home Office P.O. Box 32 Russell, KS 67665

No. 1883

Cell 785-324-1041

|              |         |         |          |              |          |             |                |
|--------------|---------|---------|----------|--------------|----------|-------------|----------------|
| Date 6-17-16 | Sec. 22 | Twp. 11 | Range 25 | County Trego | State KS | On Location | Finish 9:00 AM |
|--------------|---------|---------|----------|--------------|----------|-------------|----------------|

Location Callyer 1E 4N 1/2 E Sinto

|                         |               |                                                                                                                                          |
|-------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Lease Saver             | Well No. 1-22 | Owner                                                                                                                                    |
| Contractor Discovery #1 |               | To Quality Oilwell Cementing, Inc.                                                                                                       |
| Type Job Plug           |               | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |
| Hole Size 7 7/8         | T.D. 4150     | Charge To Mikol Oil                                                                                                                      |
| Csg. Drill Pipe         | Depth         | Street                                                                                                                                   |
| Tbg. Size               | Depth         | City State                                                                                                                               |
| Tool                    | Depth         | The above was done to satisfaction and supervision of owner agent or contractor.                                                         |
| Cement Left in Csg.     | Shoe Joint    | Cement Amount Ordered 255 60/40 4% Col 1/4 lb                                                                                            |

|                         |               |              |
|-------------------------|---------------|--------------|
| Meas Line               | Displace      | Common 153   |
| EQUIPMENT               |               | Poz. Mix 102 |
| Pumptrk 20 No. Cementer | Helper Brett  | Gel. 9       |
| Bulktrk 9 No. Driver    | Driver Doug   | Calcium      |
| Bulktrk No. Driver      | Driver Jordan |              |

|                        |  |                         |
|------------------------|--|-------------------------|
| JOB SERVICES & REMARKS |  | Hulls                   |
| Remarks:               |  | Salt                    |
| Rat Hole - 30 sx       |  | Flowseal 50 #           |
| Mouse Hole - 15 sx     |  | Kol-Seal                |
| Centralizers           |  | Mud CLR 48              |
| Baskets                |  | CFL-117 or CD110 CAF 38 |
| D/V or Port Collar     |  | Sand                    |
|                        |  | Handling 264            |

|                           |                     |                 |
|---------------------------|---------------------|-----------------|
| 1st Plug @ 2140 w/ 50 sx  | Mileage 8 5/8       | FLOAT EQUIPMENT |
| 2nd Plug @ 1230 w/ 100 sx | Guide Shoe          |                 |
| 3rd Plug @ 270 w/ 50 sx   | Centralizer         |                 |
| 4th Plug @ 40 w/ 10 sx    | Baskets             |                 |
|                           | AFU Inserts         |                 |
|                           | Float Shoe          |                 |
|                           | Latch Down          |                 |
|                           | Wood-Plug 1         |                 |
|                           | Pumptrk Charge plug |                 |
|                           | Mileage 45          |                 |

|             |              |
|-------------|--------------|
| X Signature | Tax          |
|             | Discount     |
|             | Total Charge |



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Federal Tax I.D.# 20-2886107

Phone 785-483-2025  
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Home Office P.O. Box 32 Russell, KS 67665

No. 184

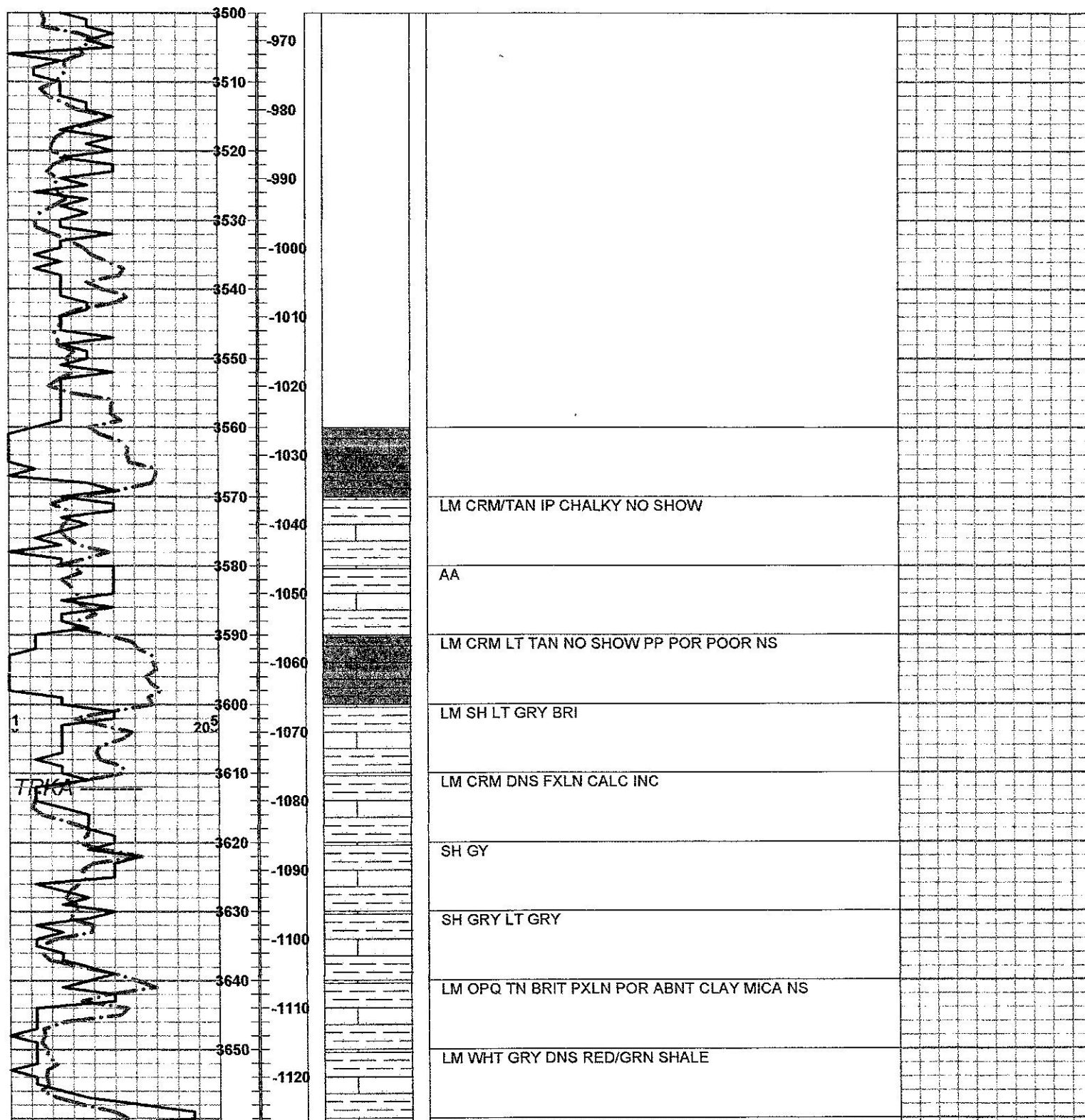
|                                |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
|--------------------------------|---------|------|----|------|----|-------|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------|----|-------------|--|--------|---------|
| Date                           | 6-11-17 | Sec. | 22 | Twp. | 11 | Range | 25 | County                                                                                                                                                                         | Trego | State                                                                            | Ks | On Location |  | Finish | 12:15PM |
| Lease                          |         |      |    |      |    |       |    | Location                                                                                                                                                                       |       | Owner                                                                            |    |             |  |        |         |
| Sauer                          |         |      |    |      |    |       |    | Colliger E to St Peter Rd 4N                                                                                                                                                   |       | 1/2 E 3/4 Int                                                                    |    |             |  |        |         |
| Well No. 1-22                  |         |      |    |      |    |       |    | To Quality Oilwell Cementing, Inc.<br>You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |       |                                                                                  |    |             |  |        |         |
| Contractor Discovery 1         |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
| Type Job Surface               |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
| Hole Size 12 1/4"              |         |      |    |      |    |       |    | T.D. 221'                                                                                                                                                                      |       | Charge To Mikol oil                                                              |    |             |  |        |         |
| Csg. 8 5/8"                    |         |      |    |      |    |       |    | Depth 220'                                                                                                                                                                     |       | Street                                                                           |    |             |  |        |         |
| Tbg. Size                      |         |      |    |      |    |       |    | Depth                                                                                                                                                                          |       | City                                                                             |    | State       |  |        |         |
| Tool                           |         |      |    |      |    |       |    | Depth                                                                                                                                                                          |       | The above was done to satisfaction and supervision of owner agent or contractor. |    |             |  |        |         |
| Cement Left in Csg. 15'        |         |      |    |      |    |       |    | Shoe Joint 15'                                                                                                                                                                 |       | Cement Amount Ordered 200 80/20 3%CC 2%6M                                        |    |             |  |        |         |
| Meas Line                      |         |      |    |      |    |       |    | Displace 13 BCS                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
| EQUIPMENT                      |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
| Pumptrk 20 No. Cementer Travis |         |      |    |      |    |       |    | Common 160                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
| Bulktrk 14 No. Driver Tony     |         |      |    |      |    |       |    | Poz. Mix 40                                                                                                                                                                    |       |                                                                                  |    |             |  |        |         |
| Bulktrk pu No. Driver Rick     |         |      |    |      |    |       |    | Gel. 3                                                                                                                                                                         |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Calcium 7                                                                                                                                                                      |       |                                                                                  |    |             |  |        |         |
| JOB SERVICES & REMARKS         |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
| Remarks: Cement did Circulate  |         |      |    |      |    |       |    | Hulls                                                                                                                                                                          |       |                                                                                  |    |             |  |        |         |
| Rat Hole                       |         |      |    |      |    |       |    | Salt                                                                                                                                                                           |       |                                                                                  |    |             |  |        |         |
| Mouse Hole                     |         |      |    |      |    |       |    | Flowseal                                                                                                                                                                       |       |                                                                                  |    |             |  |        |         |
| Centralizers                   |         |      |    |      |    |       |    | Kol-Seal                                                                                                                                                                       |       |                                                                                  |    |             |  |        |         |
| Baskets Mixed 170 SX           |         |      |    |      |    |       |    | Mud CLR 48                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
| D/V or Port Collar             |         |      |    |      |    |       |    | CFL-117 or CD110 CAF 38                                                                                                                                                        |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Sand                                                                                                                                                                           |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Handling 210                                                                                                                                                                   |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Mileage                                                                                                                                                                        |       |                                                                                  |    |             |  |        |         |
| FLOAT EQUIPMENT                |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Guide Shoe                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Centralizer                                                                                                                                                                    |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Baskets                                                                                                                                                                        |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | AFU Inserts                                                                                                                                                                    |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Float Shoe                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Latch Down                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Pumptrk Charge Surface                                                                                                                                                         |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Mileage 40                                                                                                                                                                     |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Tax                                                                                                                                                                            |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Discount                                                                                                                                                                       |       |                                                                                  |    |             |  |        |         |
|                                |         |      |    |      |    |       |    | Total Charge                                                                                                                                                                   |       |                                                                                  |    |             |  |        |         |
| X Signature [Signature]        |         |      |    |      |    |       |    |                                                                                                                                                                                |       |                                                                                  |    |             |  |        |         |

**CHRIS A. BEAN**  
**CONSULTING PETROLEUM GEOLOGIST**

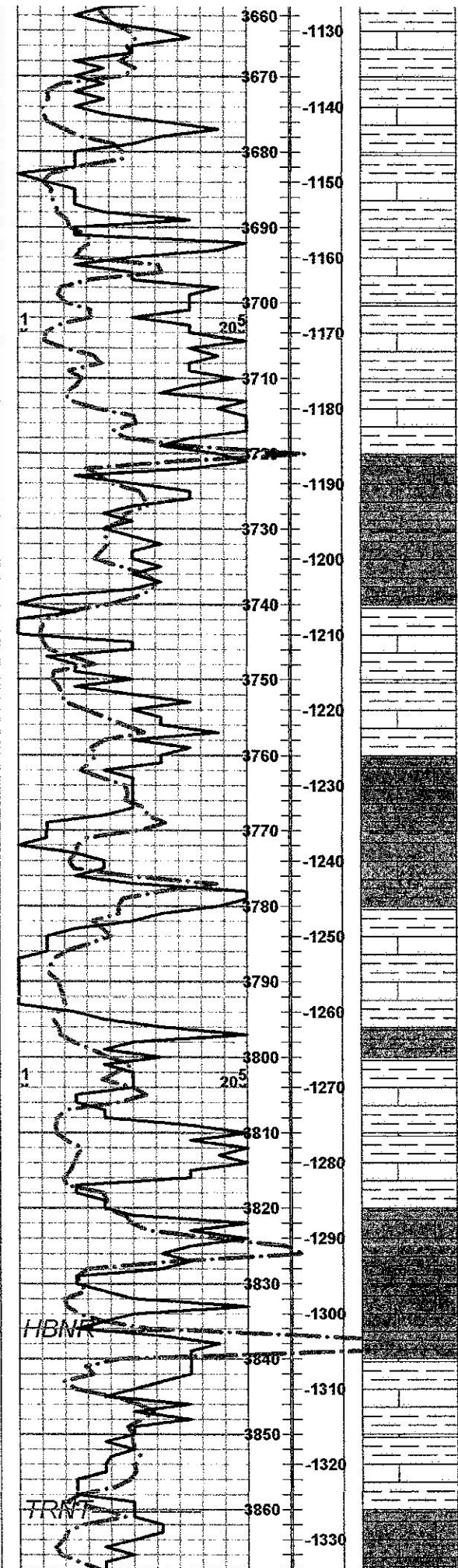
543 W 112th Ct. S. Jenks, OK 74037  
918-619-7981 C.BEAN67@ATT.NET

**GEOLOGIST'S REPORT**  
**Drilling Time and Sample Log**

|                                                                                                                                                                                                                                                      |                                                                                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>COMPANY</b> MIKOL OIL LLC<br><b>LEASE</b> SAUER1<br><b>FIELD</b> NA<br><b>LOCATION</b> NE SE NW/4 3630 FS 2970 FEL<br><b>SEC 22</b> TWSP 11 RGE 25<br><b>COUNTY</b> TREGO STATE KS                                                                |                                                                                                                       |                | <b>ELEVATIONS</b><br><br>KB 2534<br>DF<br>GL 2529<br>Measurements are all from KB                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>CONTRACTOR</b> DISCOVERY<br><b>SPUD</b> 6/10/17 <b>COMP</b> 6/17/17<br><b>RTD</b> 4158 <b>LTD</b> 4162<br><b>MUD UP</b> 3250 <b>TYPE MUD</b> CHEM                                                                                                 |                                                                                                                       |                | <b>CASING</b><br><br>SURFACE 200<br>PRODUCTION none                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>SAMPLES SAVED FROM</b> 3550 <b>TO</b> td<br><b>DRILLING TIME KEPT FROM</b> 3500 <b>TO</b> 4162<br><b>SAMPLES EXAMINED FROM</b> topeka <b>TO</b> td<br><b>GEOLOGICAL SUPERVISION FROM</b> 3000 <b>TO</b> TD<br><b>GEOLOGIST ON WELL</b> CHRIS BEAN |                                                                                                                       |                | <b>ELECTRICAL SURVEYS</b><br><br>DIL SUITE<br>CDNL SUITE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>FORMATION TOPS</b><br>SCCL/BASE<br>TPKA<br>HBNR<br>TRNT<br>LNSG<br>BKC<br>MARM<br>RTD 4158 ELOG 4162 (4)                                                                                                                                          | <b>LOG</b><br>2120 +414/+375 2158<br>3611 -1077<br>3836 -1302<br>3860 -1326<br>3872 -1338<br>4114 -1580<br>4130 -1596 | <b>SAMPLES</b> | Y=280218 X=1408664 STATE PLANE NAD<br>27 KANSAS NORTH LAT39.084069 LONG<br>-100.083732 WGS84 NAD 83<br>Spud June 12 , 2200 tooth jets on bit change<br>June 13th, June 14th Displace/Mud Up<br>3250'. :Thur June 15th drig 7 am 3625<br>topeka;Drilling with no test due to low<br>structure -8 to dry hole to south, Fair-Good<br>show H and scattered weak cuts as noted<br>on georpt plot. It was agreed by all parties<br>involved to Plugged Well. (Oil Shows on<br>chart green have visible oil and cut/Black<br>Shows on chart are flur with a milky cut no<br>visible oil show.) |







LM WHI CHLKY PXLN POR MDNS FOSINCL2NDARY GRY SH NS

SH

LM CRM TN PXLNP MOD SOFT NS

AS ABOVE

LM AA WITH FISSILE SHALES LT TO DARK GRY

LM TAN FOSS MOD BRIT TO SOFT NS

LM TAN LT CRM PXLNP BRIT NS

SHALES WITH LIME STRINGER CRM TAN NS

LIME WITH SHALE STRINGER PXLNP BRIT NS

LM CRM BRIT SST PXLNP SOME GRY SHALE NS

GRY SHALE WITH LM AS ABOVE

LM DRK TAN/BRN PXLNP NO NS

LM DRK BRN PXLN POR NO NS

OW CRM BRIT PXLN NS

OW OOLITIC INCL DNS MAS NS

A

HEEBNER BLK CARB PIECES ABNT FNT

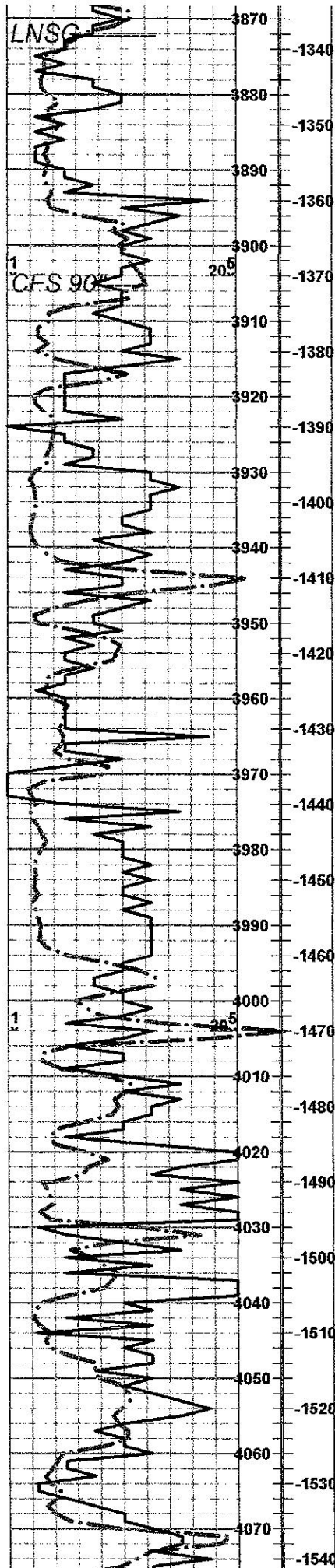
LM CRM CALC INCLSLI SUCR PXLN FLEET ODOR STAIN NS

CRM TN DNS PXLN POR VVFN YLW SAND SR SA PSORT NS  
SCAT STAIN NO NS

TN DNS W/ FOSSINCL GRY MICA SHALE

TN DNS W/ FOSSINCL GRY MICA SHALE





OW WEATH IP FEW PCS HEVY STAIN FLUR NS

CRM DNS PFNXLN DNS FUE NO

\*CFS WHT DNS SLI SCAT STAIN FLEETING ODOR DUL  
FLUR NS

SHALE GRY BLACK SOME DNS PXLN POR SST NONS

CRM DNS SCAT WEATHERING SST INCL

CRM TAN TO BRN DOLOMITIC LIME VARICOLOR LIMES  
DNS

AS ABOVE

LM CRM FINEXLN TXT DNS FOS FRAG NVS FRAG ABNT NS  
SHALE STRINGER

LIME VARI COLOR DOLOSTONE VFN SAND IN TRAY AS PS  
YEL MILKY CUT FLUR NVO

CRM/BRN DNS CHERT ABNT AND SHALE

LM SOLICIFIED OOLITIC TXT DNS TR GRN CHLORITIC INCL

OW/BRN MOTLD IP GRY LM DNS E-SOLICIFID NO NS

OW/BRN MOTLD IP GRY LM DNS E-SOLICIFID NO NS

SHOW VUGGY OW LM GOOD POR GRY CAL CLUS GOOD  
CUT. SHALY STRINGER ALSO IN SAMPLE

CRM BRN LM DNS PXNP NO SHOW

CRM BRN LM/DOL TR GRY NO SHOW

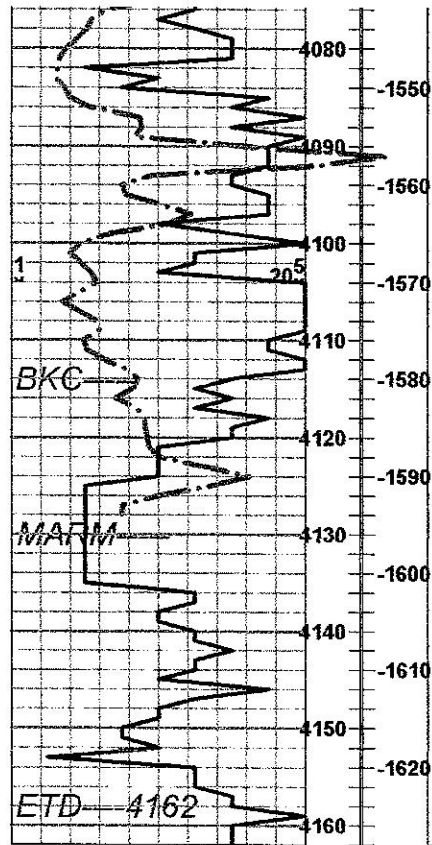
FAINT ODOR FRIABLE CRM LIME ONE OIL BEAD WITH  
CRUSH CUT IMMED WEAK MILKY POOR SHO TRACE  
SHALE

FAINT ODOR FRIABLE CRM LIME ONE OIL BEAD WITH  
CRUSH CUT IMMED WEAK MILKY POOR SHOW

SHALE LENSES W/ LIME CRM DNS

J ZONE SLI MILKY CUT WEAK WHT CRM CHLKY DNS NO  
VISIBLE OIL

LM WHT OW DNS NVP PXLNP K ZONE NO CUT AT ALL



LM WHT DNS AS ABOVE

LM/ DNS CRM OW TN PXLNP FAINT ODOR NO SHOW very shaly

LM WHT CALC IP TR MILKY CUT NO IS SHOW VERY WEAK CUT

LM VARI COLOR DNS CHRTY GRY TO TN

LM GRY OPQ DRK SST NO SHOW SOME CHERT

LM GRY OPQ DRK SST NO SHOW CHERTY

LM GRY OPQ DNS DRK GRY NO SHOW CHERT

LM GRY OPQ DNS DRK GRY NO SHOW CHERTY