Confidentiality Requested:

Yes No

#### Kansas Corporation Commission Oil & Gas Conservation Division

1361251

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:	SecTwpS. R 🗌 East 🗌 West
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet If Alternate II completion, cement circulated from: sx cmt.
□ Deepening       □ Re-perf.       □ Conv. to ENHR       □ Conv. to SWD         □ Plug Back       □ Conv. to GSW       □ Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls  Dewatering method used:
Dual Completion Permit #:	
SWD         Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	QuarterSec.         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 Approved by: Date:

1361251	

Operator Name:				_ Lease N	lame: _			Well #:	
Sec Twp	S. R	East	West	County:					
INSTRUCTIONS: Show open and closed, flowing and flow rates if gas to a	g and shut-in pressur	es, wheth	ner shut-in pre	ssure reach	ned stati	c level, hydrosta	tic pressures,		
Final Radioactivity Log, files must be submitted						gs must be ema	iled to kcc-we	ll-logs@kcc.ks.go	v. Digital electronic log
Drill Stem Tests Taken (Attach Additional Sh	neets)	Yes	s No			3	on (Top), Depth		Sample
Samples Sent to Geological	gical Survey	Yes	s 🗌 No		Nam	Э		Тор	Datum
Cores Taken Electric Log Run		Ye:							
List All E. Logs Run:									
		Renor	CASING		Ne	w Used	ion etc		
Purpose of String	Size Hole Drilled	Size	Casing (In O.D.)	Weig Lbs./	ht	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTIN	IG / SQU	EEZE RECORD			
Purpose: Perforate Protect Casing	Depth Top Bottom	Туре	e of Cement # Sacks Used Typ			Type ar	pe and Percent Additives		
Plug Back TD Plug Off Zone									
Did you portore a budrouli	o frantissina trantment on	this wall?				□ Vaa □	No (If No	akin ayaatiana 0 a	nd 2)
Did you perform a hydraulic Does the volume of the tota Was the hydraulic fracturing	al base fluid of the hydra	ulic fractur	_		-	= =	No (If No	, skip questions 2 ai , skip question 3) , fill out Page Three	
Shots Per Foot			O - Bridge Plugs ach Interval Perf				cture, Shot, Cen	nent Squeeze Recor f Material Used)	d Depth
TUBING RECORD:	Size:	Set At:		Packer At:	:	Liner Run:	Yes	No	
Date of First, Resumed P	roduction, SWD or ENHI	R.	Producing Meth  Flowing	od: Pumping	g	Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil Bb	ols.	Gas	Mcf	Wate	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITION	N OF GAS:		M	IETHOD OF	COMPLF	TION:		PRODUCTION	ON INTERVAL:
Vented Sold	Used on Lease		pen Hole	Perf.	Dually	Comp. Cor	nmingled		
(If vented, Subm	- nit ACO-18.)		ther (Specify)		(Submit A	(Sub	mit ACO-4)		

Form	ACO1 - Well Completion
Operator	Urban Oil and Gas Group LLC
Well Name	HAMANT 8X
Doc ID	1361251

# Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	3265-3268	4" HEC, 4 spf, 120 deg ph	3265-3268
	CIBP to isolate perfs	2 sxs cmt	3230
4	3156-3159	HEC gun,4 spf,90deg ph	3156-3159
	CIBP to isolate perfs 3156-59	2 sxs cmt	3130
4	2860-2863	HEC gun,4 spf,90 deg ph	2860-2863
	2860-2863	200 gals 15% NeFe acid	2860-2863

Form	ACO1 - Well Completion
Operator	Urban Oil and Gas Group LLC
Well Name	HAMANT 8X
Doc ID	1361251

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement	Type and Percent Additives
Surface	12.25	8.625	23	220	А	3% CC, 2% gel
Production	7.875	5.5	15.5	3412	Thickset/P ozmix	4%gel,Kol seal 5#/sx



TICKET NUMBER 51986

LOCATION CIPERADO FOREMAN (1994)

PO Box 884, Chanute, KS 66720 620-431-9210, or 800-467-8676

### FIELD TICKET & TREATMENT REPORT

520-431-9210 <b>(</b>	or 800-467-8676	}		CEMEN'	T			(* 15
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#### **TICKET**

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1023 Reservation Road • Hays, Kansas 67601 • (785) 625-1182

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as shot were approved.

The customer certifies that it has the full right and authority to order such work on such well and that the well in which the work is to be done by Gemini Wireline is in proper and suitable conditions for the performance of said work.

C

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1023 Receivation Road - Haye, Kansas 97601 • (785) 625-1182

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1023 Reservation Road • Hays, Kansas 57601 • (785) 625-1162

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