

Confidentiality Requested:

Yes  No

KANSAS CORPORATION COMMISSION 1367530  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
November 2016

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 Date Reached TD Completion Date or  
Recompletion Date 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: \_\_\_\_\_

1367530

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<br><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 |                              |                                  |                                 |
| Geologist Report / Mud Logs                                 | <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)*

|   |  |         |             |               |         |
|---|--|---------|-------------|---------------|---------|
| Date of first Production/Injection or Resumed Production/Injection: | 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 |

|   |   |  |
|---|---|--|
| DISPOSITION OF GAS:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<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> | PRODUCTION INTERVAL:<br>Top _____ Bottom _____ |
|---|---|--|

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record<br><i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |
|                |                 |                    |                  |                    |   |

|                |       |         |            |
|----------------|-------|---------|------------|
| TUBING RECORD: | Size: | Set At: | Packer At: |
|----------------|-------|---------|------------|



Jackman Oilfield Services

1 West Mulberry St.

Colony, KS 66015

620-852-3350

DRILLERS LOG

Lakeshore Operating, LLC

McHone LOI-2

June 22, 2017

| <u>Thickness</u><br><u>of Strata</u> | <u>Formation</u> | <u>Total</u> |
|--------------------------------------|------------------|--------------|
| 36.00                                | Soil/clay        | 36.00        |
| 7.00                                 | Lime             | 43.00        |
| 77.00                                | Sandy shale      | 120.00       |
| 78.00                                | Shale            | 198.00       |
| 54.00                                | Lime             | 252.00       |
| 10.00                                | Shale            | 262.00       |
| 216.00                               | Lime             | 478.00       |
| 17.00                                | Shale            | 495.00       |
| 25.00                                | Lime             | 520.00       |
| 11.00                                | Shale            | 531.00       |
| 83.00                                | Lime             | 614.00       |
| 7.00                                 | Shale            | 621.00       |
| 57.00                                | Lime             | 678.00       |
| 144.00                               | Shale            | 822.00       |
| 4.00                                 | Lime             | 826.00       |
| 24.00                                | Shale            | 850.00       |
| 9.00                                 | Lime             | 859.00       |
| 2.00                                 | Coal             | 861.00       |
| 17.00                                | Lime             | 878.00       |
| 9.00                                 | Shale            | 887.00       |
| 9.00                                 | Lime             | 896.00       |
| 25.00                                | Shale            | 921.00       |
| 1.00                                 | Lime             | 922.00       |
| 4.00                                 | Shale            | 926.00       |
| 12.00                                | Lime             | 938.00       |
| 8.00                                 | Shale            | 946.00       |
| 19.00                                | Lime             | 965.00       |
| 2.00                                 | Coal             | 967.00       |
| 19.00                                | Lime             | 986.00       |
| 10.00                                | Shale            | 996.00       |
| 1.00                                 | Lime             | 997.00       |
| 38.00                                | Shale            | 1,035.00     |
| 2.00                                 | Lime             | 1,037.00     |

|  |                   |          |  |  |  |
|--|-------------------|----------|--|--|--|
| 8.00   | Broken sand       | 1,045.00 |  |  |  |
| 9.00   | Oil sand          | 1,054.00 |  |  |  |
| 16.00  | Oil sand          | 1,070.00 |  |  |  |
| 0.50   | Lime              | 1,070.50 |  |  |  |
| 4.50   | Oil sand          | 1,075.00 |  |  |  |
| 0.50   | Lime              | 1,075.50 |  |  |  |
| 4.50   | Oil sand          | 1,080.00 |  |  |  |
| 8.00   | Sandy shale/shale | 1,088.00 |  |  |  |
| 19.00  | Shale             | 1,107.00 |  |  |  |
|  |                   |          |  |  |  |
|  |                   |          |  |  |  |
|  |                   |          |  |  |  |
|  |                   |          |  |  |  |
| Drilled a 9 7/8" hole to 39'7"   |                   |          |  |  |  |
| Drilled a 5 7/8" hole to 1107'   |                   |          |  |  |  |
|  |                   |          |  |  |  |
| Set 40' of 7" surface casing cemented with 10 sacks of portland cement |                   |          |  |  |  |
| Ran 1098' of 2 7/8"  |                   |          |  |  |  |
| No cores   |                   |          |  |  |  |
| No seating nipple  |                   |          |  |  |  |
| Cemented and MIT on 6/26/17  |                   |          |  |  |  |
|  |                   |          |  |  |  |
| McHone LOI-2   |                   |          |  |  |  |



REMIT TO  
 QES Pressure Pumping LLC  
 Dept:970  
 P.O.Box 4346  
 Houston, TX 77210-4346

MAIN OFFICE  
 Due 7.27 Eff June  
 P.O.Box884  
 Chanute, KS 66720  
 620/431-9210, 1-800/467-8676  
 Fax 620/431-0012

Invoice Invoice# 810577

Invoice Date: 06/27/17 Terms: Net 30 Page 1

Lakeshore Operating, LLC  
 c/o Carolyn Jergenson, CPA, LLS  
 340 S. Laura Street  
 Wichita KS 67211  
 USA  
 773-754-6242

RECEIVED  
 JUN 30 2017  
 PV.

MCHONE LOI-2  
 9308 AFE Stage 1

| Part No | Description                                | Quantity | Unit Price | Discount(%) | Total    |
|---------|--|----------|------------|-------------|----------|
| CE0450  | Cement Pump Charge 0 - 1500'               | 1.000    | 1,500.0000 | 47.000      | 795.00   |
| CE0002  | Equipment Mileage Charge - Heavy Equipment | 40.000   | 7.1500     | 47.000      | 151.58   |
| CE0711  | Minimum Cement Delivery Charge             | 1.000    | 660.0000   | 47.000      | 349.80   |
| WE0853  | 80 BBL Vacuum Truck (Cement Services)      | 3.000    | 100.0000   | 47.000      | 159.00   |
| CC5842  | Poz-Blend II A (60:40)                     | 131.000  | 14.7500    | 47.000      | 1,024.09 |
| CC5965  | Bentonite                                  | 325.000  | 0.3000     | 47.000      | 51.68    |
| CC6077  | Kolseal                                    | 655.000  | 0.5000     | 47.000      | 173.58   |
| CC6079  | PhenoSeal Formica Flakes                   | 131.000  | 1.3500     | 47.000      | 93.73    |
| CP8176  | 2 7/8" Top Rubber Plug                     | 1.000    | 45.0000    | 47.000      | 23.85    |

Subtotal 5,325.10  
 Discounted Amount 2,502.80  
 SubTotal After Discount 2,822.30

Amount Due 5,518.53 If paid after 07/27/17

Tax: 102.52  
 Total: 2,924.83



*8/31/17*  
*5/17/17*

TICKET NUMBER 50454  
LOCATION Ottawa  
FOREMAN Alan Maden

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

**WELL TICKET & TREATMENT REPORT**  
**CEMENT**

| DATE                            | CUSTOMER #              | WELL NAME & NUMBER | SECTION                          | TOWNSHIP | RANGE   | COUNTY |
|---------------------------------|-------------------------|--------------------|----------------------------------|----------|---------|--------|
| 10-26-17                        | 4807                    | McHone LDI-2       | NW 8                             | 24       | 16      | Wp     |
| CUSTOMER<br>hakeshore Operating |                         |                    | TRUCK #                          |          |         |        |
| MAILING ADDRESS<br>340 S. Laura |                         |                    | DRIVER                           |          | TRUCK # |        |
| CITY<br>Wichita                 |                         |                    | DRIVER                           |          | TRUCK # |        |
| STATE<br>KS                     |                         |                    | DRIVER                           |          | TRUCK # |        |
| ZIP CODE<br>67211               |                         |                    | DRIVER                           |          | TRUCK # |        |
| JOB TYPE<br>hangstring          | HOLE SIZE<br>5 7/8      | HOLE DEPTH<br>1107 | CASING SIZE & WEIGHT<br>2 7/8    |          |         |        |
| CASING DEPTH<br>1100            | DRILL PIPE              | TUBING             | OTHER                            |          |         |        |
| SLURRY WEIGHT                   | SLURRY VOL              | WATER gal/sk       | CEMENT LEFT in CASING <u>YES</u> |          |         |        |
| DISPLACEMENT<br>6.3             | DISPLACEMENT PSI<br>800 | MIX PSI<br>200     | RATE<br>4 bpm                    |          |         |        |

REMARKS: Hold meeting. Established rate. Mixed & pumped 100# gel followed by 131 sk Per Blend #A plus 2# gel, 5# Kpl seal & 1# RS per sack. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI for 30 minute M.T. Set float.

*Alan Maden*

| ACCOUNT CODE   | QUANTITY or UNITS | DESCRIPTION of SERVICES or PRODUCT | UNIT PRICE      | TOTAL     |
|----------------|-------------------|------------------------------------|-----------------|-----------|
| CRD450         | 1                 | PUMP CHARGE                        | 368             | 1500.00   |
| CE0002         | 40                | MILEAGE                            | 368             | 286.00    |
| CE0711         | 1                 | minimum ton                        | 548             | 660.00    |
| WED853         | 3                 | 80 gal                             | 675             | 300.00    |
|                |                   | Sub                                |                 | 2746.00   |
|                |                   | less 77%                           |                 | 1290.02   |
|                |                   |                                    |                 | 1455.98   |
| 1952<br>CE5842 | 131               | Per Blend #A                       |                 | 1932.25   |
| LL5965         | 325               | gel                                |                 | 97.50     |
| LL6077         | 655               | Kpl seal                           |                 | 327.50    |
| CC6079         | 131               | Pheno seal                         |                 | 176.85    |
| CP8176         | 1                 | 2 1/2 plug                         |                 | 45.00     |
|                |                   | Sub                                |                 | 2579.10   |
|                |                   | less 47%                           |                 | 1212.18   |
|                |                   |                                    |                 | 1366.92   |
|                |                   | 7.5%                               | SALES TAX       | 102.52    |
|                |                   |                                    | ESTIMATED TOTAL | 2924.82   |
|                |                   |                                    |                 | (5518.52) |

Revin 9737  
AUTHORIZATION *[Signature]* 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.