Confidentiality Requested:

Yes No

### Kansas Corporation Commission Oil & Gas Conservation Division

1369219

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 #	API No.:
Name:	Spot Description:
Address 1:	SecTwpS. R
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.xxxxxx)
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	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info 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. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Down't #	Chloride content:ppm Fluid volume: bbls
☐ Commingled Permit #:   Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid diagonal if hould affeite.
EOR Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date  Recompletion Date	County: Permit #:

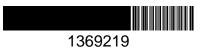
#### **AFFIDAVIT**

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:				

Page Two



Operator Name: _				Lease Name:			_ Well #:	
SecTwp	oS. R.	Eas	st West	County:				
	flowing and shu	ıt-in pressures, wh	ether shut-in pre	essure reached sta	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subr						iled to kcc-well-lo	gs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests To			Yes No		3	on (Top), Depth ar		Sample
Samples Sent to	Geological Surv	ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
List All L. Logs III	un.							
		Rej			New Used utermediate, product	ion, etc.		
Purpose of Stri			ize Casing	Weight	Setting	Type of	# Sacks	Type and Percent
	O Dri	illed S	et (In O.D.)	Lbs. / Ft.	Depth	Cement	Used	Additives
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	1		
Purpose:		epth Tyr	be of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate		Bottom				71		
Protect Cas	гD							
Plug Off Zo	ne							
2. Does the volume	of the total base fl	ing treatment on this luid of the hydraulic ent information subm	racturing treatment	_		No (If No, sk	ip questions 2 an ip question 3) out Page Three c	
Date of first Produc	tion/Injection or Re	esumed Production/	Producing Meth	nod:				
Injection:			Flowing	Pumping	Gas Lift C	Other (Explain)		
Estimated Product Per 24 Hours	ion	Oil Bbls.	Gas	Mcf W	ater B	bls. (	Gas-Oil Ratio	Gravity
DISPO	SITION OF GAS:		N	METHOD OF COMP	LETION:		PRODUCTIO	
	Sold Used	on Lease	Open Hole			mmingled mit ACO-4)	Тор	Bottom
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer	menting Squeeze	Record
						·		
TUBING RECORD	: Size:	Set A	:	Packer At:				

Form	ACO1 - Well Completion
Operator	RJ Energy, LLC
Well Name	MURROW 8-A
Doc ID	1369219

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	20	portland	5	
Production	5.625	2.875	6.5	648	portland	85	



# RJ Energy

22082 NE Neosho Rd Garnett, Kansas 66032

# Murrow 8-A

				Start	8-25-17
3	soil	3		Finish	8-28-17
6	clay/rock	9			
<b>7</b> 2	lime	81			
163	shale	244			
21	lime	265			
<b>65</b>	shale	330			
<b>30</b>	lime	360			
41	shale	401		set 20'	of 7"5sxs
21	lime	422		ran 648	3' of 2 1/8
8	shale	430		cemen	ted to surface 85sxs
6	lime	436			
100	shale	536			
2	lime	538			
83	shale	621			
3	sandy shale	624	odor		
4	bkn sand	628	good show		
4	limey dk sand	632	show		
28	shale	660	T.D		

## HAMMERSON CORPORATION

PO BOX 189 GAS, KS 66742

## **Invoice**

Date	Invoice #
9/4/2017	11255

Bill To

R.J. ENERGY LLC 22082 NE NEOSHO RD GARNETT, KS 66032

P.O. No.	Terms	Project
MURROW 8A	Due on receipt	

Quantity	Description	Rate	Amount
85	WELL MUD (\$8.00 PER SACK) COFFEY COUNTY SALES TAX (WELL MUD) TRUCKING (\$50 PER HOUR) COFFEY COUNTY SALES TAX	8.00 6.50% 50.00 6.50%	Amount  680.00 44.20 62.50 4.06
nk you for yo	ur business.	Total	\$790.76