Confidentiality Requested:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1371876

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:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxx) (e.gxxx.xxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
	Total Vertical Depth: Plug Back Total Depth:
OG GSW CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
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)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #: Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of huid disposal if hadied offshe.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R East West
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	1371876
Operator Name:	Lease Name:	Well #:
Sec TwpS. R East _ West	County:	
INSTRUCTIONS: Show important tops of formations penetrated	etail all cores Benort all final	copies of drill stems tests giving interval tested, time tool

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 T (Attach Additi			Y	les 🗌 No			og	Formatio	n (Top), Dep	oth and Datum	Sample
Samples Sent to		Survey	ΠY	es 🗌 No		Nam	е			Тор	Datum
Cores Taken Electric Log Run Geolgist Report /	-		 Y	íes No íes No íes No							
List All E. Logs R	lun:										
				CACING							
			Repo	ort all strings set-	RECORD			Used ate, productio	on, etc.		
Purpose of Str	ring	Size Hole		ze Casing		eight		Setting	Type of	# Sacks	Type and Percent
Fulpose of Su	Inny	Drilled	Se	et (In O.D.)	Lbs	s. / Ft.		Depth	Cemen	t Used	Additives
				ADDITIONA		FING / SQL	JEEZE	RECORD			
Purpose: Depth Top Bottom			Туре	ype of Cement # Sacks Used			sed Type and Percent Additives				
Perforate Top Bottom			71								
Protect Cas											
Plug Off Zo	one										
1. Did you perform	-	-				F0 000 II	0	Yes		lo, skip questions 2 a	nd 3)
 Does the volume Was the hydrauli 		-		-		-		Yes Yes		lo, skip question 3) Io, fill out Page Three	of the $A(\Omega_{-1})$
						ire registry:		les		io, illi out rage Thee	or the ACO-T)
Date of first Produce	ction/Injection	or Resumed Proc	luction/	Producing Met			- · ·				
				Flowing	Pump	oing	Gas Li	ft O	ther (Explain).		
Estimated Product Per 24 Hours	tion	Oil Bl	ols.	Gas	Mcf	Wat	ər	Bb	ls.	Gas-Oil Ratio	Gravity
DISPC	DSITION OF G	AS:			METHOD C		TION:				ON INTERVAL:
Vented	Sold U	lsed on Lease		Open Hole	Perf.		Comp		mingled	Тор	Bottom
(If vente	d, Submit ACO-	-18.)				(Submi	ACO-5	5) (Subr	nit ACO-4)		
Shots Per Foot	Perforation Top	Perforati Botton		Bridge Plug Type	Bridge P Set A			Acid,	Fracture, Sho	t, Cementing Squeeze d Kind of Material Used	Record
1001	юр	Botton	1	туре	Jei A				(Amount and	u Rinu ol malenai oseu	/

Packer At:

TUBING RECORD:

Size:

Set At:

Form	ACO1 - Well Completion
Operator	Crawford Oil LLC
Well Name	FEEBECK-THOMPSON C-1
Doc ID	1371876

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9	7	10	20	Common	3	50/50 POZ
Production	5.875	2.875	8	425	Common		Thiroblend II A/Gel

DRILL LOG

Operator License# 32834	API # 15-121-31351-00
OperatorJTC Oil, Inc.	Lease FEEBECK
Address	Well # C-1
Contractor JTC Oil, Inc.	Spud Date 9/1/17 Cement 9/5/17
Contractor License	Location of
T.D. 460 T.D. of Pipe 442	feet from
Surf. Pipe Size 7" Depth ft. 20 ft.	feet from
Kind of Well PRODUCTION	County Miami

Thickness	Strata	From	То	Thickness	Strata	From	То
2	soil	0	2	6	coal	225	231
16	clay	2	18	11	lime	231	242
37	shale	18	55	108	shale	242	350
21	lime	55	76	32 lir	ne/shale	350	382
22	shale	76	98	6 oi	l sand	382	388 broke
6	lime	98	104	<u>3 oi</u>	l sand	388	391 ok
42	shale	104	146	<u> </u>	l sand	391	394 good
14	lime	146	160	1 oi	l sand	394	395 good
36	shale	160	196	1 lir	ne	395	396
11	coal	196	207	3 oi	l sand	396	<u>399 ok</u>
18	lime	207	225	3 oi	l sand	399	402 ok

3	shale	402	405
16	lime	405	421
39	shale	421	460

		~
R	مسلا	$\mathbf{\mathcal{O}}$



TICKET NUMBER 53810 LOCATION OSTERIA KS FOREMAN Fred Made

PRESSURE PUMPING LLC PO Box 884, Chanute, KS 66720 620-451-9210 or 800-467-6578

FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER#	WELL NAME & N	UMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9.5.M	7015	Feebeck # C.		54. 29	47	22	mi
CUSTOMER	- ²		1				
	1.0 DI	Juc		TRUCK #	DRIVER	TRUCK#	DRIVER
MAILING ADDR				712	Fire Mad		
357	190 Plun	CreekRd		368	Arimes		
CITY		STATE ZIP CODE		475	Kei Dast		
Osausa	Amie.	KS 6600	9	548	Mikhaa		
JOB TYPE	mastring	HOLE SIZE 57/8	HOLE DEPTH	460	CASING SIZE & W	EIGHT 2.7/	EUE
CASING DEPTH	4256		TUBING		í.	OTHER	
SLURRY WEIG	and a second sec	SLURRY VOL	WATER gal/s	k.	CEMENT LEFT In	CASING 25	"plug
DISPLACEMEN	T 2.47.8A	DISPLACEMENT PSI	MIX PSI		RATE 3 12 B	pm	0
		to mut be. E	and the second s				n #
		Miz + Pump					
	Flake Jak.		a sline	c clean	Disclose	7%" A.66	<u> </u>
plue		+ TB. Presou	4 1	and De =	Pelance Ad	arrusa h	4
	the state	Lee. Short in	A sta	<u>a 191. p</u>	anthan pr	33078 11	
- Ser	TOATIC	WE OWN	Casory.	7			
							and the second of

ud Made

[ACCOUNT CODE	QUANITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
C	EOYOD		PUMP CHARGE	15000	
	E0002	~	MILEAGE	NIC	
C	EOTIC	& mini mom	Ton Miles Dalivary 548		
Li.	ESE63	Lhr	BO BBL Vac Track 675	10092	
			Sub Jatel	182000	
F			Jess 6020		738
t		·····			
54	LERANC	675 Ks	Thisobland I A Camer	180500	
1	15965	105	Bestmite Cal	3000	
_	6055		P.H. Flake	6500	i
	A 8176	1	25" Rubbon flug	45-	
			Sub Toral	19522	
F			Lass 602		78080
E		Ar			····
				SALES TAX	6244
Ravir	n 3737	1	<u></u>	ESTIMATED TOTAL	15736
All	THORIZTION	Aut Mo	11TLE	DATE	(39284)

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.