

Confidentiality Requested:

Yes No

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**

Form ACO-1

January 2018

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

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: _____

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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No 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:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
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: <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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Larson Engineering, Inc. dba Larson Operating Company
Well Name	PARIS 2-7
Doc ID	1371656

Tops

Name	Top	Datum
Anhydrite	2134	+666
B Anhydrite	2165	+635
Heebner Sh	3962	-1162
Lansing	4004	-1204
Stark Sh	4385	-1485
Pawnee	4487	-1687
Ft Scott	4537	-1737
Cherokee Sh	4563	-1763



CHARGE TO: Ladson Engineering
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET 30554

SERVICE LOCATIONS: Ness City KS
 WELL/PROJECT NO. 2-7 LEASE Paris COUNTY/PARISH Lane STATE KS CITY Dighton DATE 7 JUL 17 OWNER
 TICKET TYPE SERVICE SALES CONTRACTOR SOUTHWIND RIG NAME/NO. SHIPPED VIA location ORDER NO.
 WELL TYPE oil WELL CATEGORY Development JOB PURPOSE Cement surface pipe WELL PERMIT NO. WELL LOCATION 7-19-28
 REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			UM		UM		
575		1			MILEAGE TRK 114	40		mi		5.00	200.00
5765		1			Pump Charge	1		hr		800.00	800.00
325		1			Standard cement	165		sk		12.85	2021.25
279		1			Bentonite gel	300		lb	3	25.00	75.00
278		1			Calcium Chloride	350		lb	8	40.00	320.00
276		1			Floccula	25		lb		2.25	56.25
290		1			D-AIR	2		gal		42.00	84.00
581		1			Service charge	165		sk		1.50	247.50
582		1			Drayage (MTR)	16185		lb	1.24	20.00	250.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X
 DATE SIGNED TIME SIGNED 2:30 A.M. P.M.
 APPROVAL

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				4054	00
WE UNDERSTOOD AND MET YOUR NEEDS?				102	40
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				D.R.C.	3648
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				and	172
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TALD	50
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	3821

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR APPROVAL [Signature] Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 7 Jul 17 PAGE NO. 1

CUSTOMER *Laeson Engineering* WELL NO. *2-7* LEASE *PARIS* JOB TYPE *Cement Surface pipe* TICKET NO. *30554*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								<i>165 sk Standard 2% gel 3% CC 1/4" flocc</i> <i>6 joints 8 5/8" x 20" casing 264' TD=265'</i>
	<i>0130</i>							<i>on loc TER 11f</i>
	<i>0210</i>							<i>start 8 5/8" x 20" casing in well</i>
	<i>0258</i>							<i>circulate well</i>
	<i>0310</i>	<i>4</i>	<i>41</i>			<i>200</i>		<i>Mix STD 2% 3% 165 sk @ 14.7 ppg</i>
		<i>4</i>				<i>200</i>		<i>Displace w/ H₂O</i>
								<i>→ cement to surface ←</i>
	<i>0330</i>	<i>4</i>	<i>16</i>			<i>350</i>		<i>Kickout</i> <i>- look at swedges - tighten cone.</i>
	<i>0340</i>							<i>Wash truck</i> <i>{ 165 sk mixed }</i> <i>{ 40 top 7 }</i>
								<i>Rack up</i>
	<i>0420</i>							<i>job complete</i>
								<i>Thanks</i> <i>Blaino, Flint & Swatda</i>



CHARGE TO: Hanson Engineering
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET 30558

SERVICE LOCATIONS: Wes City
 WELL/PROJECT NO.:
 LEASE:
 COUNTY/PARISH: LANE STATE: KS CITY: Dighton DATE: 14 Nov 17 OWNER:
 TICKET TYPE: SERVICE SALES CONTRACTOR:
 RIG NAME/NO.:
 SHIPPED VIA: ET DELIVERED TO: location ORDER NO.:
 WELL TYPE: 0.1 WELL CATEGORY: Development JOB PURPOSE: cement log string WELL PERMIT NO.: WELL LOCATION:
 REFERRAL LOCATION: INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE TRK 114	40				5.00	200.00
578		1			Pump Charge	1				1250.00	1250.00
325		1			Standard cement (for EA-2)	200				12.25	2450.00
284		1			caseal.	900		9	sk	30.00	270.00
283		1			salt	1000				0.20	200.00
285		1			CFR-1	100				4.50	450.00
286		1			balad-1	100				8.00	800.00
277		1			Gypsumite	1400				0.75	1050.00
276		1			Floacle.	50				2.25	112.50

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 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X [Signature]
 DATE SIGNED: TIME SIGNED: A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6782.50
WE UNDERSTOOD AND MET YOUR NEEDS?				2185.25
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				8967.75
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				-896.78
ARE YOU SATISFIED WITH OUR SERVICE?				8070.97
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TAX 404.57
				TOTAL 8535.54

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.
 SWIFT OPERATOR: [Signature] APPROVAL: [Signature]
 Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. **30558**

CUSTOMER **Larsen Engineering** WELL _____ DATE **14 Jul 17** PAGE **2** OF **2**

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF			QTY	U/M	QTY	U/M		
280		1				Flocheate	500	gal			3.00	1500.00
221		1				RCL liquid		2 gal			25.00	50.00
5B1		1				SERVICE CHARGE			200	CUBIC FEET	1.50	300.00
5B3		1				MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES			
							22350	40	447		0.75	335.25

CONTINUATION TOTAL **2185.25**

JOB LOG

SWIFT Services, Inc.

DATE 14 Jul 17 PAGE NO. 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.
Laeson Engineering						Cement lay string		30558
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								200sk EA-2 cement w/ G. Granite & Floeck 4 1/2 x 11.6" 114jts 467391 sheet 41.95 PC 2092'
	0745							on loc TRK 114
	0800							Circulate - drop ball - ROTATE
	0900	5	15			200		Pump 15 bbl KCL fluid
		5	12			200		Pump Floeck 50 gal
		5	5			200		Pump 5 bbl KCL fluid spacer
			7					Plug RH - MH 30sk - 20sk
	0915	4 1/2	40			200		Mix EA-2 cement 250sk @ 15.3 ppb
	0934							Drop latch down plug wash out pump & line
	0938	6				200		Displace plug
		6	56			300		
		6	66			600		
	1000	6	71			1000		Land plug
	1003							Release pressure to truck - dried up
	1009							wash truck
								Rack up
	1040							job complete
								Blair, Phil & Isaac



CHARGE TO: Larson Engineering
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET 30707

SERVICE LOCATIONS
 1. Ness City KS
 2.
 3.
 4. REFERRAL LOCATION

WELL/PROJECT NO. #2-7
 LEASE Paris
 COUNTY/PARISH Lane
 STATE KS
 CITY Dighton
 DATE 7-20-17
 OWNER Scumie

TICKET TYPE SERVICE SALES
 CONTRACTOR Fritzer Trucking
 RIG NAME/NO.
 SHIPPED VIA CT
 DELIVERED TO Location
 ORDER NO.

WELL TYPE Oil
 WELL CATEGORY Development
 JOB PURPOSE Cement 4 1/2" Port Collar
 WELL PERMIT NO.
 WELL LOCATION Dighton - 4 1/2 s, E/W into

INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE Trk # 112			40	mi	5.00	200.00
576 D		1			Pump Charge - Port Collar	4 1/2	in	1	job	1250.00	1250.00
330		1			SMD Cement			265	bags	15.75	4173.75
276		1			Floccle	1/4	lbs	75	lbs	2.25	168.75
290		1			D-Air			3	gal	42.00	126.00
581		1			Service Charge Cement			300	bags	1.50	450.00
583		1			Drayage	29925	lbs	599	lbm	00.75	449.25

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: 7-20-17
 TIME SIGNED: 1100
 A.M.
 P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				6817.75
WE UNDERSTOOD AND MET YOUR NEEDS?				10% Disc 30%
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				5984.10
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Lane Co. TAX 7.50
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		290.23
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL
				6274.33

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: David Kuehn
 APPROVAL:
 Thank You!

JOB LOG

SWIFT Services, Inc.

DATE

7-20-17

PAGE NO.

1

CUSTOMER

Larson Engineering

WELL NO.

#2-7

LEASE

Paris

JOB TYPE

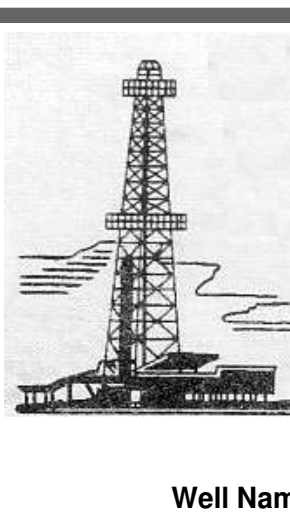
Port Collar

TICKET NO.

30707

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0900							on location 2 3/8" x 4 1/2"
								P.C. - 2092'
	0920	0	0		✓		1000	Pressure Test *Hold*
								Open P.C.
	0930	3	5		✓		300	Injection Rate
	0940	3 1/2	147		✓		400	mix 265 sks SMD w/ 1/4" Flo @ 11.2ppg circulate cement to Surface
	1015	3	7 1/2		✓		450	Displace Cement
								Close P.C.
	1020	0	0		✓		1000	Pressure Test *Hold*
								Run Sjs
	1035	3 1/2	25		✓		350	Reverse clean
								* 265 sks total *
								* 20 sks pit *
								wash up truck
	1115							Job Complete

Thank You
Dave Preston Isaac



WELLSITE GEOLOGIST'S REPORT

VERNON C. SCHRAG
CONSULTANT GEOLOGIST



Scale 1:240 (5"=100') Imperial

Well Name: **PARIS #2-7**
Location: **SE SW NW NW SEC. 07-19S-28W**
Licence Number: **API: 15-101-22595**
Spud Date: **July 06, 2017**
Surface Coordinates: **1180' FNL & 619' FWL**

Region: **Lane Co., KS**
Drilling Completed: **July 13, 2017**

Bottom Hole Coordinates:
Ground Elevation (ft): **2790'** K.B. Elevation (ft): **2800'**
Logged Interval (ft): **3800'** To: **RTD** Total Depth (ft): **4675'**
Formation: **Mississippi Dolomite**
Type of Drilling Fluid: **Chemical Premix (Displaced)**

Printed by MUD.LOG from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR:

Company: **Larson Engineering Inc.**
Address: **562 West State Road 4**
Olmitz, KS 67564-8561

DRILLING CONTRACTOR:

Southwind Drilling Co., Rig #8

DP 4.5" XH (16.6#); DC 6-1/4" x 2-3/8", 495.88, Kelly 41.00'; Tool Joint 5.5" ; Bit: Reed R22AP, 7-7/8", standard jets 14-14-14; rpm 85, WOB 35k; Kelly Bushing 10' above ground level; Bill Sanders (tool pusher), Doug Roberts (daylight driller).

CASING:

Ran 6 jts new 8-5/8" 20# R3 STC 8rd csg. Tallied 253', set @ 266' KB.

Ran 114 jts new API Tenaris N-80 R3 LTC 8rd csg. Tallied 4673.91', set @ 4672' KB.

CIRCULATION SYSTEM:

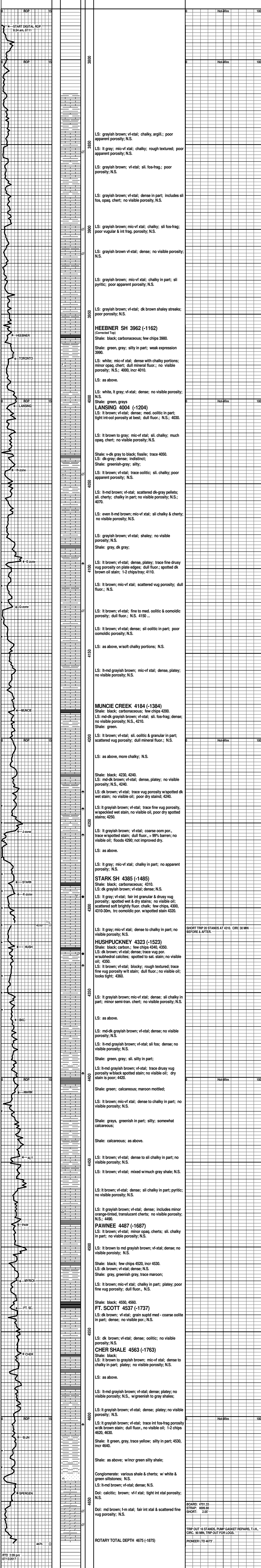
Continental EMSCO D-375, duplex, 6 x 14, 58 spm, Chemical, premix, earth pits, MudCo/Service Mud, Inc., Jason Whiting

OPEN HOLE LOGS:

DN, DI (SP), ML (stacked tools); No Sonic; 5" detail LTD-3600; 2" DI to surface casing; Pioneer Wireline, Hays, KS, LTD 4673', RTD 4675'.

DRILL STEM TESTS:

None.



BOARD: 4701.33
STRAP: 4699.88
SHORT: 2.05'
TRIP OUT 16 STANDS, PUMP GASKET REPAIRS, T.J.H., CIRC. 90 MIN, TRIP OUT FOR LOGS.
PIONEER LTD 4673'

RTD 2:09 pm
07/13/2017