

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 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 |
|--|---|

| 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) (Submit ACO-4)</i> | PRODUCTION INTERVAL: Top Bottom |
|---|--|------------------------------------|

| 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: | |
|----------------|-------|---------|------------|--|



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

TICKET 30674

SERVICE LOCATIONS: 1. Wyo City KS WELL/PROJECT NO. 1-340440 LEASE Wittle COUNTY/PARISH Lane STATE KS CITY Dighton DATE 14 SEP 17 OWNER _____
 2. TICKET TYPE SERVICE SALES CONTRACTOR _____ RIG NAME/NO. _____ SHIPPED WCT DELIVERED TO location ORDER NO. _____
 3. WELL TYPE 0.1 WELL CATEGORY WILD WEST DEVELOPMENT JOB PURPOSE cement port collar WELL PERMIT NO. _____ WELL LOCATION 34-28-29
 4. REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY. | | UM | | UNIT PRICE | AMOUNT |
|-----------------|-------------------------------------|------------|------|----|---------------------------|------|--|-------|-----------|------------|---------|
| | | LOC | ACCT | DF | | | | | | | |
| 575 | | 1 | | | MILEAGE TRK 10 | 40 | | mi | | 5.00 | 200.00 |
| 576 | | 1 | | | Pump Charge - Port Collar | 100 | | 4 1/2 | in | | 1250.00 |
| 330 | | 1 | | | SWD cement | 275 | | sk | | 15.75 | 4331.25 |
| 276 | | 1 | | | Fluore | 75 | | lb | | 2.25 | 168.75 |
| 275 | | 1 | | | cotton seed hulls | 1 | | sk | | 30.00 | 30.00 |
| 290 | | 1 | | | D-AIR | 2 | | gal | | 42.00 | 84.00 |
| 581 | | 1 | | | Service charge | 400 | | sk | | 1.50 | 600.00 |
| 583 | | 1 | | | Drayage | 394 | | lb | 796.08 TM | 0.75 | 597.06 |

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 _____ A.M. P.M.
 11:35

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? | | | | 7261.06 | |
| WE UNDERSTOOD AND MET YOUR NEEDS? | | | | 102.00 | |
| OUR SERVICE WAS PERFORMED WITHOUT DELAY? | | | | 50.00 | 6534.95 |
| WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? | | | | Lane Co TAX 7.50 | 311.45 |
| ARE YOU SATISFIED WITH OUR SERVICE? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | | TOTAL | 6846.40 |

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket
 SWIFT OPERATOR BBell APPROVAL _____
 Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 14 SEP 17 PAGE NO. 1

CUSTOMER *Laason Engineering* WELL NO. *1-34 aww0* LEASE *Locille* JOB TYPE *Cement port collar* TICKET NO. *30674*

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | | PRESSURE (PSI) | | DESCRIPTION OF OPERATION AND MATERIALS |
|-----------|-------------|--------------|--------------------|-------|---|----------------|-------------|--|
| | | | | T | C | TUBING | CASING | |
| | | | | | | | | <i>400 sk SMD cement w/ 1/4" floccle 2 3/4" port collar - 2100'</i> |
| | <i>0900</i> | | | | | | | <i>on location TRX 110 HT-400 maintenance</i> |
| | <i>1002</i> | | | | | <i>1000</i> | <i>1000</i> | <i>test to 1000 psi - held open port collar</i> |
| | <i>1009</i> | <i>2</i> | <i>3</i> | | | <i>300</i> | | <i>inj rate 2 1/2 @ 300</i> |
| | <i>1014</i> | <i>4 1/2</i> | | | | <i>400</i> | | <i>mix SMD cement @ 11.2 ppg - mix in 1st wells - - fluid to surface -</i> |
| | | <i>4</i> | <i>36</i> | | | <i>500</i> | | |
| | <i>1048</i> | <i>3 1/2</i> | <i>150</i> | | | <i>500</i> | | <i>→ cement to surface ← { 275 sk mixed 15 to pit }</i> |
| | | | <i>7</i> | | | | | <i>Displace w/ H₂O</i> |
| | <i>1056</i> | | | | | | | <i>close port collar test to 1000 psi - held Run 5 jts</i> |
| | <i>1104</i> | | <i>20</i> | | | | | <i>Reverse hole clean - 2 cement flags -</i> |
| | <i>1117</i> | | | | | | | <i>wash truck Pack up</i> |
| | <i>1145</i> | | | | | | | <i>job complete Thanks Blaine, Phil & Isaac</i> |



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

TICKET 30668

SERVICE LOCATIONS: 1. Neosho City, KS
 WELL/PROJECT NO.: 1-34 OWWO LEASE: Lucille COUNTY/PARISH: Lane STATE: KS CITY: Dighton DATE: 7 SEP 17 OWNER: _____
 2. TICKET TYPE: SERVICE SALES CONTRACTOR: _____ RIG NAME/NO.: _____ SHIPPED VIA: ET DELIVERED TO: location ORDER NO.: _____
 3. WELL TYPE: oil WELL CATEGORY: Developments JOB PURPOSE: cement long string 4 1/2" WELL PERMIT NO.: _____ WELL LOCATION: 34-18-29
 4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | ACCOUNTING | | | DESCRIPTION | QTY. | | UNIT PRICE | | AMOUNT | |
|-----------------|-------------------------------------|------------|------|----|-------------------------|------|-----|------------|---------|---------|--------|
| | | LOC | ACCT | DF | | | UM | | | | |
| 575 | | | | | MILEAGE | 90 | mi | | 5.00 | 200.00 | |
| 578 | | | | | Pump Charge long string | 1 | ea | | 1250.00 | 1250.00 | |
| 325 | | | | | Standard cement | 200 | sk | | 12.25 | 2450.00 | |
| 284 | | | | | Calseal | 900 | lb | 9 | sk | 30.00 | 270.00 |
| 283 | | | | | salts | 1000 | lb | | 0.20 | 200.00 | |
| 292 | | | | | Weld 322 | 200 | lb | | 8.00 | 1600.00 | |
| 277 | | | | | Gilsonite | 1400 | lb | | 0.75 | 1050.00 | |
| 276 | | | | | Flare | 25 | lb | | 2.25 | 56.25 | |
| 290 | | | | | D-AIR | 2 | gal | | 42.00 | 84.00 | |

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 [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? | | | | 9545.13 |
| WE UNDERSTOOD AND MET YOUR NEEDS? | | | | -954.51 |
| OUR SERVICE WAS PERFORMED WITHOUT DELAY? | | | | 10% DRG |
| WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? | | | | SAH |
| ARE YOU SATISFIED WITH OUR SERVICE? | | | | 8590.62 |
| | | | | LANE O. TAX |
| | | | | 7-570 |
| | | | | 500.19 |
| TOTAL | | | | 9090.81 |

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



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

TICKET CONTINUATION

TICKET No. 30668

CUSTOMER *Larson Engineering* WELW *Lucille 1-34 ownrd* DATE *7 Sep 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 | | |
| <i>280</i> | | <i>1</i> | | | | <i>Fld check 21</i> | <i>500</i> | <i>gal</i> | | | <i>3.00</i> | <i>1500.00</i> |
| <i>221</i> | | <i>1</i> | | | | <i>KCL liquid</i> | <i>2</i> | <i>gal</i> | | | <i>25.00</i> | <i>50.00</i> |
| <i>419</i> | | <i>1</i> | | | | <i>Rotating head rental</i> | <i>4 1/2</i> | <i>in</i> | | | <i>200.00</i> | <i>200.00</i> |
| <i>581</i> | | <i>1</i> | | | | SERVICE CHARGE | | | | | <i>1.50</i> | <i>300.00</i> |
| <i>583</i> | | <i>1</i> | | | | MILEAGE CHARGE | | | | | <i>0.75</i> | <i>334.88</i> |
| | | | | | | TOTAL WEIGHT | <i>22,325</i> | | | | | |
| | | | | | | LOADED MILES | <i>40</i> | | | | | |
| | | | | | | TON MILES | <i>446.50</i> | | | | | |

CONTINUATION TOTAL

JOB LOG

SWIFT Services, Inc.

DATE 7 SEP 17 PAGE NO. 1

CUSTOMER *Larsen Engineering* WELL NO. *1-3400WD* LEASE *Loaile* JOB TYPE *Convent long string* TICKET NO. *30668*

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | | PRESSURE (PSI) | | DESCRIPTION OF OPERATION AND MATERIALS |
|-----------|------|------------|--------------------|-------|---|----------------|--------|--|
| | | | | T | C | TUBING | CASING | |
| | | | | | | | | 200 SK STANDARD cement w/ <i>silicate</i> <i>salt, colson & hpl 302</i> |
| | | | | | | | | 4 1/2 x 110 jts 4624' string 43.2 TD-4627 PC-2099 |
| | 0500 | | | | | | | on loc TRK 114 |
| | 0600 | | | | | | | Running 4 1/2 casing Drop ball - circulate - ROTATE |
| | 0712 | 3 1/2 | 15 | | | | 200 | Pump 15 bbl KCL flush |
| | | 3 1/2 | 12 | | | | 200 | Pump 500 gal flocheck |
| | | 3 1/2 | 5 | | | | 200 | Pump 5 bbl KCL flush |
| | 0720 | | 7 | | | | | Plug RH - MH 20sk - 20sk |
| | 0735 | 4 | 40 | | | | 200 | Mix STD cement 150sk @ 15.3 ppg |
| | | | | | | | | Drop latch down plug wash OUT P & L line |
| | 0748 | 6 1/2 | | | | | 200 | Displace plug |
| | 0800 | 6 1/2 | 65 | | | | 600 | Land plug |
| | | 6 1/2 | 70 | | | | 1500 | |
| | | | | | | | | Release pressure to truck - drill up |
| | 0805 | | | | | | | wash truck |
| | | | | | | | | Rack up |
| | 0830 | | | | | | | job complete Blaine, Flint, & search |