

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 Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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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	Lotus Operating Company, L.L.C.
Well Name	RON PIESTER 1
Doc ID	1388670

All Electric Logs Run

Dual Induction
Neutron Density
Frac log
Micro log
Sonic



DRILL STEM TEST REPORT

Prepared For: **Lotus Operating Co**

100 S Main Ste 420
Wichita, KS 67202

ATTN: Tim Hellman

1 Ron Piester

14-29S-16W Kiowa

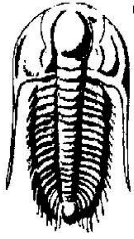
Start Date: 2017.10.13 @ 12:49:41

End Date: 2017.10.13 @ 19:44:11

Job Ticket #: 57837 **DST #: 1**

Trilobite Testing, Inc
PO Box 362 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

Printed: 2017.10.14 @ 14:54:24



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Lotus Operating Co
 100 S Main Ste 420
 Wichita, KS 67202
 ATTN: Tim Hellman

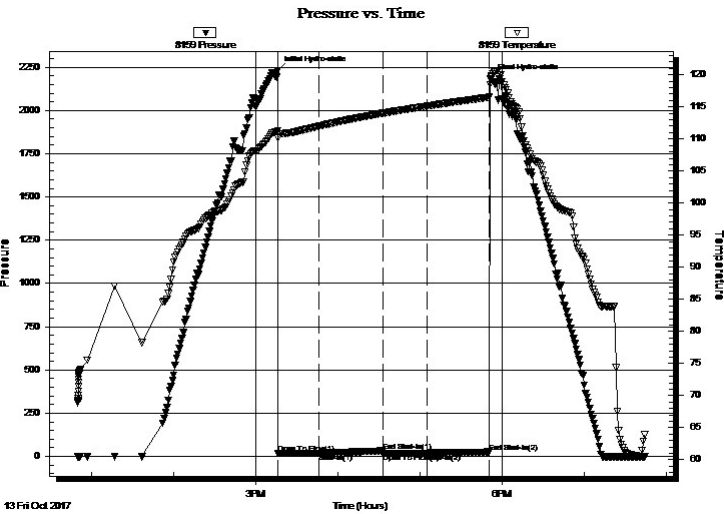
14-29S-16W Kiowa
1 Ron Piester
 Job Ticket: 57837 **DST#: 1**
 Test Start: 2017.10.13 @ 12:49:41

GENERAL INFORMATION:

Formation: **Marmaton**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 15:16:11
 Time Test Ended: 19:44:11
 Interval: **4530.00 ft (KB) To 4635.00 ft (KB) (TVD)**
 Total Depth: 4635.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Leal Cason
 Unit No: 74
 Reference Elevations: 2035.00 ft (KB)
 2027.00 ft (CF)
 KB to GR/CF: 8.00 ft

Serial #: 8159 Inside
 Press@RunDepth: 19.84 psig @ 4532.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2017.10.13 End Date: 2017.10.13 Last Calib.: 2017.10.13
 Start Time: 12:49:42 End Time: 19:44:11 Time On Btm: 2017.10.13 @ 15:15:56
 Time Off Btm: 2017.10.13 @ 17:51:41

TEST COMMENT: IF: Weak 1/2 inch Blow
 IS: No Blow Back
 FF: No Blow
 FS: No Blow Back



PRESSURE SUMMARY

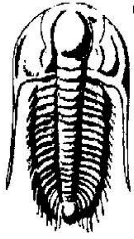
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2231.64	111.26	Initial Hydro-static
1	17.77	110.25	Open To Flow (1)
31	18.88	111.98	Shut-In(1)
77	30.86	114.02	End Shut-In(1)
77	19.73	113.99	Open To Flow (2)
110	19.84	115.12	Shut-In(2)
155	26.52	116.50	End Shut-In(2)
156	2185.46	119.64	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
5.00	Mud	0.07

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lotus Operating Co

14-29S-16W Kiowa

100 S Main Ste 420
Wichita, KS 67202

1 Ron Piester

Job Ticket: 57837

DST#: 1

ATTN: Tim Hellman

Test Start: 2017.10.13 @ 12:49:41

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 10.39 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 6000.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
5.00	Mud	0.070

Total Length: 5.00 ft Total Volume: 0.070 bbl

Num Fluid Samples: 0

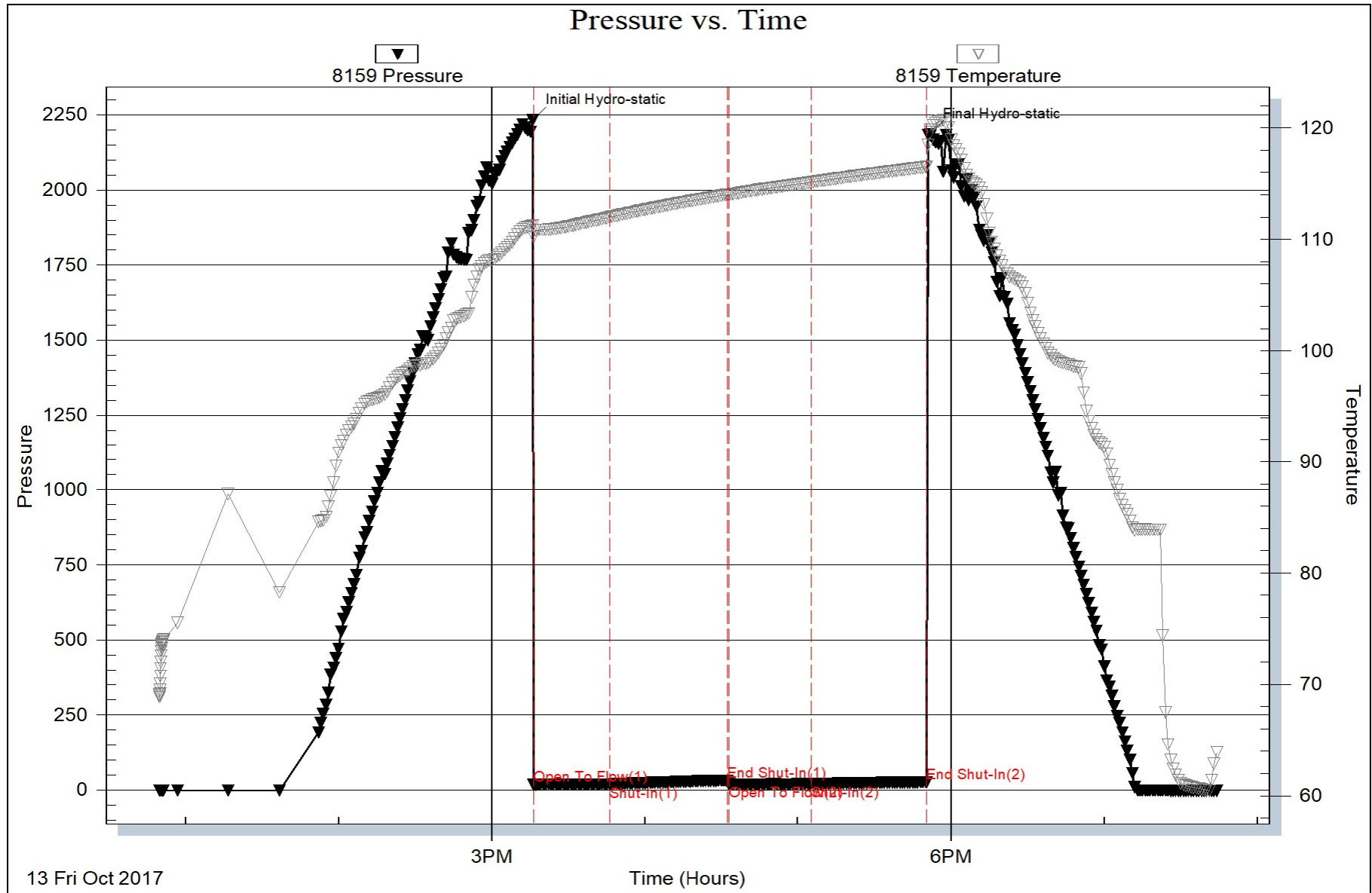
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:





DRILL STEM TEST REPORT

Prepared For: **Lotus Operating Co**

100 S Main Ste 420
Wichita, KS 67202

ATTN: Tim Hellman

1 Ron Piester

14-29S-16W Kiowa

Start Date: 2017.10.14 @ 05:15:22

End Date: 2017.10.14 @ 14:33:22

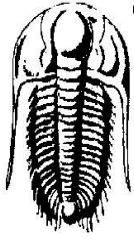
Job Ticket #: 57838 **DST #: 2**

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2017.10.14 @ 14:53:40



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Lotus Operating Co
 100 S Main Ste 420
 Wichita, KS 67202
 ATTN: Tim Hellman

14-29S-16W Kiowa
1 Ron Piester
 Job Ticket: 57838 **DST#: 2**
 Test Start: 2017.10.14 @ 05:15:22

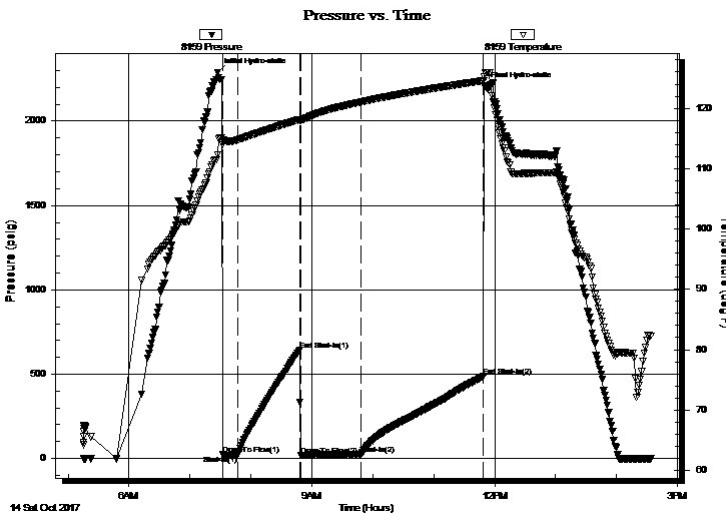
GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Reset)
 Time Tool Opened: 07:32:07 Tester: Leal Cason
 Time Test Ended: 14:33:22 Unit No: 74
 Interval: **4658.00 ft (KB) To 4700.00 ft (KB) (TVD)** Reference Elevations: 2035.00 ft (KB)
 Total Depth: 4700.00 ft (KB) (TVD) 2027.00 ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Good KB to GR/CF: 8.00 ft

Serial #: 8159 Inside
 Press@RunDepth: 23.87 psig @ 4659.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2017.10.14 End Date: 2017.10.14 Last Calib.: 2017.10.14
 Start Time: 05:15:23 End Time: 14:33:22 Time On Btm: 2017.10.14 @ 07:27:07
 Time Off Btm: 2017.10.14 @ 11:49:37

TEST COMMENT: IF: Fair Blow , BOB in 12 minutes
 IS: Weak Surface Blow Back
 FF: Strong Blow , BOB in 10 seconds
 FS: 1/2 inch Blow Back

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2289.01	112.25	Initial Hydro-static
5	24.95	113.94	Open To Flow (1)
21	17.29	114.77	Shut-In(1)
81	642.76	118.16	End Shut-In(1)
82	18.11	118.03	Open To Flow (2)
142	23.87	121.03	Shut-In(2)
262	486.31	124.56	End Shut-In(2)
263	2207.53	125.23	Final Hydro-static

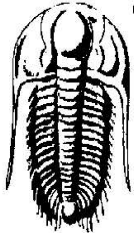
Recovery

Length (ft)	Description	Volume (bbl)
0.00	950 GIP	0.00
42.00	GOCM 2%G 10%O 88%M	0.59

* Recovery from multiple tests

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Lotus Operating Co

14-29S-16W Kiowa

100 S Main Ste 420
Wichita, KS 67202

1 Ron Piester

Job Ticket: 57838

DST#: 2

ATTN: Tim Hellman

Test Start: 2017.10.14 @ 05:15:22

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 10.38 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 6000.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	950 GIP	0.000
42.00	GOCM 2%G 10%O 88%M	0.589

Total Length: 42.00 ft Total Volume: 0.589 bbl

Num Fluid Samples: 0

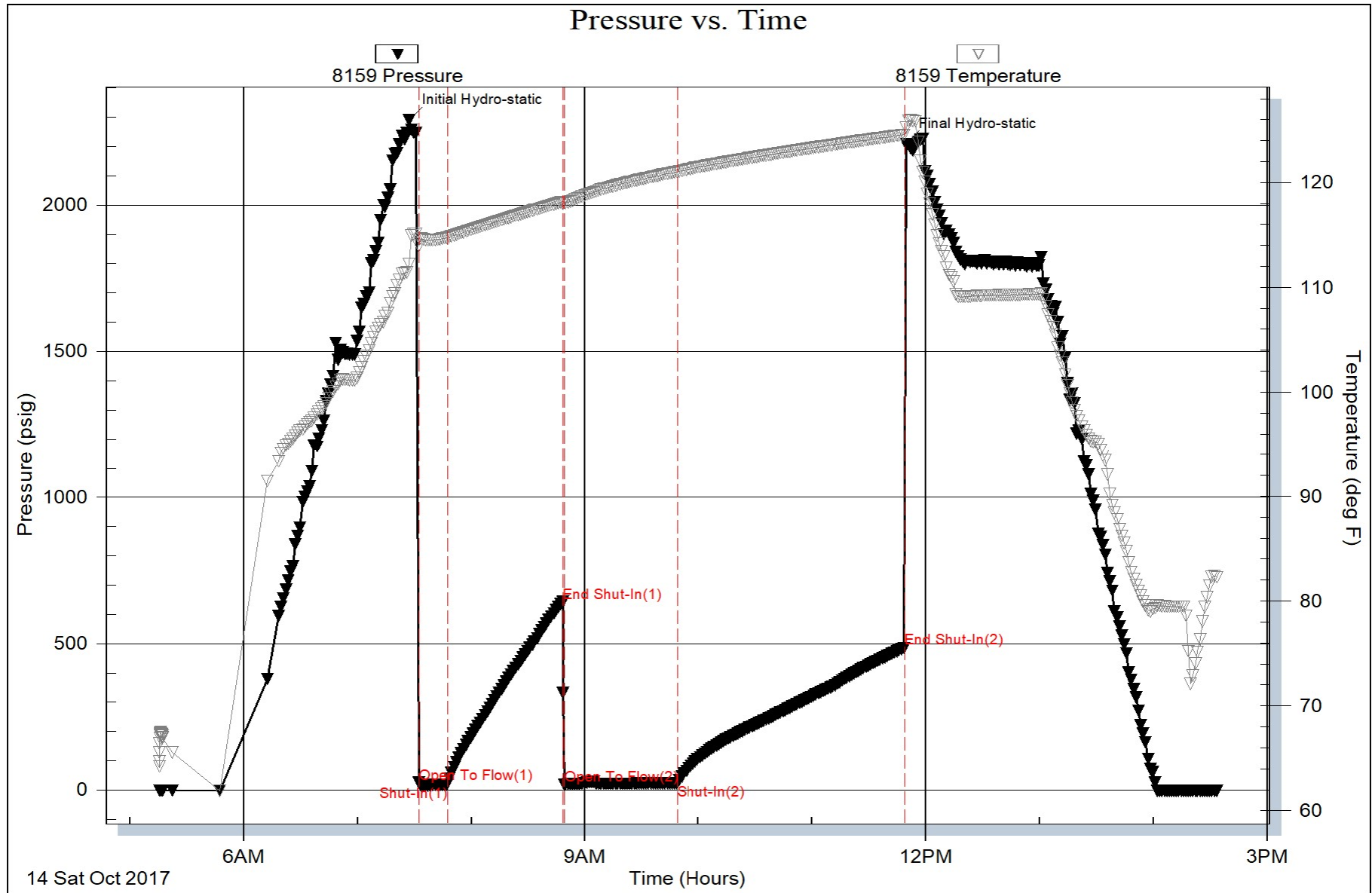
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



AP Copy



PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002427	1718	10/09/2017
INVOICE NUMBER			
92538466			

Pratt (620) 672-1201
 B LOTUS OPERATING CO. LLC
 I 100 S MAIN ST STE 420
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Ron Piester #1
 O LOCATION
 B COUNTY Kiowa
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T JOB CONTACT
 E

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41060955	86779		Net - 30 days	11/08/2017

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 10/07/2017 to 10/07/2017</i>				
0041060955				
171815510A Cement-New Well Casing/Pi 10/07/2017 Cement 8 5/8" Surface Casing				
60/40 POZ	225.00	EA	5.64	1,269.00 T
Calcium Chloride	582.00	EA	0.49	287.22 T
Celloflake	57.00	EA	1.74	99.12 T
"Unit Mileage Chg (PU, cars one way)"	30.00	MI	2.12	63.45
Heavy Equipment Mileage	60.00	MI	3.53	211.50
Proppant & Bulk Del. Chgs., per ton mil	291.00	EA	1.17	341.92
Depth Charge; 0-500'	1.00	EA	470.00	470.00
Blending & Mixing Service Charge	225.00	BAG	0.66	148.05
"Service Supervisor, first 8 hrs on loc.	1.00	EA	82.26	82.26

GL# 9208
 DESC. Cement
Surface csg
 WELL # Piester

ENTERED
 OCT 19 2017

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	2,972.52
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	124.15
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	3,096.67
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		

Customer 10155 OPERATING COMPANY		Lease No.	Date 10-7-17		
Lease Rou Piesner		Well # 1			
Field Order # 15510	Station PIATT	Casing 8 5/8	Depth 263	County HIOWAY	State MS
Type Job Z-412 8 5/8 SURFACE	Formation	Legal Description 14-295-16			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 5/8	Tubing Size	Shots/Ft		Acid 225 SWS	60/40 POZ	RATE	PRESS	ISIP
Depth 263	Depth	From	To	Pre Pad 3% CC	Max 90 gal		.25 PSI	5 Min. CF
Volume 16.7	Volume	From	To	Pad	Min			10 Min.
Max Press 300	Max Press	From	To	Frac	Avg			15 Min.
Well Connection SV	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth 243	Packer Depth	From	To	Flush 15	Gas Volume			Total Load

Customer Representative Tim Hellman	Station Manager Westerman	Treater MATTAL
--	------------------------------	-------------------

Service Units 83353	78982	86779	70959	19862
Driver Names MATTAL	GARRIN		OSBORN	

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
11:15					ON LOCATION / SAFETY MEETING
1:45					RUN 8 5/8 CSNG
2:45					CSNG ON BOTTOM
2:50					HOOK TO CSNG / BREAK CIRC W. RIG
3:05	200		3	5	PUMP 3 BBL WATER
3:07	200		48	5	MIX 225 SWS 60/40 POZ
3:18	200			4	START DISPLACEMENT
3:23			15		PLUG DOWN / SHUT IN WELL
					CAT TO SURFACE
					JOB COMPLETE
					THANK YOU!
					MIKE MATTAL
					SCOTT + RILEY

AP COPY



RECEIVED
OCT 20 2017

PAGE	CUST NO	YARD #	INVOICE DATE
1 of 1	1002427	1718	10/18/2017
INVOICE NUMBER			
92546998			

Pratt (620) 672-1201
 B LOTUS OPERATING CO. LLC
 I 100 S MAIN ST STE 420
 L WICHITA
 L KS US 67202
 T
 O ATTN: ACCOUNTS PAYABLE

J LEASE NAME Ron Piester #1
 O LOCATION
 B COUNTY Kiowa
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
41063304	86779		Net - 30 days	11/17/2017

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 10/16/2017 to 10/16/2017</i>				
0041063304				
171813995A Cement-New Well Casing/Pi 10/16/2017 Cement-5 1/2' Longstring				
AA2 Cement	150.00	EA	7.99	1,198.50 T
60/40 POZ	30.00	EA	5.64	169.20 T
Cement Gel	52.00	EA	0.12	6.11 T
Celloflake	38.00	EA	1.74	66.08 T
C-41P	36.00	EA	1.88	67.68 T
Salt	795.00	EA	0.23	186.82 T
FLA-322	113.00	EA	3.52	398.32 T
Gilsonite	751.00	EA	0.31	236.49 T
"Auto Fill Float Shoe 5 1/2" (Blue)"	1.00	EA	169.20	169.20
"Latch Down Plug & Baffle, 5 1/2" (Blu	1.00	EA	188.00	188.00
"5 1/2" Basket (Blue)"	1.00	EA	136.30	136.30
"Turbolizer, 5 1/2" (Blue)"	4.00	EA	51.70	206.80
Mud Flush	500.00	EA	0.71	352.50 T
"Unit Mileage Chg (PU, cars one way)"	30.00	MI	2.12	63.45
Heavy Equipment Mileage	60.00	MI	3.53	211.50
251 Prop & Bulk Del. Chgs per ton mil	1.00	EA	294.35	294.35
Depth Charge; 4001'-5000'	1.00	EA	1,184.40	1,184.40
Blending & Mixing Service Charge	180.00	BAG	0.66	118.44
"Service Supervisor, first 8 hrs on loc.	1.00	EA	82.25	82.25
Plug Container Util. Chg.	1.00	EA	117.50	117.50
GL# <u>9308</u> DESC. <u>Cement</u> <u>prod csg, 10/16</u> WELL # <u>Piester</u>				

ENTERED
OCT 30 2017

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	5,453.89
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	201.13
PO BOX 841903	801 CHERRY ST, STE 2100	INVOICE TOTAL	5,655.02
DALLAS, TX 75284-1903	FORT WORTH, TX 76102		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

TTM 26
FIELD SERVICE TICKET
1718 13995 A

DATE _____ TICKET NO. _____

DATE OF JOB 10/16/17	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.
CUSTOMER Lotus Operating Company	LEASE Ron Piester	WELL NO. 1					
ADDRESS	COUNTY Kiowa	STATE KS					
CITY	STATE	SERVICE CREW Scott, Mattal, Riley					
AUTHORIZED BY Robin Brown	JOB TYPE: 5 1/2 Long string 242						
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE AM PM TIME
86779 X	1						10/16/17 AM 5:20
73768 X	25						10/16/17 AM 9:12
							10/16/17 AM 10:15
							10/16/17 AM 10:45
						MILES FROM STATION TO WELL	

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: Robin Brown
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105	AA2 Cement	SK	150		2550.00
CP103	60/40 POZ	SK	30		360.00
CC200	Cement Gel	lb	52		13.00
CC102	Celloflake	lb	38		140.60
CC105	C-41P	lb	36		144.00
CC111	SuH	lb	795		397.50
CC129	FIA-322	lb	113		847.50
CC201	Gilsonite	lb	751		503.17
CF1251	Auto Fill Flood Shoe 5 1/2	Ea	1		360.00
CF607	Latch Down Plug + Buffalo	Ea	1		400.00
CF1901	5 1/2 Basket	Ea	1		290.00
CF1651	Turbolizers 5 1/2	Ea	4		440.00
CC151	Mud Flush	Gal	500		750.00
E100	Unit Mileage Pick up	MI	30		135.00
E101	Heavy Equipment Mileage	MI	60		450.00
E113	Prop & Bulk Delivery	TM	251		676.25
CE205	Depth charge 4001-5000'	4hs	1		2520.00
CE240	Blending & Mixing	SK	180		252.00
5003	Service Supervisor	FC	1		175.00
CE504	Plug Container Utilization	Job	1		250.00
SUB-TOTAL					11,604.02

CHEMICAL/ACID DATA:

SERVICE & EQUIPMENT %TAX ON \$
MATERIALS %TAX ON \$

TOTAL 5453.89
J.W.

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <u>Robin Brown</u> (WELL OWNER OPERATOR CONTRACTOR OR AGENT)
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FIELD SERVICE ORDER NO.

Customer <i>Lotus Operating Camp</i>		Lease No.		Date <i>10/16/17</i>	
Lease) <i>Ron Piester</i>		Well # <i>1</i>			
Field Order # <i>13995 A</i>	Station <i>Pratt KS</i>	Casing <i>5 1/2</i>	Depth <i>4998.34</i>	County <i>Kiowa</i>	State <i>KS</i>
Type Job <i>5 1/2 Long string</i>	242		Formation	Legal Description <i>14-29-16</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
<i>5 1/2 170</i>				Acid				
Depth <i>4998.34</i>	Depth	From	To	Pre Pad	Max			5 Min.
Volume <i>115.9615</i>	Volume	From	To	Pad	Min			10 Min.
Max Press <i>2000</i>	Max Press	From	To	Frac	Avg			15 Min.
Well Connection <i>5 1/2</i>	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume			Total Load

Customer Representative <i>Robin Brown</i>			Station Manager <i>Justin Westerman</i>			Treater <i>Scott Graves</i>		
Service Units	<i>38950</i>	<i>78982</i>	<i>86779</i>	<i>19889</i>	<i>73768</i>			
Driver Names	<i>Scott</i>	<i>Mattal</i>	<i>-</i>	<i>P. Ivy</i>	<i>-</i>			

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>5:20</i>					<i>On location Safety Meeting Rig up</i>
<i>6:00</i>					<i>Run Float Equipment Turbols 1.5, 15, 20</i>
					<i>Basket # 11</i>
<i>8:50</i>					<i>Break Circulation</i>
<i>9:17</i>	<i>300</i>			<i>5.3</i>	<i>Pump H2O spacer</i>
<i>9:13</i>	<i>300</i>		<i>5</i>	<i>5.3</i>	<i>Pump Mud Flush 500 gallons</i>
<i>9:16</i>	<i>300</i>		<i>12</i>	<i>5.3</i>	<i>Pump H2O Spacer</i>
<i>9:17</i>	<i>450</i>		<i>5</i>	<i>5.3</i>	<i>Start cement 150 sks AA2 14.87</i>
<i>9:25</i>	<i>Ø</i>		<i>39.5</i>	<i>Ø</i>	<i>Shut down</i>
<i>9:26</i>	<i>Ø</i>				<i>wash Pump + lines clean</i>
<i>9:28</i>	<i>Ø</i>				<i>Release Plug</i>
<i>9:29</i>	<i>200</i>			<i>7.6</i>	<i>start Displacement</i>
<i>9:40</i>	<i>500</i>		<i>8.3</i>	<i>7.6</i>	<i>1st Pressure</i>
<i>9:45</i>	<i>450</i>		<i>17</i>	<i>3.5</i>	<i>Reduce Rate</i>
<i>9:48</i>	<i>650</i>		<i>12</i>	<i>3.5</i>	<i>Plug landed</i>
<i>9:50</i>	<i>1500</i>		<i>.5</i>	<i>3</i>	<i>Pressure up on plug Did not hold</i>
<i>9:51</i>					<i>Release Pressure No Returns</i>
<i>9:55</i>	<i>Ø</i>			<i>3</i>	<i>Plug Put back 30 sks 60/10 202</i>
			<i>30</i>		<i>wash up Equipment</i>
					<i>Job Complete</i>

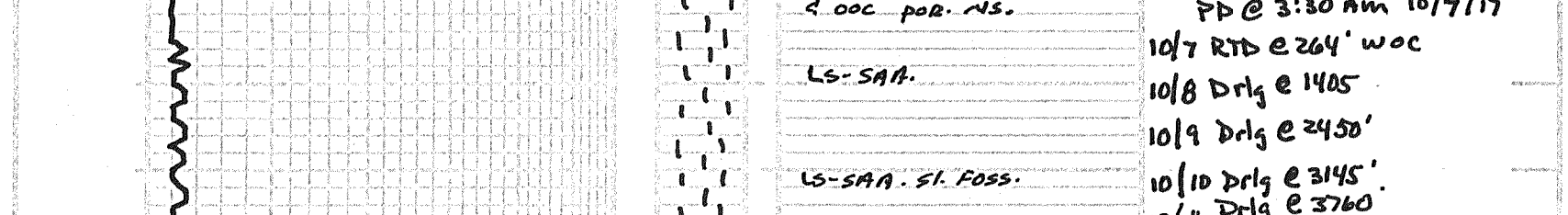
LOTUS OPERATING CO. LLC
ELEVATION: KB 2035
REL. 2027

LEASE #1 Row Piester
FIELD 1165 FSL 1610 FWL
LOCALITY TRIP 293 RING 16W
COUNTY KIOWA STATE KS
CONTRACTOR Dole Drags Rig 2
SPUD 10/16/2017
COMPLETION 10/16/2017
DISTANCE 3589' TIME 14:00
FORMATION YORK & STRUCTURAL POSITION
Mudco
Micro of Fe. Sodic
NID w/ Fe. Sodic

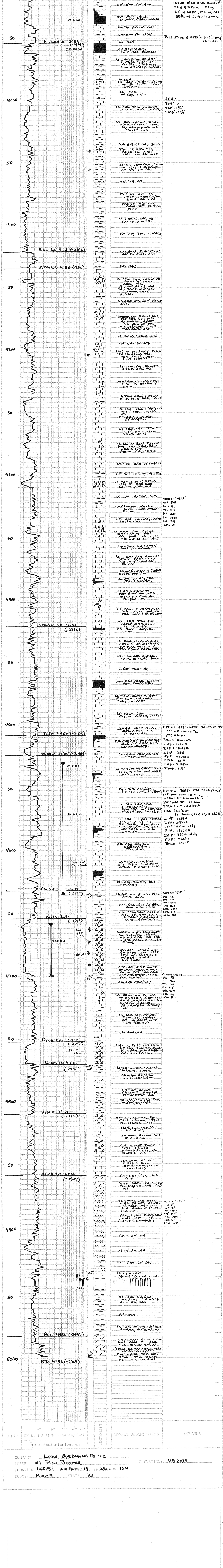
FORMATION	THICKNESS	PERCENTAGE
HEBERER	3954	-1919
BEAL LN	4121	-2095
LAWSIAK	4135	-2116
MAHON	4158	-2146
CH SHALE	4154	-2146
VIAS	4152	-2146
VIAS SH	4170	-2164
VIAS SH	4180	-2174
VIAS SH	4181	-2175
VIAS SH	4182	-2176
VIAS SH	4183	-2177
VIAS SH	4184	-2178
VIAS SH	4185	-2179
VIAS SH	4186	-2180
VIAS SH	4187	-2181
VIAS SH	4188	-2182
VIAS SH	4189	-2183
VIAS SH	4190	-2184
VIAS SH	4191	-2185
VIAS SH	4192	-2186
VIAS SH	4193	-2187
VIAS SH	4194	-2188
VIAS SH	4195	-2189
VIAS SH	4196	-2190
VIAS SH	4197	-2191
VIAS SH	4198	-2192
VIAS SH	4199	-2193
VIAS SH	4200	-2194

REMARKS: It is recommended to set pipe on the Miss chart due to the positive DST, sample shows and log calculations and further test the Miss through perforations and necessary acid and fracture treatments.

LEGEND



SCALE = 100'



COMPANY Lotus Operating Co LLC
LEASE #1 Row Piester
LOCATION 1165 FSL 1610 FWL TRIP 293 RING 16W
COUNTY KIOWA STATE KS
ELEVATION: KB 2035

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
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<http://kcc.ks.gov>

Shari Feist Albrecht, Chair
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Governor Jeff Colyer, M.D.

February 14, 2018

Tim Hellman
Lotus Operating Company, L.L.C.
100 S Main St, Ste 420
Wichita, KS 67202-3737

Re: ACO-1
API 15-097-21828-00-00
RON PIESTER 1
SW/4 Sec.14-29S-16W
Kiowa County, Kansas

Dear Tim Hellman:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 10/6/2017 and the ACO-1 was received on February 13, 2018 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department