

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
--	---

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:	
----------------	-------	---------	------------	--

Form	ACO1 - Well Completion
Operator	Shakespeare Oil Co., Inc.
Well Name	JANZEN 7-36
Doc ID	1407176

All Electric Logs Run

Array Induction
Photo Density
Comp Neutron
Microlog

Form	ACO1 - Well Completion
Operator	Shakespeare Oil Co., Inc.
Well Name	JANZEN 7-36
Doc ID	1407176

Tops

Name	Top	Datum
Base Anhydrite	2442	+667
Heebner	3974	-865
Lansing	4018	-909
Muncie Creek	4200	-1091
Stark Shale	4298	-1189
Hushpuckney	4347	-1238
Marmaton	4440	-1331
Pawnee	4536	-1427
L. Cherokee Shale	4618	-1509
Johnson	4662	-1553
Mississippian	4793	1684



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Shakespeare Oil Co., Inc.

36/16/34 Scott, KS

202 W Main St.
Salem, IL 62881

Janzen 7-36

Job Ticket: 61642

DST#: 1

ATTN: Tim Priest

Test Start: 2017.12.18 @ 13:53:00

GENERAL INFORMATION:

Formation: **Marmaton A&B**

Deviated: No Whipstock: 3114.00 ft (KB)

Time Tool Opened: 16:14:45

Time Test Ended: 21:43:30

Test Type: Conventional Bottom Hole (Initial)

Tester: Chris Hagman

Unit No: 70

Interval: **4420.00 ft (KB) To 4500.00 ft (KB) (TVD)**

Reference Elevations: 3114.00 ft (KB)

Total Depth: 4500.00 ft (KB) (TVD)

3106.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 8.00 ft

Serial #: 8968

Inside

Press@RunDepth: 14.40 psig @ 4422.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2017.12.18

End Date:

2017.12.18

Last Calib.: 1899.12.30

Start Time: 13:53:05

End Time:

21:43:29

Time On Btm: 2017.12.18 @ 16:14:15

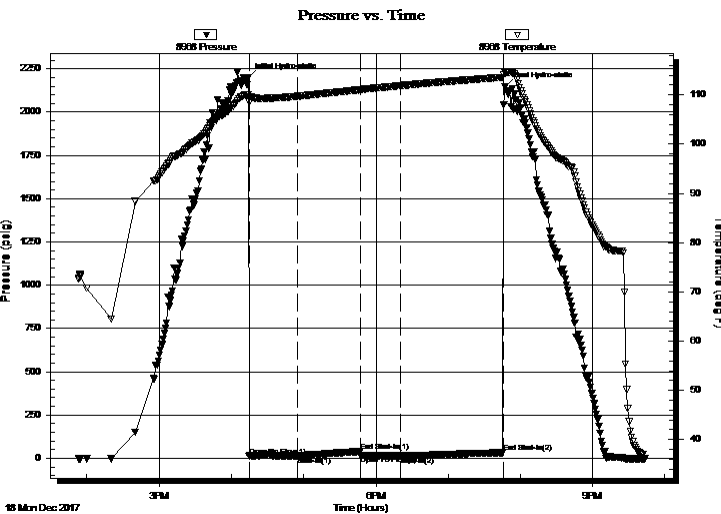
Time Off Btm: 2017.12.18 @ 19:47:15

TEST COMMENT: IF: Weak surface blow, died 5 min.

IS: No blow back

FF: No blow

FS: No blow back



PRESSURE SUMMARY

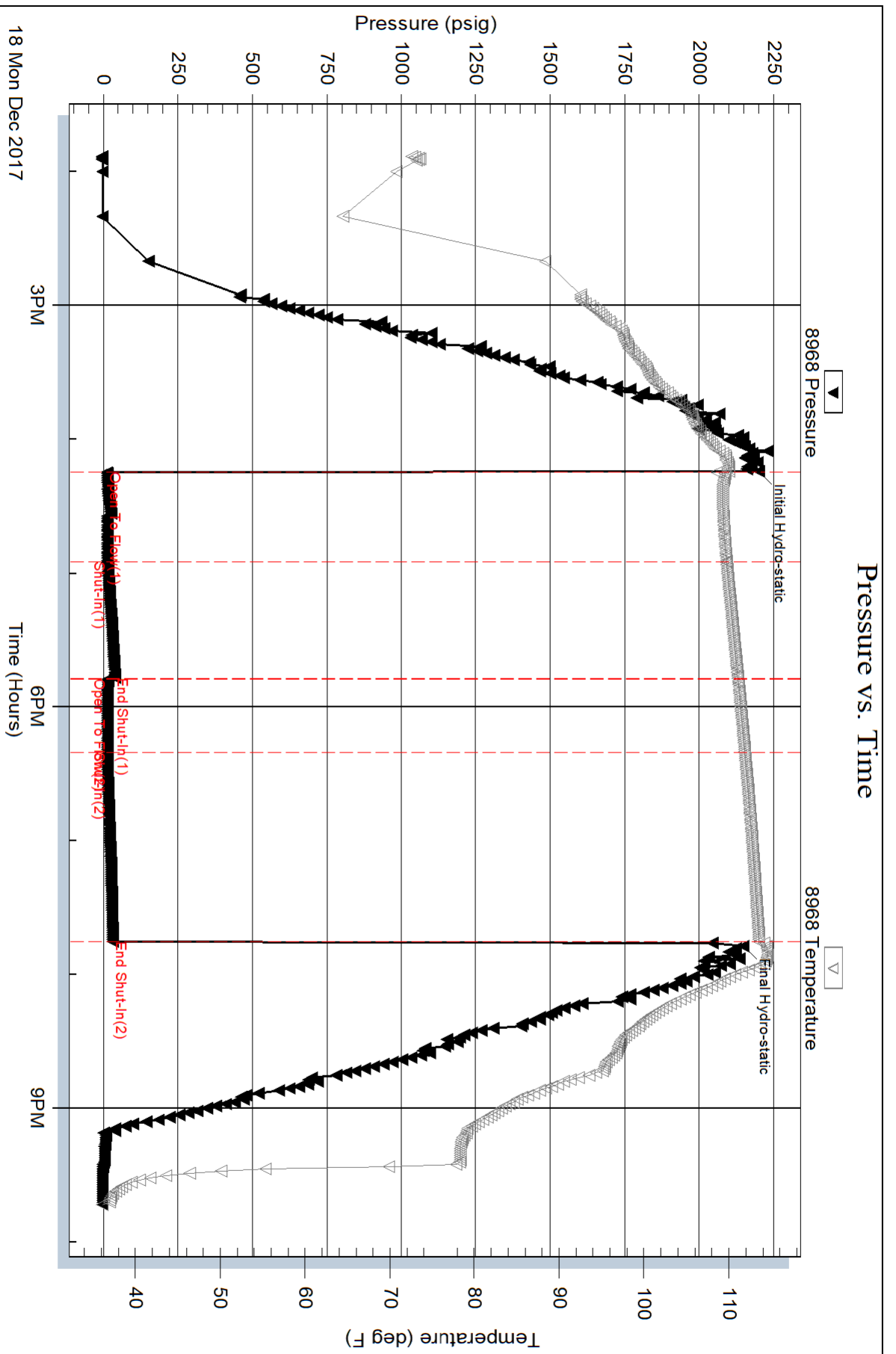
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2198.68	110.00	Initial Hydro-static
1	11.72	108.51	Open To Flow (1)
41	14.32	109.71	Shut-In(1)
93	38.14	111.05	End Shut-In(1)
94	15.19	111.05	Open To Flow (2)
127	14.40	111.87	Shut-In(2)
212	31.69	113.56	End Shut-In(2)
213	2148.66	114.43	Final Hydro-static

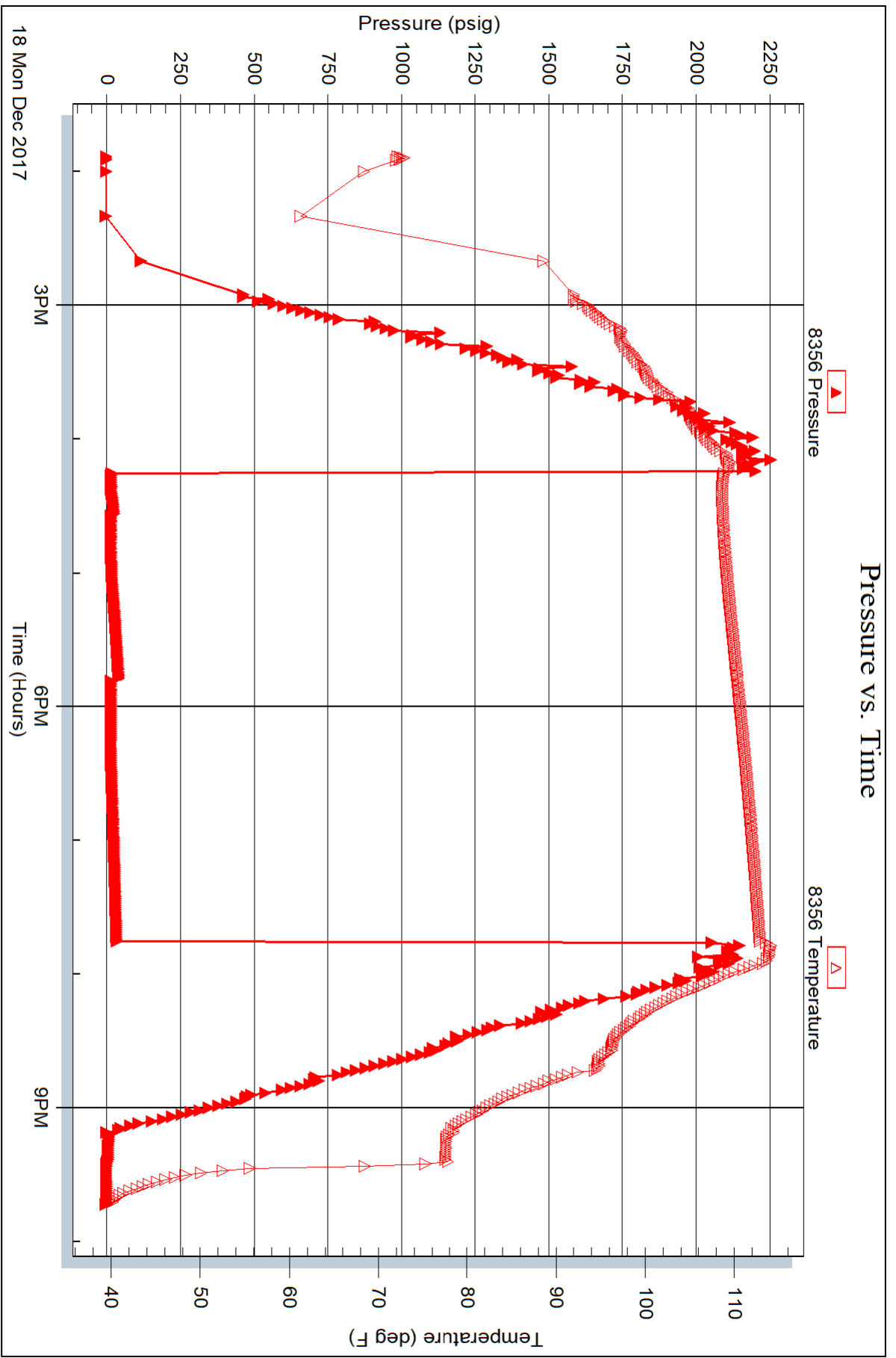
Recovery

Length (ft)	Description	Volume (bbl)
5.00	100%M	0.07

Gas Rates

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







REMIT TO
 QES Pressure Pumping LLC
 Dept:970
 P.O.Box 4346
 Houston, TX 77210-4346

MAIN OFFICE
 P.O.Box884
 Chanute, KS 66720
 620/431-9210, 1-800/467-8676
 Fax 620/431-0012

Invoice

Invoice#

812018

Invoice Date: 12/14/17

Terms: Net 30

Page 1

SHAKESPEARE OIL CO

202 W MAIN ST
 SALEM IL 62881
 USA

Janzen 7-36

INT

Part No	Description	Quantity	Unit Price	Discount(%)	Total
CE0471	Cement Pump Charge 301' - 500' (Coalbed/Methane)	1.000	1,150.0000	30.000	805.00
CE0002	Equipment Mileage Charge - Heavy Equipment	35.000	7.1500	30.000	175.18
CE0711	Minimum Cement Delivery Charge	1.000	660.0000	30.000	462.00
CC5871	<u>Surface Blend II</u> , 2% Gel/3% CaCl	195.000	24.0000	30.000	3,276.00
CC5326	Sodium Chloride, Salt	100.000	0.0000	0.000	0.00

Subtotal 6,740.25
 Discounted Amount 2,022.08
 SubTotal After Discount 4,718.17

Amount Due 7,138.05 If paid after 01/13/18

Tax: 278.46
 Total: 4,996.64

RECEIVED
 Dec 18 2017

DW

10502-5
 KW



PRESSURE PUMPING LLC
 PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8676

9701
 9590

TICKET NUMBER 54955

LOCATION Crickley KS

FOREMAN Jerry V

FIELD TICKET & TREATMENT REPORT
 CEMENT

Invoice #812018 K5

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-12-17	7524	Jenzen 7-36	36	16S	34W	Scott
CUSTOMER <u>Shirley Kasper</u>			Perse 5 to 60 lbs Sk			
MAILING ADDRESS <u>202 W. Main St.</u>			240 1/2 E N 10			
CITY <u>Solem</u>	STATE <u>IL</u>	ZIP CODE <u>62881</u>	TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>753</u>	<u>Travis W</u>		
			<u>566</u>	<u>PD W</u>		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 264 CASING SIZE & WEIGHT 8 5/8 23#
 CASING DEPTH 264 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.2 SLURRY VOL 1.24 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 15 1/2 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & rig up on date & circulate casing mix 195 sks
com 38 cc. 28 gal wash up & dis place with 15 1/2 bbl fresh H₂O & back on
circulated approx 3 bbl top it

Cement d/d
Circulate
Thank you Jerry & crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
<u>CE0771</u>	<u>1</u>	<u>PUMP CHARGE</u>	<u>1150.00</u>	<u>1150.00</u>
<u>CE0002</u>	<u>35</u>	<u>MILEAGE</u>	<u>7.15</u>	<u>250.25</u>
<u>CE0711</u>	<u>9.17</u>	<u>ten mileage delivery (min)</u>	<u>660.00</u>	<u>660.00</u>
<u>CC5871</u>	<u>195 sks</u>	<u>surface blend II</u>	<u>24.00</u>	<u>4680.00</u>
<u>CC5326</u>	<u>100 gal</u>	<u>salt</u>	<u>NC</u>	<u>NC</u>
			<u>Subtotal</u>	<u>6740.25</u>
			<u>-30%</u>	<u>2022.08</u>
			<u>Subtotal</u>	<u>4718.17</u>
			SALES TAX	<u>298.46</u>
			ESTIMATED TOTAL	<u>4996.63</u>

Ravin 3737 AUTHORIZATION Dion Vazquez TITLE Pusher DATE _____

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.



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
12/29/2017	31134

BILL TO
Shakespeare Oil Company, Inc 202 West Main Street Salem, IL 62881

- Acidizing
- Cement
- Tool Rental

WT

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#7-36	Janzen	Logan	Wild West	Oil	Development	Cement Port Coll...	Blaine
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				70	Miles	5.00	350.00
576D-D	Pump Charge - Deep Surface (> 500 Ft.) & Port Collars				1	Job	1,250.00	1,250.00
330	Swift Multi-Density Standard (MIDCON II)				250	Sacks	15.75	3,937.50T
276	Flocele				50	Lb(s)	2.25	112.50T
290	D-Air				3	Gallon(s)	42.00	126.00T
581D	Service Charge Cement				350	Sacks	1.50	525.00
583D	Drayage				1,218.98	Ton Miles	0.75	914.24
	Subtotal							7,215.24
Customer Disc...	Customer Discount Per Ted						-10.00%	-721.52
	Subtotal							6,493.72
	Sales Tax Logan County						8.00%	300.67
We Appreciate Your Business!						Total		\$6,794.39

RECEIVED
JAN 09 2018

10502-5
KW

DW



CHARGE TO: Shakespeare
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET 031134
 PAGE 1 OF 1

SERVICE LOCATIONS
 1. 1000 City KS
 2. Well Project No. 7-36 LEASE Wenzen COUNTY/PARISH Logan STATE KS CITY Pence DATE 29 Dec 17 OWNER
 3. WELL TYPE SERVICE SALES CONTRACTOR Wells West RIG NAME/NO. Development SHIPPED WET DELIVERED TO location ORDER NO.
 4. 0.1 WELL CATEGORY Development JOB PURPOSE cement post collar 4 1/2" WELL PERMIT NO. 36-16-34 WELL LOCATION

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING LOC ACCT DF	DESCRIPTION	QTY.		UNIT		AMOUNT
				UM	UM	UM	UM	
575		1	MILEAGE	70	mi	1	5.00	350.00
576D		1	fuel charge	1	ea	1	12.50	12.50
330		1	SUD cement	250	sk	1	15.75	3937.50
276		1	Fluore	50	lb	1	2.25	112.50
290		1	D-air	3	gal	1	42.00	126.00
581		1	sevice charge	350	sk	1	1.50	525.00
583		1	Drayage	34828	lb	1	2.1887M	914.24

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.

DATE SIGNED _____ TIME SIGNED _____ A.M. P.M.

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

SWIFT OPERATOR _____ APPROVAL _____

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

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UNDECIDED	DISAGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

PAGE TOTAL 7215.24
 TOTAL 6994.34

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 29 Dec 17 PAGE NO. 1

CUSTOMER Shakespeare WELL NO. 7-36 LEASE Janzen JOB TYPE cement port collar TICKET NO. 31134

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								350 sk sand cement w/ 1/4# flocculants 4 1/2 x 2 3/8 port collar - 2391'
	1430							on loc TRK 114
	1455					1000	1000	test to 1000psi - held open port collar
	1500	3 1/2	2			500		inj rate 3 1/2 bpm @ 500 psi
	1505	3 1/2				500		mix 5 MD cement @ 11.2 ppg - circ. fluid to surface
		3 1/2	16			550		
		3 1/2	135			600		
								← cement to surface ← 250 sk mixed 20 top. 7
			8 1/2					Displace w/ 8 1/2 bbl H ₂ O close port collar
	1555							test to 1000psi - held Run 5 joints
	1610		30					Reverse hole clean - 2 cement floccs - wash truck Rack up
	1645							job complete Thanks Flat Blaine & Spuditch



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
12/21/2017	31130

BILL TO
Shakespeare Oil Company, Inc 202 West Main Street Salem, IL 62881

- Acidizing
- Cement
- Tool Rental

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#7-36	Janzen	Logan	Duke Drilling Rig ...	Oil	Development	Cement Longstring	Blaine
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				70	Miles	5.00	350.00
578D-L	Pump Charge - <u>Long String</u>				1	Job	1,250.00	1,250.00
325	Standard Cement				200	Sacks	12.25	2,450.00T
284	Calseal				10	Sack(s)	30.00	300.00T
283	Salt				1,000	Lb(s)	0.20	200.00T
292	Halad 322				125	Lb(s)	8.00	1,000.00T
276	Flocele				50	Lb(s)	2.25	112.50T
277	Gilsonite (Coal Seal)				1,400	Lb(s)	0.75	1,050.00T
280	Flocheck 21				500	Gallon(s)	3.00	1,500.00T
221	Liquid KCL (Clayfix)				2	Gallon(s)	25.00	50.00T
419-4	4 1/2" Rotating Head Rental				1	Each	200.00	200.00T
581D	Service Charge Cement				200	Sacks	1.50	300.00
583D	Drayage				784.88	Ton Miles	0.75	588.66
	Subtotal							9,351.16
Customer Disc...	Customer Discount Per Ted						-10.00%	-935.12
	Subtotal							8,416.04
	Sales Tax Logan County						8.00%	494.10
We Appreciate Your Business!							Total	\$8,910.14

INT

RECEIVED
JAN 02 2018

10502-5
KW

DW



TICKET 031130

CHARGE TO: Shakespeare
 ADDRESS
 CITY, STATE, ZIP CODE

PAGE 1 OF 2

SERVICE LOCATIONS: 100 City KS WELL/PROJECT NO. 7-36 LEASE Janzen COUNTY/PARISH Logan STATE KS CITY Price DATE 21 Dec-17 OWNER
 TICKET TYPE SERVICE SALES CONTRACTOR
 WELL TYPE Oil WELL CATEGORY Development JOB PURPOSE Development RIG NAME/NO. 2 SHIPPED WRT DELIVERED TO location ORDER NO.
 REFERRAL LOCATION INVOICE INSTRUCTIONS WELL PERMIT NO. WELL LOCATION 36-16-34

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	MILEAGE	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF								
575		1			TRK 114	70	mi				5.00	350.00
578		1			Pump Charge Long string	1	oa				1250.00	1250.00
325		1			Standard cement (5oz extra)	200	sk				12.25	2450.00
284		1			Cal Seal	1000	lb				30.00	3000.00
283		1			SOBT	1000	lb				0.20	200.00
292		1			brhd-302	1	%				125.16	8.00
276		1			Floccle	50	lb				2.25	112.50
277		1			C. Lewisite (case seal)	1400	lb				0.175	1050.00

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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.

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

SURVEY	AGREE	UNDECIDED	DISAGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

PAGE TOTAL	TAX	TOTAL
6712	50	8910.14
21038	65	
351	16	
935	12	
8416	04	
44110		

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

SWIFT OPERATOR

APPROVAL

Baill

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 21 Dec 17 PAGE NO. 1

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
Slick response		7-36		Janzen		Cement long string		31130	
CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
									200 sk SA-2 cement w/ 1/4" flocc. 7# G. / sonite 4 1/2" x 11.6" casing 11 jts - 4865 TD = 4870 Part colbe 2391' sheet 44.12'
	0945								on loc TRK 114
	1030								Running 4 1/2" casing Drop ball - circult - RDM
	1130	4	15				200		Pump 15. KCL flush
		4	12				200		Pump 500 gal flocc
		4	5				200		Pump 5 bbl KCL flush
	1135		7						Plug RH-MH 30sk 20sk
	1145	4	41				200		Mix SA-2 cement 150sk @ 15:30
	1200								Drop latch down plug wash out pump & line
	1205	6					200		Displace plug
	1215	6	65				600		Land plug
		6	44.75				1450		Release pressure truck - dried up
	1220								wash truck
									Back up
	1300								job complete Thanks Flint, Dave, & SQUATCH

STATE OF KANSAS

CORPORATION COMMISSION
CONSERVATION DIVISION
266 N. MAIN ST., STE. 220
WICHITA, KS 67202-1513



PHONE: 316-337-6200
FAX: 316-337-6211
<http://kcc.ks.gov/>

GOVERNOR JEFF COLYER, M.D.

SHARI FEIST ALBRECHT, CHAIR | JAY SCOTT EMLER, COMMISSIONER | DWIGHT D. KEEN, COMMISSIONER

April 30, 2018

Don Williams
Shakespeare Oil Co., Inc.
202 W MAIN ST
SALEM, IL 62881-1519

Re: ACO-1
API 15-171-21211-00-00
JANZEN 7-36
SW/4 Sec.36-16S-34W
Scott County, Kansas

Dear Don Williams:

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 12/12/2017 and the ACO-1 was received on April 30, 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