KOLAR Document ID: 1410667

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 #		API No.:	
Name:		Spot Description:	
Address 1:			est
Address 2:		Feet from North / South Line of Sect	tion
City: State:	++	Feet from East / West Line of Sect	tion
Contact Person:		Footages Calculated from Nearest Outside Section Corner:	
Phone: ()		□NE □NW □SE □SW	
CONTRACTOR: License #		GPS Location: Lat:, Long:	
Name:		(e.g. xx.xxxxx) (e.gxxx.xxxxx)	
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84	
Purchaser:		County:	
Designate Type of Completion:		Lease Name: Well #:	—
New Well Re-Entr	y Workover	Field Name:	
] SWD	Producing Formation:	
Gas DH] SWB] EOR	Elevation: Ground: Kelly Bushing:	
	GSW	Total Vertical Depth: Plug Back Total Depth:	
CM (Coal Bed Methane)	_	Amount of Surface Pipe Set and Cemented at: F	eet
	ol., etc.):	Multiple Stage Cementing Collar Used? Yes No	
If Workover/Re-entry: Old Well Info as		If yes, show depth set: F	eet
Operator:		If Alternate II completion, cement circulated from:	
Well Name:		feet depth to:w/sx c	cmt.
Original Comp. Date:			
Deepening Re-perf. Plug Back Liner	Conv. to EOR Conv. to SWD Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)	
□ O		Chloride content:ppm Fluid volume:b	bls
_ •	rmit #:	Dewatering method used:	
	rmit #: rmit #:		
	rmit #:	Location of fluid disposal if hauled offsite:	
	rmit #:	Operator Name:	
_ 33		Lease Name: License #:	
Spud Date or Date Reached	Completion Data co	Quarter Sec TwpS. R	/est
Recompletion Date	d TD Completion Date or Recompletion Date	Countv: 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 Approved by: Date:

KOLAR Document ID: 1410667

Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	rpS	S. R	Eas	st West	County:					
	l, flowing an	d shut-in pres	sures, wh	ether shut-in pre	ssure reached	static	level, hydrostat	ic pressures, bo		val tested, time tool erature, fluid recovery,
Final Radioactivi files must be sub							gs must be emai	led to kcc-well-l	ogs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests (Attach Addit)		Yes No		Lo		n (Top), Depth a		Sample
Samples Sent to	Geological	Survey		Yes No		Name			Тор	Datum
Cores Taken Electric Log Run Geologist Report List All E. Logs F	t / Mud Log	s		Yes No Yes No Yes No						
			Rep	CASING	RECORD [Nev		on, etc.		
Purpose of St	tring	Size Hole Drilled		Size Casing let (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	CEMENTING /	SQUE	EEZE RECORD		<u>'</u>	
Purpose: Perforate		Depth Top Bottom	Тур	pe of Cement	# Sacks Use	ed		Type and	Percent Additives	
Protect Ca										
Plug Off Z										
Did you perform Does the volume Was the hydraul	e of the total	base fluid of the	hydraulic	fracturing treatment		-	Yes S? Yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Produ Injection:	ction/Injectio	n or Resumed P	roduction/	Producing Meth	od:		Gas Lift O	ther <i>(Explain)</i>		
Estimated Product Per 24 Hours		Oil	Bbls.		Mcf	Water			Gas-Oil Ratio	Gravity
DISPO	OSITION OF	GAS:		N	METHOD OF CO	MPLET	ΓΙΟΝ:			DN INTERVAL: Bottom
Vented		Used on Lease		Open Hole		Dually (Submit A		nmingled nit ACO-4)	Тор	BOLLOTTI
,	ed, Submit AC							·		
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)	
TUBING RECORI	D: S	Size:	Set A	: -	Packer At:					

Form	ACO1 - Well Completion
Operator	Daystar Petroleum, Inc.
Well Name	WISHNUCK 1
Doc ID	1410667

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Liner	4.875	4.5	9.5	3780	pozmix	200	60-40
Production	7.875	5.5	14	3850	common	125	N/A
Surface	12.5	8.625	24	154	common	125	N/A

MENTEN 391 HOSS MARTIN CO.

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DAILY DRILLING REPORT NOTE—Report all defects in machinery, coring, slope tests and injuries under REMARKS KENTEN 391 ROSS-MARTIN CO. COMPANY WELL NO. LEASE RNG. OR SURVEY COUNTY STATE occu-HOURS TOUR FROM то FORMATION EMPLOYEE RATE PATION REG. 0.7 DRLR FROM DKM М. HLP то Μ. MLP HRS. LOST REASON HRS. RUN HOURS RUN DEFLECTION BITS RUN CORE NO. & DESCRIPTION CONE NOT GRUNER CORE HEAD NO. 40499 268 MAY 2 6 1954 REMARKS:è in bear of the second -OCCU-PATION HOURS TOUR FROM то FORMATION **EMPLOYEE** RATE REG. O.T DRLR DKM HLP TO HLP HRS. LOST REASON HRS. RUN HOURS RUN DEFLECTION BITS RUN CORE NO. & DESCRIPTION CONE NOS. SET NO. CORE HEAD NO. REMARKS:-OCCU-PATION HOURS EMPLOYEE RATE TOUR FROM TO FORMATION REG. O.T DRLR DKM FROM M. HLP HLP M. HRS. LOST REASON HRS. RUN BITS RUN HOURS RUN DEFLECTION CORE NO. & 4TC-OSE CORE HEAD NO. CONE NOS. SET NO. 1 10650 REMARKS:-2320FC-0 TRIP APPROVED BY FIELD SUPERINTENDENT

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KESTER 391 ROSS-MARTIN CO.

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DAILY DRILLING REPORT NOTE-Report all defects in machinery, coring, slope tests and injuries under REMARKS MESTER 391 HOSS MARTIN CO. COMPANY WELL NO. No NC. SECTION TWP. OR BLOCK RNG, OR SURVEY COUNTY STATE OCCU-PATION HOURS TOUR FROM FORMATION то EMPLOYEE RATE REG. 0.1 DRLR FROM DKM М. HLP MLP М. HRS. RUN HRS. LOST REASON BITS RUN HOURS RUN DEFLECTION 050 CORE NO. & DESCRIPTION SET NO. CONE NOS. CORE HEAD NO. O i Walah REMARKS: OCCU-PATION HOURS FORMATION TOUR FROM EMPLOYEE TO RATE REG. 0.1 3.30 DRLR DKM FROM M. HLP TO HLP HRS. RUN HRS. LOST REASON BITS RUN HOURS RUN DEFLECTION CORE NO. & DESCRIPTION CORE HEAD NO. CONE NOS SET NO. REMARKS:-OCCU-PATION HOURS TOUR FROM то FORMATION EMPLOYEE RATE REG. O.T DRLR 3400 DKM FROM M. HLP то HLP М. REASON HRS. RUN HRS. LOST DEFLECTION BITS RUN HOURS RUN

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DAILY DRILLING REPORT NEWTON 391 FOLSOMARTINGS

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NOTE—Report all defects in machinery, coring, slope tests and injuries under REMARKS DAILY DAILLING REPORT 191 ROSS-MARTIN CO. COMPANY WELL NO. LEASE RNG. OR SURVEY SECTION TWP. OR BLOCK COUNTY OCCU-PATION TOUR FROM то FORMATION HOURS EMPLOYEE RATE REG. O.T. DRLR FROM DKM HLP TO HLP HRS. LOST REASON HRS. RUN DEFLECTION BITS RUN HOURS RUN CORE NO. & DESCRIPTION CONE NOS. SET NO. CORE HEAD NO. REMARKS:-OCCU-PATION HOURS TOUR FROM TO FORMATION EMPLOYEE RATE REG. 0.7 DRLR FROM DKM то HLP ₩. HRS. RUN HRS. LOST REASON HOURS RUN DEFLECTION BITS RUN CORE NO. & DESCRIPTION CONE NOS. CORE HEAD NO. SET NO. REMARKS:occu-HOURS TOUR FROM то FORMATION EMPLOYEE RATE PATION REG. O.T DRLR DKM FROM HLP TO HLP REASON HRS. RUN HRS. LOST DEFLECTION BITS RUN HOURS RUN CORE NO. & DESCRIPTION CORE HEAD NO. CONE NOS. SET NO. REMARKS:-APPROVED BY FIELD SUPERINTENDENT

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ALLIED CEMENTING CO., INC. 2801 Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665

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