KOLAR Document ID: 1440671

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:		
Address 2:		Feet from North / South Line of Section
City: State:	+	Feet from _ East / _ West Line of Section
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.xxxxxx)
Wellsite Geologist:		Datum: NAD27 NAD83 WGS84
Purchaser:		County:
Designate Type of Completion:		Lease Name: Well #:
New Well Re-Entr	ry Workover	Field Name:
	∫ SWD	Producing Formation:
Gas DH	」SWD ☐ EOR	Elevation: Ground: Kelly Bushing:
	GSW	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)] 30	Amount of Surface Pipe Set and Cemented at: Feet
	ol., etc.):	Multiple Stage Cementing Collar Used? Yes No
If Workover/Re-entry: Old Well Info as	follows:	If yes, show depth set: Feet
Operator:		If Alternate II completion, cement circulated from:
Well Name:		feet depth to:w/sx cmt.
Original Comp. Date:	Original Total Depth:	
Deepening Re-perf.	Conv. to EOR Conv. to SWD	Drilling Fluid Management Plan
Plug Back Liner	Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
		Chloride content:ppm Fluid volume:bbls
	ermit #:	Dewatering method used:
	ermit #:	
	ermit #:ermit #:	Location of fluid disposal if hauled offsite:
	ermit #:	Operator Name:
		Lease Name: License #:
Spud Date or Date Reached	d TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date	Recompletion Date	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 Approved by: Date:							

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Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	pS. F	R [East	West	County:					
open and closed and flow rates if	, flowing and sh gas to surface t ty Log, Final Lo	nut-in pressurest, along wit	es, whe h final c ain Geo	ther shut-in pre hart(s). Attach physical Data a	essure reached extra sheet if r and Final Electr	station more : ric Loc	level, hydrosta space is needed	tic pressures, d.	bottom hole tempe	val tested, time tool erature, fluid recovery, Digital electronic log
Drill Stem Tests (Attach Addit			Ye	es No		Lo	og Formatio	n (Top), Deptl	n and Datum	Sample
Samples Sent to	Geological Sur	vey	Ye	es 🗌 No		Name)		Тор	Datum
Cores Taken Electric Log Run Geologist Repor List All E. Logs F	t / Mud Logs		Y€ Y€	es No						
			Repo		RECORD [Nev	w Used rmediate, producti	on. etc.		
Purpose of St		ze Hole Orilled	Siz	e Casing (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	OF MENTING /					
Purpose:	[Depth	Typo	of Cement	# Sacks Use		EEZE RECORD	Typo a	nd Percent Additives	
Perforate Protect Ca Plug Back	Top	Bottom	туре	or cement	# Sacks Use	,u		туре а	ia reicent Additives	
Plug Off Z										
Did you perform Does the volum Was the hydraul	e of the total base	fluid of the hyd	draulic fra	cturing treatmen		•	Yes ns? Yes	No (If No	, skip questions 2 an , skip question 3) , fill out Page Three o	,
Date of first Produ	ction/Injection or	Resumed Produ	uction/	Producing Meth			Coolift 0	thor (Fundain)		
Estimated Produc	otion	Oil Bb	le.	Flowing Gas	Pumping Mcf	Wate		ther <i>(Explain)</i> bls.	Gas-Oil Ratio	Gravity
Per 24 Hours		Oli Bb	15.	Gas	IVICI	vvale	ı Di	JIS.	Gas-Oil Hallo	Gravity
DISPO	OSITION OF GAS	S:		N	METHOD OF CO	MPLE.	TION:		PRODUCTIO	N INTERVAL:
Vented	Sold Use	d on Lease		Open Hole				nmingled	Тор	Bottom
(If vente	ed, Submit ACO-18	.)			(5	SUDITIIL I	ACO-5) (Subi	mit ACO-4)		
Shots Per Foot	Perforation Top	Perforation Bottom	on	Bridge Plug Type	Bridge Plug Set At		Acid,		Cementing Squeeze Kind of Material Used)	Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	MDopps, LLC
Well Name	BARNETT 1-18
Doc ID	1440671

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Production	7.8	5.5	11.5	2160	A regular	100	pos mix
Surface	7.8	5.5	11.5	250	а	25	а

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



Phone: 316-337-6200 Fax: 346-337-6211 http://kcc.ks.gov/

Laura Kelly, Governor

Dwight D. Keen, Chair Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner

February 19, 2019

mark dopps MDopps, LLC 555 N. MCLEAN WICHITA, KS 67203-5815

Re: ACO-1 API 15-035-24508-00-00 BARNETT 1-18 SW/4 Sec.18-32S-05E Cowley County, Kansas

Dear mark dopps:

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 10/25/2017 and the ACO-1 was received on February 19, 2019 (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

810 E 7TH PO Box 92 EUREKA, KS 67045 (620) 583-5561



Cement or Acid Field Report
Ticket No. 4173
Foreman David Gardner
Camp Eureka

Date	Cust. ID#	Leas	e & Well Number	Tink a o	Section	Township	Range	County	State
10-1-18		Barne	# 1-18	3	18	32	5€	Cowley	KS
Customer		2001		Safety	Unit #		river	Unit#	Driver
1	\ c 1	11		Meeting	105		SON H.		
Mailing Address	Dopps, L			D6	114	Ze	vi A.	of #9	
	N. McLe	as Black		ZA				1911 17	
	14. 111-20	State	Zip Code					All was fold. Mad c	
City	,							MERCE AS BUILDING	
Wichis	fa	KS	167203						
Job Type	ongstring	Hole De	oth 2230'		Slurry Vol		Tu	ubing	
Casing Depth.	2201	Hole Siz	ze 77/8"		Slurry Wt/	13.7"	Dr	rill Pipe	
			eft in Casing 42'		Water Gal/Sh	<	0	ther	
	52.2 Bbl		ement PSI 300		Bump Plug to	700	BI	PM	
							mottan	Flanger Val	lue inser
Remarks:	Satety me	eting. han	51/2 Casing	w/ /	18 011 0	000000	11.101	+ 2201'	
on top	of #/ set	@ 2159 . C	entralizer on	-8. U	Jashed a	own tron	1610	TO 2201.	
Rig up	to 51/2 C	asing, Bre	ak circulation	w/1	O Bbl pi	+ water.	Mixed	10 SKS Gel	Flush
w/ 30	Bbl pit wo	ter space	r. Mixed 1	00 SKS	Thick S	et Cemen	t w/ 20	Phenoseal/si	x @ 13.7
land vie	ld 1.75 = 3	31 Bbl Slur	ry. Shut dow	un. Wa.	sh out p	ump & li	res. Rele	ased 5/2 To	p Rubber
Aug Nie	laced wil	52.7 Bbl	Fresh Water.	Final	Dumnina	oresture	of 300	PSI. Bump.	Plug to
700 851	Released	Pressure.	Float & Phy	held	Good Cit	rulation	@ all +	ines while	cementing
			Thuy	TICIO,	0000 (11	CM /M II M/	жанаЭ ы	2 doint []	
70p C	omplete. I	lig down.	18.04				10.20	9908%	60000

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102	1	Pump Charge	1100.00	1100.00
2/07	60	Mileage	4,20	252.00
C106m	1	Misc. Pump Charge (Pump time for washing down CSG)	630.00	630.00
C201	100 SKS	Thick Set Cement	20,50	2050.00
C208	200#	Phenoseal @ 24/sk	1.30	260.00
C108 B	5.5 Tons	Ton Mileage (Bulk Truck)	1,40	462.00
C702	1	51/2 Flapper Value Insert	115.00	115.00
C504	1	5/2 Centralizer	50.00	50.00
C404	1	5/2 Top Rubber Plug	74.00	74.00
C206	500 [#]	Gel Flush	.21	105.00
100.08		eliber Testamon (P	10-101111	
80.56	3-2	Thank You	Sub Total	5,098.00
		6,5 %	Less 5% Sales Tax	263.53 172.51
Authoria	ration	Title	Total	5,006.98