KOLAR Document ID: 1485001

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:	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.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
Cathodic Other (Core, Expl., etc.):	
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: 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)
Commingled Permit #:	Chloride content:ppm Fluid volume:bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of fluid disposal if fladica offsite.
GSW Permit #:	Operator Name:
_	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. R East West
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	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 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 Production 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	Colt Energy Inc
Well Name	PENDLEY 34
Doc ID	1485001

Perforations

Shots Per Foot	Perforation Top	Perforation Bottom	BridgePlugTyp e	BridgePlugSet At	Material Record
2	1368	1370			
2	1373	1383			
2	1386	1396			
4	1397	1399			
4	1400	1408			
4	1410	1412			

Form	ACO1 - Well Completion
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Well Name	PENDLEY 34
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Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	11.75	8.625	22	42	Portland	14	none
Production	6.75	4.5	9.5	1474	Thick set		Phenoseal 2#/sk

Mud Rotary Drilling Andrew King - Manager/Driller

Bar Drilling, LLC Phone: (719) 210-8806

1317 105th Rd. Yates Center, KS 66783

Company/Operator	Well No. Lease		se Name		Well Location			1/4	1/4	Sec.	Twp.	Rge,
Colt Energy Inc.	34	P	endley		1841'fsl, 225	7'fel			SE	22	26s	14e
P.O. Box 388	Well API#		Type/We	II	County		State	Total	Depth	Date Star	ted Date	Completed
Iola, KS 66749	15-207-29370		Oil	Oil Woodson			KS	14	198	9/2/2010	6 9/	8/2016
Job/Project Name/No.	Surface Re	Bit Record				Coring Record						
	Surface Re	cora	Type	Size	From	То	Core	#	Size	From	То	% Rec.
Driller/Crew	Bit Size:	11 1/4	PDC	11 1/4	0'	42	1		3"	1368	1398	100
Andy King	Casing Size:	8 5/8	PDC	6 3/4	42	1498	2		3"	1398	1427	99
Charles King	Casing Length:	42										
	Cement Used:	14sx										
	Cement Type:	Portland										

Formation Record

From	То	Formation	From	То	Formation	From	То	Formation
0	107	Overburden						
107	306	shale						
306	576	lansing lime						
576	617	shale						
617	831	Kc lime						
831	926	shale						
926	934	lime						
934	962	shale						
962	973	lime						
973	1062	shale/sand						
1062	1080	Ft. Scott lime						
1080	1122	shale						
1122	1134	lime						
1134	1158	shale						
1158	1166	oil sand						
1166	1368	sandy shale						
1368	1398	core #1 good oil						
1398	1427	core #2 good oil				Well Note	s:	
1427	1496	sandy shale				ran 4 1/2"	casing	
1496	1498	Miss Lime						

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



Cement or Acid Fi	eld Report
Ticket No. 28	64
Foreman Aussell	necey
Camp	

Date	Cust ID#	Le	ase & Well Number		Section	Township	Range	County	State
9-3-6	್ರುಡಿ	Devidio	# 24		22	26.	14 =	wisdow	Ks
Customer	Was a series	-	1)	Safety	Unit #		ver	Unit #	Driver
Colt E	W-416.w	INC.		Meeting	1504	Flor	- /3/		
Weiling Address		30421370300		VIVE S	11.5	A.9			
City	STEP TO	State	Zip Code	AB I	WUYS TAX	_	-		
TOLA		Ks	66199	1000					E XIII
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Elsa NI		7 1 1 1 m	To Stone	40 50	FALT	Clear 9	75.00	of (works	
John (0)	W 46 7	N 100		27.7	-				100
			7/189	<u> </u>			_		200
				-53433	311 1935	15.5%		7,75	26-1
								The second secon	

Code	Qty or Units	Description of Product or Services	Unit Price	Total
10%	1	Pump Charge		
- 10/2	2/5	Mileage		
201				
7 417	WEIGH.			
11	150	Phonosom is a Period		
100	Jun "		2000	
362	Same of	Est Flugre	The second secon	actorio di accomi
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463		42 01 2412 +63	- Comments	
			+	
		1 Commence	1 1	
				1200
	1		Color Pour	
	1 2	AH	Sales Tax	

agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office