CORRECTION #2

KOLAR Document ID: 1468213

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 | | | |
| 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-Entry ☐ Workover | Field Name: | | | |
| □ Oil □ WSW □ SWD | Producing Formation: | | | |
| ☐ Gas ☐ DH ☐ EOR | Elevation: Ground: Kelly Bushing: | | | |
| ☐ OG ☐ GSW | Total Vertical Depth: Plug Back Total Depth: | | | |
| CM (Coal Bed Methane) | Amount of Surface Pipe Set and Cemented at: Feet | | | |
| Cathodic Other (Core, Expl., 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) | | | |
| 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 #: | · | | | |
| GSW Permit #: | Operator Name: | | | |
| | Lease Name: License #: | | | |
| Spud Date or Date Reached TD Completion Date or | Quarter Sec. Twp. S. 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 III Approved by: Date: | | | | | |

CORRECTION #2

KOLAR Document ID: 1468213

| Operator Name: | | | | | Lease N | lame: _ | | | Well #: | |
|--|-------------------------|----------------------|--|---------------------|-----------------------|-----------|-------------------|--------------------------|--------------------|--|
| Sec Tw | pS. F | R | East | West | County: | | | | | |
| | l, flowing and sh | ut-in pressure | es, whet | her shut-in pr | essure reach | ed stati | c level, hydrosta | atic pressures, b | | val tested, time tool erature, fluid recovery, |
| Final Radioactivi files must be sub | | | | | | | gs must be ema | ailed to kcc-well- | logs@kcc.ks.gov | . Digital electronic log |
| Drill Stem Tests | Taken tional Sheets) | | Ye | s No | | L | | on (Top), Depth | | Sample |
| Samples Sent to | Geological Sur | vey | Ye | s No | | Nam | е | | Тор | Datum |
| Cores Taken Electric Log Run Geologist Repor | t / Mud Logs | | ☐ Ye ☐ Ye ☐ Ye | s No | | | | | | |
| List All E. Logs F | Run: | | | | | | | | | |
| | | | Repo | | RECORD | Ne | w Used | ion. etc. | | |
| Burnoon of Ct | ring Siz | e Hole | | e Casing | Weigh | • | Setting | Type of | # Sacks | Type and Percent |
| Purpose of St | | rilled | | (In O.D.) | Lbs. / | | Depth | Cement | Used | Additives |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | ADDITIONA | L CEMENTIN | G / SQL | IEEZE RECORD | | | |
| Purpose: Perforate | | Depth Bottom | Type | of Cement | # Sacks Used Typ | | Type and | pe and Percent Additives | | |
| Protect Ca | | | | | | | | | | |
| Plug Back Plug Off Z | | | | | | | | | | |
| | | | | | | | | | | |
| 1. Did you perform | - | _ | | | | | Yes | = | kip questions 2 ar | nd 3) |
| Does the volum Was the hydrau | | - | | _ | | - | | | skip question 3) | of the ACO 1) |
| 3. was the nyurau | iic iracturing treatr | neni iniormatio | n submitt | ed to the chem | cai disclosure | registry? | Yes | NO (11 NO, 1 | ill out Page Three | or trie ACO-1) |
| Date of first Produ | ction/Injection or F | Resumed Produ | iction/ | Producing Me | thod: Pumping | . \Box | Gas Lift 0 | Other (Evalein) | | |
| Piowing | | | | | | | Out-with t | | | |
| Estimated Production Per 24 Hours | | Oil Bbl | S. | Gas | Mcf | Wate | er E | bls. | Gas-Oil Ratio | Gravity |
| DIOD: | 0017101105010 | . 1 | | | | 0014015 | | | PROPLICATION | |
| | | | METHOD OF COMPLETION: Perf. Dually Comp. Commin | | | mmingled | Top | ON INTERVAL: Bottom | | |
| | ed, Submit ACO-18. | | | pennole | reii | _ , | | omit ACO-4) | | |
| Shots Per Foot | Perforation Top | Perforatio Bottom | n | Bridge Plug Type | Bridge Plug Set At | 3 | Acid | | ementing Squeeze | Record |
| | , | | | | | | | | , | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| TUBING RECOR | D: Size: | | Set At: | | Packer At: | | | | | |
| 105MG HEOON | 0126. | | Joi M. | | , donor At. | | | | | |

| Form | ACO1 - Well Completion |
|-----------|-------------------------------|
| Operator | Bobcat Oilfield Service, Inc. |
| Well Name | BAKER OS 9-2018 |
| Doc ID | 1468213 |

Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | | Type and Percent Additives |
|----------------------|----------------------|-----------------------|--------|------------------|-------------------|---|----------------------------------|
| Surface | 9.875 | 7 | 10 | 20 | Portland | 8 | 50/50 POZ |
| Intermedia te | 5.625 | 2.375 | 6 | 100 | na | 0 | na |
| Production | 5.625 | 1 | 2.33 | 100 | na | 0 | na |
| | | | | | | | |

Summary of Changes

Lease Name and Number: BAKER OS 9-2018

API/Permit #: 15-107-25294-00-00

Doc ID: 1468213

Correction Number: 2

Approved By: Karen Ritter

| Field Name | Previous Value | New Value | |
|----------------------------------|--|--|--|
| Formation Top Source - Sample | No | Yes | |
| Approved Date | 11/08/2018 | 08/25/2020 | |
| Production Interval #1 | 40 | 20 | |
| Production Interval #3 | 80 | 100 | |
| Save Link | //kcc/detail/operatorE ditDetail.cfm?docID=14 | //kcc/detail/operatorE ditDetail.cfm?docID=14 68213 MSL | |
| TopsDatum1 | 23632 NA | | |
| TopsDepth1 | NA | 0 | |
| TopsName1 | NA | Kansas City | |
| Well Type | OTHER | OIL | |
| Completion Type - Other Text | STRAT | | |