KOLAR Document ID: 1670263

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: Zip: +	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.xxxxx)
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)	
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
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)
Described	Chloride content: ppm Fluid volume: bbls
☐ Commingled Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of fluid disposal if flauled offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached 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 III Approved by: Date:							

KOLAR Document ID: 1670263

Page Two

Operator Name:				Lease Name:			Well #:		
Sec Twp.	S. R.	Ea	st West	County:					
	lowing and shu	ıt-in pressures, w	hether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,	
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log	
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample	
Samples Sent to G	eological Surv	ey	Yes No	Na	me		Тор	Datum	
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No						
		Re			New Used	ion, etc.			
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
			ADDITIONAL	CEMENTING / SO	QUEEZE RECORD	l			
Purpose:		epth Ty Bottom	pe of Cement	# Sacks Used	# Sacks Used Type and Percent Additives				
Protect Casii									
Plug Off Zon									
 Did you perform a Does the volume o Was the hydraulic 	of the total base f	luid of the hydraulic	fracturing treatment	_	_	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,	
Date of first Producti Injection:	on/Injection or Re	esumed Production	/ Producing Meth	nod:	Gas Lift 0	Other <i>(Explain)</i>			
Estimated Production Oil Bbls. Per 24 Hours							Gas-Oil Ratio Gravity		
DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:									
□ Vented □ Sold □ Used on Lease □ Open Hole □ Perf.						mmingled mit ACO-4)	Тор	Bottom	
,	Submit ACO-18.)								
Shots Per Foot	Perforation Perforation Bridge Plug Bridge Plug Acid, Fracture, Shot, Cementing Squeeze Record Top Bottom Type Set At (Amount and Kind of Material Used)				Record				
TUBING RECORD:	Size:	Set /	At:	Packer At:					
. 5513 1200 10.	5120.		···	. 30.0.71					

Form	ACO1 - Well Completion					
Operator	Scout Energy Management LLC					
Well Name	EVANS B1-4 ATU-127					
Doc ID	1670263					

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	1	1	1	1	1	1	1
Production	1	1	1	1	1	1	1



QUASAR ENERGY SERVICES, INC.

3288 FM 51

Gainesville, Texas 76240 Office: 940-612-3336

Fax: 940-612-3336 | qesi@qeserve.com





QUASAR ENERGY SERVICES, INC.

CEMENTING JOB LOG

Gainesville, Texas 76240 Office: 940-612-3336

Fax: 940-612-3336 | qesi@qeserve.com

Form 185-2J

5/25/22 CEMENTING JOB LOG

Company: SCOUT ENERGY PARTNERS Well Name: EVANS B1-4 ATU 127 Type Job: PLUG/PTA AFE #: 15194 **CASING DATA** Grade: Weight: 0 Size: **Casing Depths** 0 Bottom: 0 Top: Drill Pipe: Size: Weight: 0 0 Tubing: 0 0 Grade: TD (ft): Size: Weight: 0 Open Hole: Size: 0 T.D. (ft): Perforations From (ft): To: Packer Depth(ft): **CEMENT DATA** Spacer Type: $ft^3/_{sk}$ Sks Yield Density (PPG) Amt. LEAD: Excess $ft^3/_{sk}$ Sks Yield Density (PPG) Amt. CLASS A 2%GYP, 2%SMS, 2%CaCl, 1/4#POLY TAIL: **Excess** 400 Sks Yield $ft^3/_{sk}$ Amt. 1.75 Density (PPG) 13.5 WATER: Lead: gals/sk: Tail: 9.5 gals/sk: 90.5 Total (bbls): 90.5 Pump Trucks Used: 210-DP11 Bulk Equipment: 228 660-20 Disp. Fluid Type: Amt. (Bbls.) Weight (PPG): Mud Type: Weight (PPG): **COMPANY REPRESENTATIVE: CEMENTER:** Chad Hinz PRESSURES PSI FLUID PUMPED DATA TIME **REMARKS** AM/PM Casing Tubing **ANNULUS** TOTAL RATE ON LOC 5/23/22, SAFTEY MTG, R.U. 2300 1945 60 3 MIX 100 SX 5/24/22 @ 564' 1956 27 SHUT DOWN, TOOH 048 60 3 MIX 100 SX 5/25/22 @250' 058 27 SHUT DOWN, TOOH 0534 60 3 MIX 100 SX @2061 0546 27 SHUT DOWN, TOOH 1020 40 3 MIX 50 SX @ 147' 1025 13.5 SHUT DOWN, TOOH 3 MIX 50 SX @ 147' 1416 40 1422 13.5 SHUT DOWN, CIRC CEMENT 1500 JOB COMPLETE THANK YOU FOR YOUR BUSINESS!!!!



Total # Workers:

Job Safety Analysis Checklist -JSA

Form 181-4/185-2

5/25/22

Com	pany: SCOUT ENERGY PARTNERS			Date: 5/25/22		JSA		
Location: LAKIN, KS Well Name: EVANS B1-4						U 127		
	ther: RAINY			Temp.: 43 Wind Direction:				
	of Job: PLUG/PTA			Person in Charge: Chad Hinz	- ""			
				water and the second se		· · · · · · · · · · · · · · · · · · ·		
Line	Boss: Jesse Paxton			Emergency Driver: Noel Leon				
	Emergency Info.			PPE/Body Hazards		Confined Space		
4000	Eye Wash	Х	Hard			Rescuue Plan		
	Shower Station	X		ng Protection		Hole Watch / Communication		
X	Fire Extinguishers Loc/Tag	X		er Work Boots		Atmosphere Testing		
	Evacuation Route / Muster	X		rotection Protection	-	Ventilation Respirator		
X	Leak/Spill Reporting Fire Reporting	X		Resistant Clothing FR	-	Tools / H2O		
Hospi		^		rotection	X	Right Tool for the Job		
Phone		+-		Out / Tag Out	X	Inspection		
Addre		+		ratory- Silica, Chemical	X	Drinking Water		
	Scope of Work			Potential Hazards		Safety Controls		
		T	AFFIC		T			
1	DRIVING	11		CONSTRUCTION, ANIMALS	DI	OBEY LAWS, BE AWARE		
2	RIGGING UP/DOWN		PINCE	1 POINTS, HEAVY LIFTING	Br	JDDY SYSTEM, HAND PLACEMENT		
3	PUMPING JOB	_		PSI LINES		KEEP AREA CLEAR		
	Print Name	1	A	Signature		Company		
1	CHAD HINZ	1	V		T /	MO		
2	JESSE PAXTON		9		1	1/20		
3	NOEL LEON	1/	7	1-/	1)		
	NOLLLEGA	1/1		Ly	+			
4		-			+			
5		-			-			
6 7					1			
		-			+			
9		-			1			
10								
11								
12								
13								
14								
15		-			-			
16		-			-			
17		+			+			
18		+			+			
19		+		And Art of the Control of the Contro	+			
20		+			+			
22		+			-			
23		+	,		-			
24		1			1			
25		-						
26								