KOLAR Document ID: 1684471

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:	SecTwpS. R East West				
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: Total Vertical Depth: Plug Back Total Depth:				
☐ Gas ☐ DH ☐ EOR					
☐ 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: 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 #:	Location of haid disposal in hadica 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 III 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	Size Casing Set (In O.D.)		Weight Lbs. / Ft.	Weight		Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	OF MENTING /					
Purpose:	[Depth	Typo		# Sacks Use		EEZE RECORD	Typo a	ad Paraant Additivas	
Perforate Top Bottom Protect Casing Plug Back TD		Type of Cement		# Sacks Oseu		Type and Percent Additives				
Plug Off Zone										
1. Did you perform a hydraulic fracturing treatment on this well? 2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? 3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No (If No, skip questions 2 and 3) Yes No (If No, skip question 3) No (If No, fill out Page Three of the ACO-1)									,	
Date of first Produ	ction/Injection or	Resumed Produ	uction/	Producing Meth			Coolift 0	thor (Fundain)		
Estimated Produc	otion	Oil Bb	le.	Gas Mcf Water Bbls. 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 ☐ Used on Lease ☐ Open Hole				Open Hole	Perf. Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4)			Bottom		
(If vente	ed, Submit ACO-18	.)			(5	SUDITIIL I	ACO-5) (SUDI	nit ACO-4)		
Shots Per Foot	Perforation Top	Perforation Bottom			Bridge Plug Set At		Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)			Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion					
Operator	RJ Energy, LLC					
Well Name	PUGSLEY 11-A					
Doc ID	1684471					

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	20	portland	8	n/a
Production	5.875	2.875	9	875	portland	84	n/a

GARNETT TRUE VALUE HOMECENTER

410 N Maple Garnett, KS 66032 {785} 448-7106 FAX {785} 448-7135

Customer Copy INVOICE

THIS COPY MUST REMAIN AT MERCHANT AT ALL TIMES!

REPRIN

Page: 1 Invoice: 10206967 Special Time: 16:11:59 Instructions : Ship Date: 01/21/14 Invoice Date: 01/21/14 Sale rep #: MIKE Acct rep code: Due Date: 02/08/14 Sold To: ROGER KENT Ship To: ROGER KENT 22082 NE NEOSHO RD (785) 448-6995 NOT FOR HOUSE USE GARNETT, KS 66032 (785) 448-6995 Customer #: 0000357 Customar PO-

		Order By:		Customer PO:	Customer PO:				Oustonier	
87 T 1	popimg01			DECODISTICAL	U/M ITEM#	L	SHIP	ORDER		
4250.4 210.0 270.0 5923.6	7.5900 15.0000 15.0000 10.9900	7.5900 BAG 15.0000 PL 15.0000 PL 10.9900 BAG	distribution to the state of th	DESCRIPTION MIX 80 LBS PER BAG CH PALLET CH PALLET ND CEMENT-94#	FLY ASH MONARO MONARO	CPFA CPMP CPMP CPPC	BAG PL PL	P P	560.00 14.00 18.00 539.00	560.00 14.00 18.00 539.00
			деней-дення обеснов разменей выправнувания маналу и дення дення (дення павамента на						e forme en primere and the section of the section o	
10654.01	les total	Sa	tinas			SHIP V				и,
868.31	es tax	10654.01 0.00 sai	Taxable Non-taxable Tax #	1	RECEIVED COMPLETE	x				

1 - Customer Copy

TOTAL \$11522.32

R.J. Enterprises 22082 NE Neosho RD Garnett, KS 66032

Pugsley 11-A

			Start 2-21-14
4	soil	4	Finish 2-24-14
3	clay/rock	7	
52	lime	<i>59</i>	
159	shale	218	
33	lime	251	
21	shale	272	
3	lime	275	
47	shale	322	set 20' of 7"
111	lime	433	ran 875.6 of 27/8
173	shale	606	cemented to surface 84 sxs
17	lime	623	
56	shale	679	
32	lime	711	
25	shale	736	
10	lime	746	
18	shale	764	
7	lime	771	
10	shale	781	4
7	lime	788	
20	shale	808	
5	sandy shale	813	odor
16	Bkn sand	829	good show
4	sandy shale	833	good show
10	Bkn sand	843	good show
4	Dk sand	847	show
34	shale	881	T.D.