

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD

Gas DH EOR

OG GSW

CM (Coal Bed Methane)

Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

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: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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HURRICANE SERVICES INC

Remit To: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202
316-303-9515

Customer:
RH CAPITAL-BEETS LLC
2015 CLARA DR
ATTN: THOMAS HECKMAN
JEFFERSON CITY, MO 65101

Invoice Date: 10/3/2022
Invoice #: 0363841
Lease Name: Bowers
Well #: 3
County: Woodson, Ks
Job Number: EP6161
District: East

Date/Description	HRS/QTY	Rate	Total
Longstring	0.000	0.000	0.00
Cement Pump Service	1.000	1,500.000	1,500.00
Heavy Eq Mileage	50.000	4.000	200.00
Light Eq Mileage	50.000	2.000	100.00
Ton Mileage	339.000	1.500	508.50
Vacuum Truck-80bbl	4.000	90.000	360.00
Fresh water	4,200.000	0.020	84.00
Thixatropic	120.000	30.000	3,600.00
Pheno Seal	120.000	1.750	210.00
Bentonite Gel	200.000	0.400	80.00
2 7/8" Rubber Plug	2.000	40.000	80.00

Total 6,722.50

TERMS: Net 30 days. Interest may be charged on past due invoice at rate of 1 ½% per month or maximum allowed by applicable state or federal laws. HSI has right to revoke any discounts applied in arriving at net invoice price if invoice is past due. If revoked, full invoice price without discount plus additional sales tax, as applicable, is due immediately and subject to interest charges. Customer agrees to pay all collection costs directly or indirectly incurred by HSI in the event HSI engages a third party to pursue collection of past due invoice.

SALES TAX: Services performed on oil, gas and water wells in Kansas are subject to sales tax, with certain exceptions. HSI relies on the well information provided by the customer in identifying whether the services performed on wells qualify for exemption.

WE APPRECIATE YOUR BUSINESS!



Customer	RH Capital-Beets	Lease & Well #	Bowers, #3	Date	10/3/2022
Service District	Garnett	County & State	Woodson	Legals S/T/R	27-26-14
Job Type	Longstring	<input checked="" type="checkbox"/> PROD	<input type="checkbox"/> INJ	<input type="checkbox"/> SWD	Job #
					Ticket #
					EP6161

Equipment #	Driver	Job Safety Analysis - A Discussion of Hazards & Safety Procedures			
89	Garrett Scott	<input checked="" type="checkbox"/> Hard hat	<input checked="" type="checkbox"/> Gloves	<input type="checkbox"/> Lockout/Tagout	<input type="checkbox"/> Warning Signs & Flagging
238	Nick Beets	<input checked="" type="checkbox"/> H2S Monitor	<input checked="" type="checkbox"/> Eye Protection	<input type="checkbox"/> Required Permits	<input type="checkbox"/> Fall Protection
193	Trevor Glasgow	<input checked="" type="checkbox"/> Safety Footwear	<input checked="" type="checkbox"/> Respiratory Protection	<input checked="" type="checkbox"/> Slip/Trip/Fall Hazards	<input checked="" type="checkbox"/> Specific Job Sequence/Expectations
110	Keith Detwiler	<input checked="" type="checkbox"/> FRC/Protective Clothing	<input checked="" type="checkbox"/> Additional Chemical/Acid PPE	<input checked="" type="checkbox"/> Overhead Hazards	<input checked="" type="checkbox"/> Muster Point/Medical Locations
		<input checked="" type="checkbox"/> Hearing Protection	<input checked="" type="checkbox"/> Fire Extinguisher	<input type="checkbox"/> Additional concerns or issues noted below	

Comments	

Product/ Service Code	Description	Unit of Measure	Quantity	Net Amount
C015	Cement Pump Service	ea	1.00	\$1,500.00
M010	Heavy Equipment Mileage	mi	50.00	\$200.00
M015	Light Equipment Mileage	mi	50.00	\$100.00
M020	Ton Mileage	tm	339.00	\$508.50
T010	Vacuum Truck - 80 bbl	hr	4.00	\$360.00
AF080	Fresh Water	gal	4,200.00	\$84.00
CP060	H854 Thixo	sack	120.00	\$3,600.00
CP125	Pheno Seal	lb	120.00	\$210.00
CP095	Bentonite Gel	lb	200.00	\$80.00
FE025	2 7/8" Rubber Plug	ea	2.00	\$80.00

Customer Section: On the following scale how would you rate Hurricane Services Inc.?		Net:	\$6,722.50
Based on this job, how likely is it you would recommend HSI to a colleague?		Total Taxable \$	-
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10		Tax Rate:	
State tax laws deem certain products and services used on new wells to be sales tax exempt, Hurricane Services relies on the customer provided well information above to make a determination if services and/or products are tax exempt.		Sale Tax:	\$ -
		Total:	\$ 6,722.50
HSI Representative: <i>Garrett Scott</i>			

TERMS: Cash in advance unless Hurricane Services Inc. (HSI) has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts shall pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws. In the event it is necessary to employ an agency and/or attorney to affect the collection, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount is immediately due and subject to collection. Prices quoted are estimates only and are good for 30 days from the date of issue. Pricing does not include federal, state, or local taxes, or royalties and stated price adjustments. Actual charges may vary depending upon time, equipment, and material ultimately required to perform these services. Any discount is based on 30 days net payment terms or cash. **DISCLAIMER NOTICE:** Technical data is presented in good faith, but no warranty is stated or implied. HSI assumes no liability for advice or recommendations made concerning the results from the use of any product or service. The information presented is a best estimate of the actual results that may be achieved and should be used for comparison purposes and HSI makes no guarantee of future production performance. Customer represents and warrants that well and all associated equipment in acceptable condition to receive services by HSI. Likewise, the customer guarantees proper operational care of all customer owned equipment and property while HSI is on location performing services. The authorization below acknowledges the receipt and acceptance of all terms/conditions stated above, and Hurricane has been provided accurate well information in determining taxable services.

X _____ **CUSTOMER AUTHORIZATION SIGNATURE**



HURRICANE SERVICES INC

Remit To: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202
316-303-9515

Customer:
RH CAPITAL-BEETS LLC
2015 CLARA DR
ATTN: THOMAS HECKMAN
JEFFERSON CITY, MO 65101

Invoice Date: 9/27/2022
Invoice #: 0363636
Lease Name: Bowers
Well #: 5 (New)
County: Woodson, Ks
Job Number: EP6101
District: East

Date/Description	HRS/QTY	Rate	Total
Longstring	0.000	0.000	0.00
Cement Pump Service	1.000	1,500.000	1,500.00
Heavy Eq Mileage	50.000	4.000	200.00
Light Eq Mileage	50.000	2.000	100.00
Ton Mileage	299.450	1.500	449.18
Vacuum Truck-80bbl	4.000	90.000	360.00
Fresh water	4,200.000	0.020	84.00
Thixotropic	106.000	30.000	3,180.00
Pheno Seal	106.000	1.750	185.50
Bentonite Gel	200.000	0.400	80.00
2 7/8" Rubber Plug	2.000	40.000	80.00

Total 6,218.68

TERMS: Net 30 days. Interest may be charged on past due invoice at rate of 1 ½% per month or maximum allowed by applicable state or federal laws. HSI has right to revoke any discounts applied in arriving at net invoice price if invoice is past due. If revoked, full invoice price without discount plus additional sales tax, as applicable, is due immediately and subject to interest charges. Customer agrees to pay all collection costs directly or indirectly incurred by HSI in the event HSI engages a third party to pursue collection of past due invoice.

SALES TAX: Services performed on oil, gas and water wells in Kansas are subject to sales tax, with certain exceptions. HSI relies on the well information provided by the customer in identifying whether the services performed on wells qualify for exemption.

WE APPRECIATE YOUR BUSINESS!



Customer	RH Capital-Beets	Lease & Well #	Bowers, #5	Date	9/27/2022
Service District	Garnett	County & State	Woodson	Legals S/T/R	27-26-14
Job Type	Longstring	<input checked="" type="checkbox"/> PROD	<input type="checkbox"/> INJ	<input type="checkbox"/> SWD	New Well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> No
Equipment #	Driver	Job Safety Analysis - A Discussion of Hazards & Safety Procedures			

89	Garrett Scott	<input checked="" type="checkbox"/> Hard hat	<input checked="" type="checkbox"/> Gloves	<input type="checkbox"/> Lockout/Tagout	<input type="checkbox"/> Warning Signs & Flagging
238	Devin Katzer	<input checked="" type="checkbox"/> H2S Monitor	<input checked="" type="checkbox"/> Eye Protection	<input type="checkbox"/> Required Permits	<input type="checkbox"/> Fall Protection
193	Scott Mcrea	<input checked="" type="checkbox"/> Safety Footwear	<input checked="" type="checkbox"/> Respiratory Protection	<input checked="" type="checkbox"/> Slip/Trip/Fall Hazards	<input checked="" type="checkbox"/> Specific Job Sequence/Expectations
124	Keith Detwiler	<input checked="" type="checkbox"/> FRC/Protective Clothing	<input checked="" type="checkbox"/> Additional Chemical/Acid PPE	<input checked="" type="checkbox"/> Overhead Hazards	<input checked="" type="checkbox"/> Muster Point/Medical Locations
		<input checked="" type="checkbox"/> Hearing Protection	<input checked="" type="checkbox"/> Fire Extinguisher	<input type="checkbox"/> Additional concerns or issues noted below	

Comments					

Product/ Service Code	Description	Unit of Measure	Quantity	Net Amount
C015	Cement Pump Service	ea	1.00	\$1,500.00
M010	Heavy Equipment Mileage	mi	50.00	\$200.00
M015	Light Equipment Mileage	mi	50.00	\$100.00
M020	Ton Mileage	tm	299.45	\$449.18
T010	Vacuum Truck - 80 bbl	hr	4.00	\$360.00
AF080	Fresh Water	gal	4,200.00	\$84.00
CP060	H854 Thixo	sack	106.00	\$3,180.00
CP125	Pheno Seal	lb	106.00	\$185.50
CP095	Bentonite Gel	lb	200.00	\$80.00
FE025	2 7/8" Rubber Plug	ea	2.00	\$80.00

Customer Section: On the following scale how would you rate Hurricane Services Inc.?				Net:	\$6,218.68
Based on this job, how likely is it you would recommend HSI to a colleague?				Total Taxable	\$ -
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10				Tax Rate:	
State tax laws deem certain products and services used on new wells to be sales tax exempt. Hurricane Services relies on the customer provided well information above to make a determination if services and/or products are tax exempt.				Sale Tax:	\$ -
				Total:	\$ 6,218.68
				HSI Representative:	Garrett Scott

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X _____ **CUSTOMER AUTHORIZATION SIGNATURE**



CEMENT TREATMENT REPORT					
Customer:	RH Capital-Beets	Well:	Bowers, #5	Ticket:	EP6101
City, State:		County:	Woodson	Date:	9/27/2022
Field Rep:	Bryson Owens	S-T-R:	27-26-14	Service:	Longstring

Downhole Information		Calculated Slurry - Lead				Calculated Slurry - Tail			
Hole Size:	5 5/8 in	Blend:	Thixo 1# PS			Blend:			
Hole Depth:	1305 ft	Weight:	13.5 ppg			Weight:	ppg		
Casing Size:	2 7/8 in	Water / Sx:	9.6 gal / sx			Water / Sx:	gal / sx		
Casing Depth:	1145 ft	Yield:	1.91 ft ³ / sx			Yield:	ft ³ / sx		
Tubing / Liner:	in	Annular Bbbs / Ft.:	bbs / ft.			Annular Bbbs / Ft.:	bbs / ft.		
Depth:	ft	Depth:	ft			Depth:	ft		
Tool / Packer:		Annular Volume:	0.0 bbbls			Annular Volume:	0 bbbls		
Tool Depth:	ft	Excess:				Excess:			
Displacement:	bbbls	Total Slurry:	0.0 bbbls			Total Slurry:	0.0 bbbls		
		Total Sacks:	0 sx			Total Sacks:	0 sx		

TIME	RATE	PSI	BBLs	BBLs	REMARKS
12:30 PM			-	-	On location, Held safety meeting
	4.0				Established circulation
	4.0				Mixed and pumped 200# od Bentonite Gel followed by 4 BBL of fresh water
	4.0				Mixed and pumped 106 SKS of thixo cement with 1# PS, Cement to surface
	4.0				Flushed pump clean
	1.0				Pumped 2 2 7/8" rubber plugs to casing TD with 6.63 BBL of fresh water
					Pressured up to 800 PSI, Well held pressure
					Released pressure to set float Valve
	4.0				Washed up Equipment
2:00 PM					Left Location

CREW		UNIT	SUMMARY		
Cementer:	Garrett Scott	89	Average Rate	Average Pressure	Total Fluid
Pump Operator:	Devin Katzer	238	3.5 bpm	- psi	- bbbls
Bulk #1:	Scott Mcrea	193			
Bulk #2:	Keith Detwiler	124			

WoCo Drilling LLC

1135 30th Rd
 Yates Center, Kansas 66783
 Steve 620-330-6328 Nick 620-228-2320

Operator License # 35722		API # 15-207-29822	
Operator: RH Capitol-Beets		Lease: Bowers	
Address: 2015 Clara DR, Jefferson City ,Mo 65101		Well #12	
Phone: 620-496-6804		Spud Date: 9/21/2022 Completed:9/23/2022	
Contractor License: 33900		Location: Sec: 27 TWP: 26s R: 14e	
T.D. 1306	Bite Size:5.875	3795 FNL	
Surface Pipe Size: 7"	Surface Depth: 45.8'	2145 FEL	
Kind of Well: oil		County: Woodson	

Drilling Log

Strata	From	To	Strata	From	To
Soil-Sand	0	14	Lime	946	950
Sandy Clay	14	20	Shale	950	954
Shale	20	29	Lime	954	983
Lime	29	34	Shale	983	1007
Shale	34	41	Lime	1007	1043
Lime	41	43	Shale	1043	1053
Shale	43	220	Lime	1053	1055
Lime	220	339	Shale	1055	1057
Shale	339	368	Brk Oil sand	1057	1064
Lime	368	386	Shale	1064	1112
Shale	386	405	Lime	1112	1117
Lime	405	468	Shale	1117	1230
Lime Brk	468	505	Blk Shale	1230	1235
Lime	505	508	Shale	1235	1239
Shale	508	553	Badly Broken Sand	1239	1241
Lime	553	643	Sandy Shale Oil Oder	1241	1250
Blk Shale	643	654	Brk Sand Some Free Oil	1250	1255
Lime	654	707	Sandy Shale	1255	1265
Blk Shale	707	713	Sandy Shale Free Oil	1265	1270
Lime	713	740	Shale	1270	1306
Shale	740	825			
Lime	825	829	TD 1306		
Shale	829	841			
Lime	841	845	Ran 2-7/8" Pipe		
Shale	845	856			
Lime	856	865	Cemented Surface		
Shale	865	946	10 Sacks		

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