

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 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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**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Raney Oil Company, LLC

7/34S/ 6E Cowley, KS

4665 Bauer Brook Court
Lawrence, KS
66049-9013
ATTN: Tom Raney/Roger Mart

Jarboe #1A

Job Ticket: 66726

DST#: 1

Test Start: 2021.01.14 @ 08:35:00

GENERAL INFORMATION:

Formation: **Upper Mississippian**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 10:17:50

Time Test Ended: 16:19:00

Test Type: Conventional Bottom Hole (Initial)

Tester: Jimmy Ricketts

Unit No: 80

Interval: 2655.00 ft (KB) To 3049.00 ft (KB) (TVD)

Reference Elevations: 1124.00 ft (KB)

Total Depth: 3094.00 ft (KB) (TVD)

1116.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 8.00 ft

Serial #: 8369 Outside

Press@RunDepth: 158.60 psig @ 2656.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2021.01.14

End Date:

2021.01.14

Last Calib.:

2021.01.14

Start Time: 08:35:01

End Time:

16:19:00

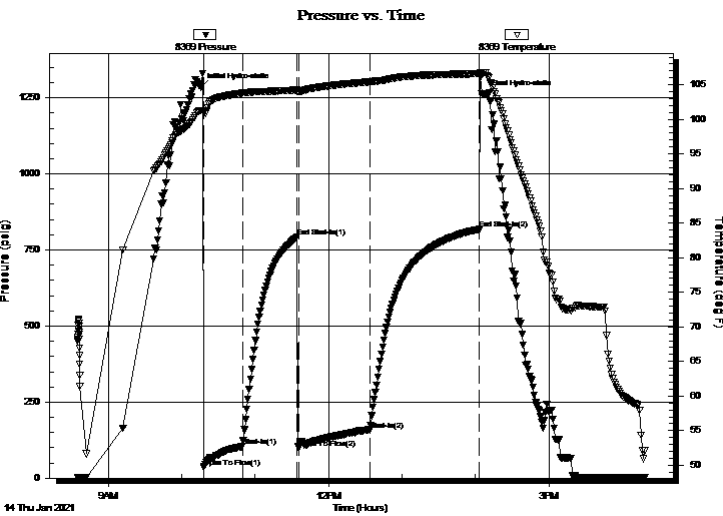
Time On Btm:

2021.01.14 @ 10:15:50

Time Off Btm:

2021.01.14 @ 14:07:09

TEST COMMENT: IF - Weak blow building to strong blow 10 minutes into initial flow period. Continuing to build to 54 inches of water.
FF - Weak blow building to strong blow 2 minutes into final flow period. Continuing to build to 163 inches of water.



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1285.17	101.26	Initial Hydro-static
2	34.67	100.88	Open To Flow (1)
34	104.02	103.80	Shut-In(1)
79	793.77	104.23	End Shut-In(1)
80	97.20	104.07	Open To Flow (2)
138	158.60	105.42	Shut-In(2)
228	818.24	106.59	End Shut-In(2)
232	1261.08	106.72	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
280.00	GV/SOCM 2%G 5%O & 93%M	2.32
0.00	900' GIP 100%G	0.00
0.00	TS SOCM 10%O & 90%M	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Raney Oil Company, LLC

7/34S/ 6E Cowley, KS

4665 Bauer Brook Court
Lawrence, KS
66049-9013
ATTN: Tom Raney/Roger Mart

Jarboe #1A

Job Ticket: 66726

DST#: 1

Test Start: 2021.01.14 @ 08:35:00

Mud and Cushion Information

Mud Type: Gel Chem

Mud Weight: 9.00 lb/gal

Viscosity: 66.00 sec/qt

Water Loss: 6.80 in³

Resistivity: ohm.m

Salinity: 1100.00 ppm

Filter Cake: inches

Cushion Type:

Cushion Length: ft

Cushion Volume: bbl

Gas Cushion Type:

Gas Cushion Pressure: psig

Oil API:

Water Salinity: deg API

ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
280.00	GV SOCM 2%G 5%O & 93%M	2.315
0.00	900' GIP 100%G	0.000
0.00	TS SOCM 10%O & 90%M	0.000

Total Length: 280.00 ft Total Volume: 2.315 bbl

Num Fluid Samples: 0

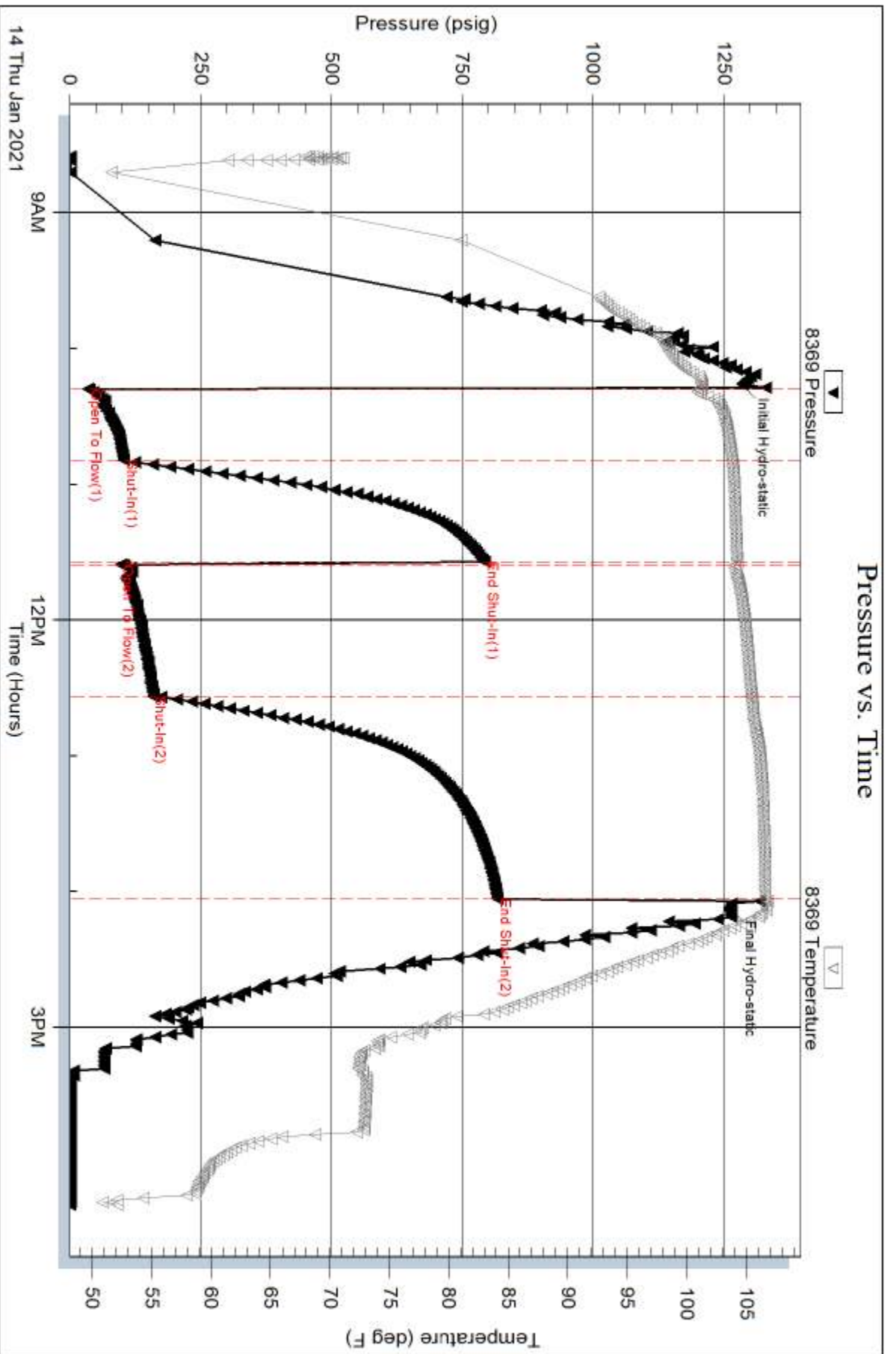
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



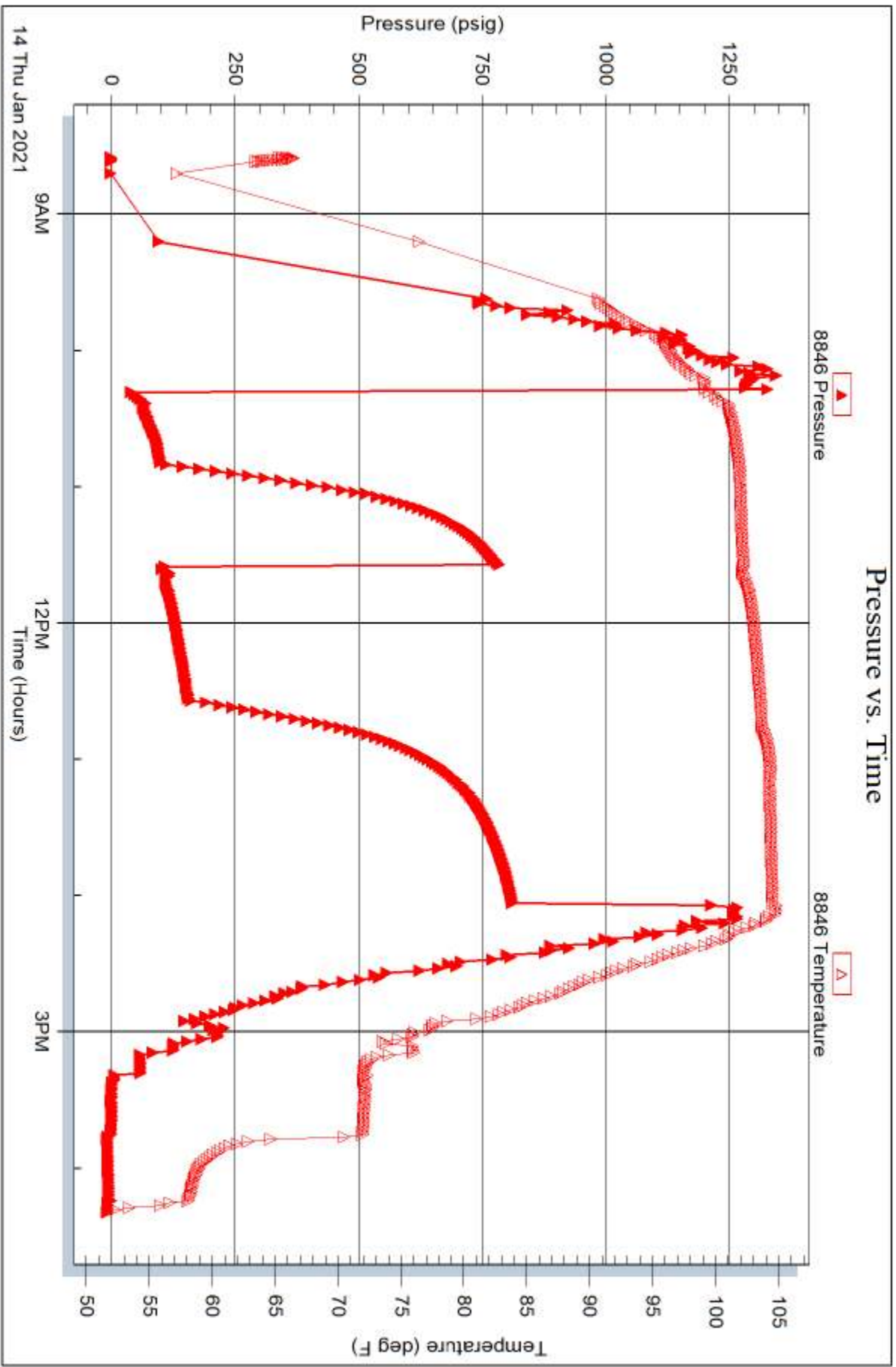
Serial #: 8846

Inside

Raney Oil Company, LLC

Jarboe #1A

DST Test Number: 1



Trilobite Testing, Inc

Ref. No: 66726

Printed: 2021.01.14 @ 16:59:21

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



Cement or Acid Field Report
 Ticket No. 5374
 Foreman David Gardner
 Camp Eureka

API# 15-035-24729

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
1-9-21	1375	Jarboe #1A	7	34 S.	6 E.	Cowley	KS
Customer			Unit #	Driver	Unit #	Driver	
RA Energy LLC			102	Zevi			
Mailing Address			110	Steve			
11615 Rosewood St. Ste 100							
City	State	Zip Code					
Leawood	KS	66211					

Job Type Surface Hole Depth 354' K.B. Slurry Vol. 55 Bbl Tubing _____
 Casing Depth 348.71' K.B. Hole Size 12 1/4" Slurry Wt. 15# Drill Pipe _____
 Casing Size & Wt. 8 5/8" 24" Cement Left in Casing 15' +/- Water Gal/SK 6.5 Other _____
 Displacement 21 Bbl Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: Safety Meeting. Rig up to 8 5/8" casing. Break circulation w/ 10 Bbl fresh water. Mixed 200 SKS Class 'A' Cement w/ 3% Caclz, 2% Gel, 1/4" Floseal/sk @ 15#/gal, yield 1.55 = 55 Bbl slurry. Displace w/ 21 Bbl fresh water. Shut down. Close casing in. Good cement returns to surface = 4 Bbl to pit. Job complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C101	1	Pump Charge	890.00	890.00
C107	60	Mileage	4.20	252.00
C200	200 SKS	Class 'A' Cement	15.75	3150.00
C205	565#	Caclz 3%	.63	355.95
C206	375#	Gel 2%	.21	78.75
C209	50#	Floseal 1/4"/sk	2.35	117.50
C108B	9.4 Tons	Ton Mileage - Bulk Truck	1.40	789.60
<u>Thank You</u>				
			Sub Total	5,633.80
			Less 5%	293.72
			Sales Tax <u>6.5%</u>	240.64
Authorization <u>Deion Vargus</u>	Title <u>Tool pusher</u>	Total	5,580.72	

I 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.

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



Cement or Acid Field Report
 Ticket No. **5430**
 Foreman Russell McCoy
 Camp Eureka

API 15-035-24729

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
1-16-21	1875	Jarboe # 1 A	7	34 S	6 E	Cowley	KS
Customer			Unit #	Driver	Unit #	Driver	
R.A. Energy LLC			105	JASON			
Mailing Address			112	JOSH			
11615 ROSEWOOD ST STE 100			115	AB			
City	State	Zip Code					
LEAWOOD	KS	66211					

Job Type Longstring Hole Depth 3363 Slurry Vol. 21-^{LEAD} 46 Tai Tubing _____
 Casing Depth 3347 16.8 Hole Size 7 7/8 Slurry Wt. 13.3 13.8 Drill Pipe _____
 Casing Size & Wt. 5 1/2 17 # Cement Left in Casing 42 Water Gal/SK _____ Other _____
 Displacement 79 Displacement PSI 1100 Bump Plug to 1400 BPM 5

Remarks: Safety meeting + Job Procedure, TAG Bottom w/ 5 1/2 casing seat collar @ 3347 G.L. Rig to 5 1/2 circulate 1 hr to bring vis to 38-40
Rig to cement, Pump 5 Bbl fresh water, mix 75 SKs 60/40 light cement = 6% Gel 2# Phenoseal @ 13.3 yield 1.57 = 21 slurry Tail w/ 150 SKs T.S.
cement 5# Kolseal 1# Phenoseal 1/3% CFL-115 @ 13.8 w/ yield 1.74 wash out
Pump + Liner, Release 5 1/2 Latch Down Plug Displace Plug to seat @ 3305' Final Pump PSI 1100# Bump Plug to 1600# wait 2 min check float
float hold. Job complete. Good circulation during cementing procedure.
Plug Rate hole 25 SKs @ 40 THANK YOU Russell + crew
Centralizers # 2, 4, 6, 8, 10, 16, 18, 27, 34, 40. Baskets # 11 29 17

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-102	1	Pump Charge	1100.00	1100.00
C-107	60	Mileage	4.20	252.00
C-203	100 SKs	60/40 Pozmix cement	13.40	1340.00
C-206	515 #	Gel = 6%	.21	108.15
C-208	200 #	Phenoseal = 2# Per/SK	1.30	260.00
C-201	150 SKs	Thickset cement	20.50	3075.00
C-207	750 #	Kolseal = 5# Per/SK	.47	352.50
C-208	150 #	Phenoseal 1# Per/SK	1.30	195.00
C-211	50 #	CFL-115 1/3%	11.00	550.00
C-1088	12.55	Ten Ten Mileage Bulk Trucks	1.40	1054.20
C-691	1	5 1/2 Guide Shoe	175.00	175.00
C-674	1	5 1/2 AFD Float collar w/ Latch Down	359.00	359.00
C-604	3	5 1/2 cement Baskets	236.00	708.00
C-504	10	5 1/2 x 7 7/8 Centralizers	50.00	500.00
C-421	1	5 1/2 Latch Down Plug	242.00	242.00
C-222	5	gallon KCL mixed (IN 1st 40 Bbl Displacement water)	30.00	150.00
		SubTOTAL		10420.85
		SubTOTAL	-5%	<54109>
		6.5% Sales Tax		520.95
		Total		10394.71

Authorization Roger Martin Title Geo

I 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.