CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION KOLAR Document ID: 1712571

Form ACO-1 January 2018 Form must be Typed Form must be Signed All blanks must be Filled

# WELL COMPLETION FORM

Confidentiality Requested:

Yes No

WELL HISTORY - DESCRIPTION OF WELL & LEASE

| OPERATOR: License #   | API No.:  |  |  |  |
|---|---|--|--|--|
| Name:   | Spot Description:   |  |  |  |
| Address 1:  |   |  |  |  |
| Address 2:  | Feet from Dorth / South Line of Section   |  |  |  |
| City: State: Zip:+  | Feet from Cast / West Line of Section   |  |  |  |
| Contact Person:   | Footages Calculated from Nearest Outside Section Corner:                        |  |  |  |
| Phone: ()   |   |  |  |  |
| CONTRACTOR: License #   | GPS Location: Lat:, Long:   |  |  |  |
| Name:   | (e.g. xx.xxxx) (e.gxxx.xxxx)  |  |  |  |
| Wellsite Geologist:   | Datum: NAD27 NAD83 WGS84  |  |  |  |
| Purchaser:  | County:   |  |  |  |
| Designate Type of Completion:   | Lease Name: Well #:   |  |  |  |
| New Well Re-Entry Workover  | Field Name:   |  |  |  |
|   | Producing Formation:  |  |  |  |
|   | Elevation: Ground: Kelly Bushing:   |  |  |  |
| ☐ Gas ☐ DH ☐ EOR<br>□ 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?   |  |  |  |
| 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.   |  |  |  |
|   | w, w, w, w, w,  |  |  |  |
| Original Comp. Date: Original Total Depth:  |   |  |  |  |
| Deepening     Re-perf.     Conv. to EOR     Conv. to SWD     Plug Back     Liner     Conv. to GSW     Conv. to Producer       | Drilling Fluid Management Plan<br>(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 #:   | Operator Name:  |  |  |  |
| GSW Permit #:   | Lease Name: License #:  |  |  |  |
|   |   |  |  |  |
| Spud Date or         Date Reached TD         Completion Date or           Description         Description         Description | 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 II III Approved by: Date:                 |  |  |  |  |

|   | CC  |   |  | TION #1  | KO                         | LAR Docu        | ument ID: 1712                |  |
|---|---|---|--|--|----------------------------|-----------------|-------------------------------|--|
| Operator Name:S. R East West  |   |   |  |  |                            | Well #:         |                               |  |
| open and closed, flowing<br>and flow rates if gas to s<br>Final Radioactivity Log,  | g and shut-in press<br>surface test, along<br>Final Logs run to c | formations penetrated. D<br>sures, whether shut-in pre<br>with final chart(s). Attach<br>obtain Geophysical Data a<br>or newer AND an image f | ssure reached sta<br>extra sheet if mo<br>and Final Electric | atic level, hydrosi<br>re space is need<br>Logs must be em | atic pressures, bot<br>ed. | tom hole temp   | erature, fluid recovery,      |  |
| Drill Stem Tests Taken<br>(Attach Additional Sh<br>Samples Sent to Geolog<br>Cores Taken<br>Electric Log Run<br>Geologist Report / Mud<br>List All E. Logs Run: | eets)<br>gical Survey   | <ul> <li>Yes No</li> </ul>                    |  |  | ion (Top), Depth ar        | nd Datum<br>Top | Sample                        |  |
|   |   | Report all strings set-o  | conductor, surface, in                                       |  |                            | 1               |                               |  |
| Purpose of String   | Size Hole<br>Drilled  | Size Casing<br>Set (In O.D.)  | Weight<br>Lbs. / Ft.   | Setting<br>Depth   | Type of<br>Cement          | # Sacks<br>Used | Type and Percent<br>Additives |  |

#### ADDITIONAL CEMENTING / SQUEEZE RECORD

| Purpose: Deptrin Type of Cement # Sacks Used Type ar<br>Perforate | nd Percent Additives |
|---|----------------------|
| Protect Casing Plug Back TD                                       |                      |
| Plug Off Zone   |                      |

Yes

| 1. Did you perform a hydraulic fracturing treatment on this well? |
|---|
|---|

Yes 2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes 3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry?

No (If No, skip questions 2 and 3) No (If No, skip question 3)

| No | (If No, fill out Pa | ge Three of the ACO-1) |
|----|---------------------|------------------------|
|----|---------------------|------------------------|

| Date of first Production/Injection or Resumed Production/<br>Injection: |                    |                      |         | Producing M         | ethod:    | ping 🗌 Gas L  | ift Other (Explain)                                 | )                 |                       |
|---|--------------------|----------------------|---------|---------------------|-----------|---------------|---|-------------------|-----------------------|
| Estimated Production Oil Bbls.<br>Per 24 Hours                          |                    | Gas                  | Mcf     | Water               | Bbls.     | Gas-Oil Ratio | Gravity   |                   |                       |
| Vented  | DSITION OF G       | sed on Lease         |         |                     |           |               | p. Commingled                                       | PRODUCTION<br>Top | N INTERVAL:<br>Bottom |
| Shots Per<br>Foot   | Perforation<br>Top | Perforatio<br>Bottom | in      | Bridge Plug<br>Type |           |               | ot, Cementing Squeeze<br>and Kind of Material Used) | Record            |                       |
|   |                    |                      |         |                     |           |               |   |                   |                       |
|   |                    |                      |         |                     |           |               |   |                   |                       |
| TUBING RECORI   | D: Size            | 9:                   | Set At: |                     | Packer At | t:            |   |                   |                       |

| Form      | ACO1 - Well Completion        |
|-----------|-------------------------------|
| Operator  | Bobcat Oilfield Service, Inc. |
| Well Name | ALVA SCHENDEL 27-22           |
| Doc ID    | 1712571                       |

## Casing

| Purpose<br>Of String | Size Hole<br>Drilled | Size<br>Casing<br>Set | Weight | Setting<br>Depth | Type Of<br>Cement |     | Type and<br>Percent<br>Additives |
|----------------------|----------------------|-----------------------|--------|------------------|-------------------|-----|----------------------------------|
| Surface              | 8.75                 | 6                     | 10     | 20               | Portland          | 5   | 50/50 POZ                        |
| Production           | 5.625                | 2.875                 | 8      | 714              | Portland          | 119 | 50/50 POZ                        |
|                      |                      |                       |        |                  |                   |     |                                  |
|                      |                      |                       |        |                  |                   |     |                                  |

### Summary of Changes

Lease Name and Number: ALVA SCHENDEL 27-22 API/Permit #: 15-121-31755-00-00 New Doc ID: 1712571 Parent Doc ID: 1680784 Correction Number: 1 Approved By: David Befort

| Field Name   | Previous Value | New Value  |
|--|----------------|------------|
| Date of First or<br>Resumed Production or<br>SWD or Enhr |                | 05/04/2023 |
| Approved Date  | 01/24/2023     | 05/08/2023 |
| Method Of Completion -<br>Perf                           | No             | Yes        |
| Perf_perf1bottom   |                | 681        |
| Perf_perf1top  |                | 671        |
| Perf_shots1  |                | 3          |
| Producing Method<br>Pumping                              | No             | Yes        |
| Production Interval #1                                   |                | 671        |
| Production Interval #3                                   |                | 681        |