### CORRECTION #2

KOLAR Document ID: 1723771

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.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:
□ Oil □ WSW □ SWD	Producing Formation:
Gas DH EOR	Elevation: Ground: Kelly Bushing:
☐ 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:sx cmt.
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 (Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
☐ Dual Completion Permit #:  ☐ SWD Permit #:	Leading of the delication and the section of the
SWD         Permit #:           EOR         Permit #:	Location of fluid disposal if hauled offsite:
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. 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 Approved by: Date:					

CORRECTION #2

KOLAR Document ID: 1723771

Operator Name:					Lease Na	ame: _			Well #:	
Sec Tw	pS.   I	R [	East	West	County:					
	, flowing and sl	hut-in pressure	es, whet	her shut-in pre	essure reache	ed stati	c level, hydrosta	tic pressures, bo		val tested, time tool erature, fluid recovery,
Final Radioactivi files must be sub							gs must be ema	iled to kcc-well-l	ogs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests -	Taken ional Sheets)		Ye	s No				on (Top), Depth a		Sample
Samples Sent to	Geological Su	rvey	Ye	s 🗌 No		Nam	9		Тор	Datum
Cores Taken Electric Log Run Geologist Repor List All E. Logs F	t / Mud Logs		☐ Ye ☐ Ye ☐ Ye	s No						
			Repor		RECORD	Ne	w Used	on etc		
Purpose of St	ring Si	ze Hole		e Casing	Weigh		Setting	Type of	# Sacks	Type and Percent
ruipose oi si	9	Drilled	Set	(In O.D.)	Lbs. / F	t.	Depth	Cement	Used	Additives
				ADDITIONAL	CEMENTING	3/SQU	EEZE RECORD			
Purpose:		Depth p Bottom	Туре	of Cement	# Sacks U	sed		Type and	Percent Additives	
Perforate Protect Ca		o zotto								
Plug Back Plug Off Z										
1 lag 0 li 2	0110									
<ol> <li>Did you perform</li> <li>Does the volume</li> <li>Was the hydraul</li> </ol>	e of the total base	e fluid of the hyd	raulic frac	cturing treatmer		-	Yes ns? Yes Yes	No (If No, s	kip questions 2 an kip question 3) Il out Page Three d	•
Date of first Produ	ction/Injection or	Resumed Produ	ction/	Producing Met	hod:					
Injection:	ouon, injouron or	Tiodamod Frode	Ottorii	Flowing	Pumping		Gas Lift C	other (Explain)		
Estimated Production Per 24 Hours		Oil Bbl	S.	Gas	Mcf	Wate	er B	ols.	Gas-Oil Ratio	Gravity
DISPO	OSITION OF GAS	S:		1	METHOD OF C	OMPLE	TION:			N INTERVAL:
Vented	Sold Use	ed on Lease	_ o	pen Hole	Perf.	_ ,		nmingled	Тор	Bottom
(If vente	ed, Submit ACO-18	8.)				(Submit	ACO-5) (Sub	mit ACO-4)		
Shots Per Foot	Perforation Top	Perforatio Bottom	n I	Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)	Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Justin Energy Corporation
Well Name	North Hoehn I-1
Doc ID	1723771

# Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9	7	10	22	Portland	6	50/50 POZ
Completio n	5.6250	2.8750	8	722	Portland	94	50/50 POZ

## **Summary of Changes**

Lease Name and Number: North Hoehn I-1

API/Permit #: 15-059-26404-00-00

New Doc ID: 1723771
Parent Doc ID: 1144440
Correction Number: 2

Approved By: David Befort

Field Name	Previous Value	New Value
Contractor License Number	8509	99975
Contractor Name	Evans Energy Development, Inc.	COMPANY SERVICING TOOLS
Fracturing Question 1		No
Geologist Report / Mud Logs?		No
Approved By	Deanna Garrison	David Befort
Approved Date	05/30/2013	08/02/2023
Method Of Completion - Perf	No	Yes
Perf_acid1		2" DML RTG
Perf_acid2		2" DML RTG
Perf_perf1bottom		644

# Summary of changes for correction 2 continued

Field Name	Previous Value	New Value
Perf_perf1top		639
Perf_perf2bottom		668
Perf_perf2top		658
Perf_shots1		3
Perf_shots2		3
Perforations		[[dataGrid]]
Production Interval #1		639
Production Interval #2		658
Production Interval #3		644
Production Interval #4		668
TopsDatum1		GL
TopsDepth1		639