CORRECTION #2

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION KOLAR Document ID: 1740983

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

Yes No	OIL & GAS CO
CONFIDEN	TIAL WELL COI
	WELL HISTORY - DES

Confidentiality Requested:

WELL COMPLETION FORM

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LL	- HISTORY	- DESCR	IPTION OF	WELL &	LEASE

OPERATOR: License #	API No.:		
Name:	Spot Description:		
Address 1:			
Address 2:	Feet from North / South Line of Section		
City: State: Zip:+	Feet from East / West Line of Section		
Contact Person:	Footages Calculated from Nearest Outside Section Corner:		
Phone: ()			
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:		
Gas DH EOR			
CM (Coal Bed Methane)			
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used? Yes No		
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)		
	Chloride content: ppm Fluid volume: bbls		
Commingled Permit #:	Dewatering method used:		
Dual Completion Permit #: SWD Permit #:			
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 III Approved by: Date:			