KOLAR Document ID: 1602996

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:	
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.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	Multiple Stage Cementing Collar Used? Yes No
Cathodic Other (Core, Expl., etc.):	
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	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(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 #:	Location of hald disposal in hadica offsite.
GSW Permit #:	Operator Name:
_	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. 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:										

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Page Two

Operator Name:					Lease Nam	ne:	e: Well #:							
Sec Tw	rpS	S. R	Eas	st West	County:									
	l, flowing an	d shut-in pres	sures, wh	ether shut-in pre	ssure reached	static	level, hydrostat	ic pressures, bo		val tested, time tool erature, fluid recovery,				
Final Radioactivi files must be sub							gs must be emai	led to kcc-well-l	ogs@kcc.ks.gov	v. Digital electronic log				
Drill Stem Tests (Attach Addit)		Yes No		Lo		n (Top), Depth a		Sample				
Samples Sent to	Geological	Survey		Yes No		Name			Тор	Datum				
Cores Taken Electric Log Run Geologist Report List All E. Logs F	t / Mud Log	s		Yes No Yes No Yes No										
			Rep	CASING	RECORD [Nev		on, etc.						
Purpose of St	tring	Size Hole Drilled		Size Casing let (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives				
				ADDITIONAL	CEMENTING /	SQUE	EEZE RECORD		<u>'</u>					
Purpose: Perforate		Depth Top Bottom	Тур	pe of Cement	# Sacks Use	ed		Type and	Percent Additives					
Protect Ca														
Plug Off Z														
Did you perform Does the volume Was the hydraul	e of the total	base fluid of the	hydraulic	fracturing treatment		-	Yes yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three					
Date of first Produ Injection:	ction/Injection	n or Resumed P	roduction/	Producing Meth	od:		Gas Lift O	ther <i>(Explain)</i>						
Estimated Product Per 24 Hours		Oil	Bbls.		Mcf	Water			Gas-Oil Ratio	Gravity				
DISPO	OSITION OF	GAS:		N	METHOD OF CO	MPLET	ΓΙΟΝ:			DN INTERVAL: Bottom				
Vented		Used on Lease		Open Hole		Dually (Submit A		nmingled nit ACO-4)	Тор	BOLLOTTI				
,	ed, Submit AC							·						
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Record							
TUBING RECORI	D: S	Size:	Set A	: -	Packer At:									

Form	ACO1 - Well Completion
Operator	Kansas Energy Company, L.L.C.
Well Name	HYDER JBD #16
Doc ID	1602996

Casing

Purpose Of String		Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	11.25	8.625	20	40	portland	9	none
Production	6.75	4.50	9.5	960	class A cement		kol seal,phen o seal

Ackarman Hardware & Lumber Ackarman Inc 160 East Main St Sedan KS 67361 620-725-3103 Fax: 620-725-5688



2110-204773 PAGE 1 OF 1

SOLD TO	JOB ADDRESS
KANSAS ENERGY COMPANY P. O. BOX 68 Sedan KS 67361	KANSAS ENERGY COMPANY P. O. BOX 68 Sedan KS 67361

ACCOUNT	JOB
00451	0
SOLD ON CUST PICKUP	10/5/2021 12:10:25 PM
BRANCH	1000
CUSTOMER PO#	DON MOKAK DRILLING
STATION	A2
CASHIER	BL
SALESPERSON	
ORDER ENTRY	

		Item	Description	0	11011000	Price			
		MP10092	PORTLAND CEMENT 92.6#	b	Y	-	.0000	Per EACH	Amount 135.0
Payment Me	thod(s	i) Buyer: MATT					SubT	otal	135.00
harge to Acct		148.50			KS	10.00%	Sales	Tax	13.50
				Please	Pay	This			148.50

Hyder

Hurricane Services, Inc. 250 N. Water St., Suite #200 Wichita, KS 67202



Customer	Kansas Energy C	omea		145	Tes Ma					Name and the second				
Service District			Trydel 35D#16								Date		10/8	/2021
Job Type	Long Srting	100	ROD		100		Ka	Legals S/T/I	-	35 13	Job#			
Equipment #	The same of the same	153 6	NOD	∐ in	n)		SWD	New Well?	TALL AFR	☐ No	Ticket #		FP:	2925
86	Driver John	1-					Job Safety A	inalysis - A Disci	ission of Hazai	ds & Safety	Procedures			
231	Kevin		lard hat I2S Monit	20			Gloves		Lockout		☐ Warning	Sions & Flao	aina	
214	Corbin	7					Eye Protectio		Require	d Permits	Fall Prote	ection	girig	
138/127	Bobby	N 2	afety Foo	twear			Respiratory P	rotection	☐ Slip/Trip	/Fall Hazards	Specific 1		/Evnor	tations.
	Водру	FRC/Protective Clothing Hearing Protection					Additional Ch	emical/Acid PPE		d Hazards	☐ Muster P	oint/Medical	Locatic	anons
			earing Pr	otection			Fire Extinguis	-	Addition	al concerns o	r issues noted be	low	Locatio	113
	Comments													
Product/ Service Code			Dog	scription	FAN				To Mary W					
M015	Light Equipment Mile	eage	065	cription				Unit of Measur	e Quantity				A	et Amount
	Heavy Equipment M							mi	60.0	0				\$98.4
the facilities of the same of	Ton Mileage				-			mi	60.0	0				\$196.8
								tm	282.0	0				\$346.8
010	Cement Pump Servi	ce							-					
050	Cement Plug Contain	ier						ea	1.0					\$615.0
								job	1.0	0				\$205.0
	Class A Cement							sack		-	-	-		
	Bentonite Gel							Ib	100.00		-	-		\$1,394.0
	(of Seal						***************************************	Ib	550.00	_		-		\$135,30
	heno Seal							Ib	40.00	1		+		\$307.50
P140 G	Granulated Salt			·				ľb	650.00			-		\$57.40
									000,00	+		+	-	\$266.50
F080 F1	resh Water							gal	5,460.00	1		-		
115 4									9,100.00					\$67.16
:115 4	1/2" Rubber Plug						0.00	ea	1,00					
30 Tr		111111										—		\$61.50
00 11	ransport - 130 bbl							hr	4.00				F-30-70-70-0	\$540.00
		- Indiana		-										\$340.00
					-									
		-	-											
Custome	er Section: On the fo	ollowing	g scale ho	ow would v	ou <u>rate</u>	Hurocar	ie Services Ja	2						
					State of Historical							Net:		\$4,291.42
Based	d on this job, how li	kely is	it you w	ould reco	mmend	HSI to	a colleague?		Total Taxable State tax laws des	S -	Tax Rate: ucts and services		2	\leq
									used on new wells	to be sales to	x exempt	Sale Tax:	\$	-
Unlikel	b 1 2 3	4	5	6 7	8	9		95	rumcane Service: well information at services and/or pri	love to make a	customer provided determination if exempt.	Total:		4 301 40
												i out.	Ψ	4,291.42

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 at the rate of 1 ½% 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 previously applied in arriving at net invoice price. Upon revocation, the full invoice price without separate price and in the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any discounts 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 not 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 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 terms/conditions stated above, and Hurricane has been provided accurate well information in determining texable services.

X	
	CUSTOMER AUTHORIZATION SIGNATUR



CEIVIER	NT TR	EATME	NT REF	PORT					V BOOK II	
Cu	stomer	Kansa	s Energy	y Company	We	ell:	Hudes IDD 4	440		
City	, State	:			Coun		Hyder JBD #	7 16	Ticket:	EP 2925
Fie	eld Rep	Mike J	ones		S-T-		CQ Ks	Date:	10/8/2021	
					5-1-	K;	6 35 13		Service:	Long Srting
		Informat			Calculate	d Slurry - I	Lead			
	le Size	The second secon	4 in		Blen	and the same of th				ated Slurry - Tail
	Depth		0 ft		Weigh		4.1 ppg		Blend:	
	ıg Size:				Water / S		8.1 gal / sx	W	Weight; ater / Sx;	ppg
Casing Tubing					Yiel	d: 1.	.68 ft ³ / sx		Yield:	gal / sx ft ³ / sx
ranning	Depth:		in rt		Annular Bbls / Ft	:	bbs / ft.	Annular E		bbs/ft.
Tool / F			TK .		Depti	Take 1	ft		Depth:	ft
	Depth:		ft		Annular Volume		0.0 bbls	Annular	Volume:	0 bbls
Displac			bbls		Exces				Excess:	
			STAGE	TOTAL	Total Slurry Total Sacks).9 bbis		il Slurry:	0.0 bbis
TIME	RATE	PSI	BBLs	BBLs	REMARKS	1	xe 00	Tota	l Sacks:	0 sx
			-	,						
10:00 AM			\vdash	-	On Location					
10:15 AM						***				
10.10 //			\vdash		JSA and rig up					
10:37 AM	2.0	100.0	22.0							
		100.0	32.0	32.0 32.0	Gel and water					
10:50 AM	2.0	500.0	29.9	61.9	Ran Cement					
				61.9	ran cement					
11:05 AM			5.0	66.9	Washed pump and lir	100	- 44-44			
					The state of the s	103		of Scott Section 1	-,	
11:08 AM	2.0		15.2		Displaced					
11:15am	_				Toped off well and wa	shed up	The second secon			
	\rightarrow		-+							
			-							
_		CREW			UNIT			SU	MMARY	
Ceme Pump Ope	enter:	John			86		Average Rate	Average Press		Total Fluid
	k #1:	Kevin			231		2.0 bpm	300 psi		82 bbls
	lk #1.	Corbin Bobby			214 138/127					
	THE RESERVE				130/12/		1			





P.O. Box 590 Caney, KS 67333

	Driller		Driller			Driller		JOD NO.					
	I		77	TOOTIE									KANSAS ENERGY
	Hammer No.	0.00	Rig No.		Cement Used		(Casing Used			2		
						Bit No.] ;		CHAUTAUQUA	County	Clinty	JBD 16	WEII NO.
						NO. Type size	י סונ		KS	State		HYDER	Lease
						From To	a			Type/Well			Loc.
						Bit No.		200	080	Depth			1/4
					1	type Size	Co			Hours			1/4
						From	Coring Record	10-5-21		Date Started	•	6 1 wp. 35 1/96,	Sec Two
					70 Nec.	To % Boo		10-6-21		Date Completed	000	35 Nye,	Dan

														_	_			-	_	_	_	279 305	_						0 40	From To
					117,980.	77,000	LIMIL	IIME	SHALE	SAND (OIL ODOR)	LIME	SHALE	SAND (OIL ODOR)	SANDY SHALE	GIVIE GIVE	TIME	SHALE	LIME	SHALE	SAND	SANDY SHALE	SHALE	SAND (WATER)	SHALE	LIME	SHALE	LIME	SHALE	SURFACE	Formation
																														From
1																													rolliation	Form
																													From To	Formation Record
										Maria																			Formation	
																													From	
																													To	
																													Formation	