KOLAR Document ID: 1607548

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: State: Zip:+	Feet from
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:
□ 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:w/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)
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 #:	·
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date	Quarter Sec.         TwpS. 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:						

KOLAR Document ID: 1607548

#### Page Two

Operator Name:					Lease Nam	ne:			Well #:		
Sec Tw	pS	S. R	Eas	t West	County:						
	l, flowing an	d shut-in press	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	Taken tional Sheets)			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 Logs	S		Yes No Yes No Yes No							
			Rep	CASING	RECORD [	New		on, etc.			
Purpose of St	tring	Size Hole Drilled		ize Casing et (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	ype of Cement # Sacks Use			eed Type and Percent Additives				
Protect Ca											
Plug Off Z											
Did you perform     Does the volume     Was the hydraul	e of the total I	base fluid of the	hydraulic f	racturing treatment		-	Yes S? Yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three		
Date of first Produ Injection:	iction/Injection	n or Resumed Pr	roduction/	Producing Meth	od:		Gas Lift O	ther <i>(Explain)</i>			
Estimated Product Per 24 Hours		Oil	Bbls.	Gas	Water			Gas-Oil Ratio	Gravity		
DISPO	OSITION OF	GAS:		N	METHOD OF CO	MPLET	ΓΙΟΝ:			ON INTERVAL:	
Vented		Used on Lease		Open Hole		Dually ( Submit A		nmingled	Тор	Bottom	
,	ed, Submit AC							·			
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)		
TUBING RECORI	D: S	ize:	Set At	:	Packer At:						

Form	ACO1 - Well Completion
Operator	Grand Mesa Operating Company
Well Name	SCHWEIZER 4-35
Doc ID	1607548

## Tops

Name	Тор	Datum
Tarkio	2447	-703
Topeka	2605	-863
Heebner	3007	-1265
Lansing	3190	-1448
Stark	3414	-1672
ВКС	3491	-1749
BPL	3536	-1794
Viola	3616	-1874
Simpson Shale	3730	-1988
Arbuckle	3800	-2058
LTD	3830	N/A

Form	ACO1 - Well Completion
Operator	Grand Mesa Operating Company
Well Name	SCHWEIZER 4-35
Doc ID	1607548

## Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	_		Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	23	241	60/40 Pozmix		3% CC; 2% Gel
Surface	7.875	8.625	23	241	Class "A"	160	N/A
Production	7.875	5.50	15.5	3819	H-LD	150	N/A
Production	7.875	5.50	15.5	3819	H-plug	50	N/A



### **OPERATING COMPANY**

(316) 265-3000 FAX: (316) 265-3455

1700 N. WATERFRONT PARKWAY BLDG. 600 WICHITA, KANSAS 67206-5514

# Scale 1:240 (5"=100') Imperial Measured Depth Log

Well Name: Schweizer

Well Id: 4-35

Location: 330' FNL & 916' FEL, Sec 35-T22S-R10W, Reno County, Kansas

License Number: API: 15-155-21781

Spud Date: 10/25/2021

Region: Reno County Drilling Completed: 10/31/2021

Surface Coordinates: NAD83

Lat: 38.0996854, Long: -98.3846148

**Bottom Hole Vertical hole** 

Coordinates:

Ground Elevation (ft): 1737' Logged Interval (ft): 2300' K.B. Elevation (ft): 1742'

To: RTD

Total Depth (ft): 3830'

Formation: Arbuckle at RTD

Type of Drilling Fluid: Chemical

Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

#### **OPERATOR**

Company: Grand Mesa Operating Company Address: 1700 N. Waterfront Parkway; Bldg. 600

Wichita, KS 67206-5514

316-265-3000

#### **WELLSITE GEOLOGIST**

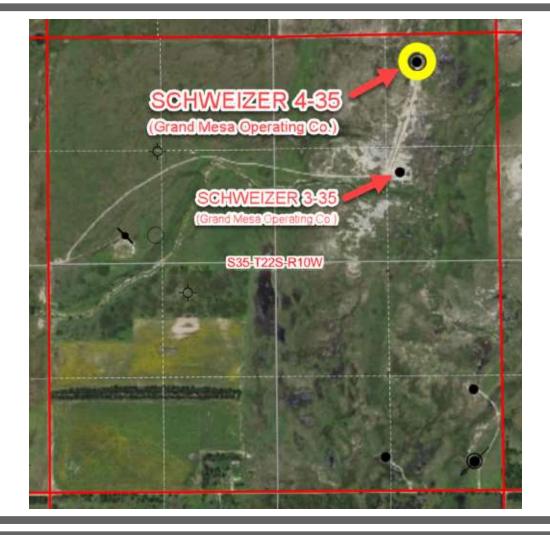
Name: Kent R. Matson

Company: Matson Geological Services, LLC

Address: 33300 W. 15th Street S.

Garden Plain, Kansas 67050

316-644-1975; kent4m@hotmail.com



#### **COMMENTS**

Grand Mesa Company Geologist: Steve Stribling, 316-265-3000 (office).

Drilling Contractor: Murfin Drilling Company Inc., Rig #104.

Tool Pusher: James Mayfield, 785-269-7684 (cell).

Gas Detector System (iball/Bloodhound): Keith Reavis, 620-617-4091 (cell).

Surface Casing: 8 5/8" set at 241' (KB) w/250 sx cement, did not circ; pumped 160 sx w/1" pipe in back side,

cement did circ.

Production Casing: Based on field observations of drill cuttings and electric log review, production casing (5.5") was installed to further evaluate potential oil production.

Mud by: MudCo/Service Mud, Inc.; Brad Bortz, 620-793-2421 (cell) and Justin Whiting, 620-214-3630 (cell).

DST's by: Trilobite Testing: No DSTs were conducted.

Reserve pit pumping/transfer: Monster Pump Operations, Inc., Chris Hageman, 785-623-4488 (office).

Logs by: ELI Wireline (CND w/PE, DI w/SP, Micro, Sonic), Gus Pfanenstiel, 785-628-6395 (cell).

RTD= 3830', -2088'.

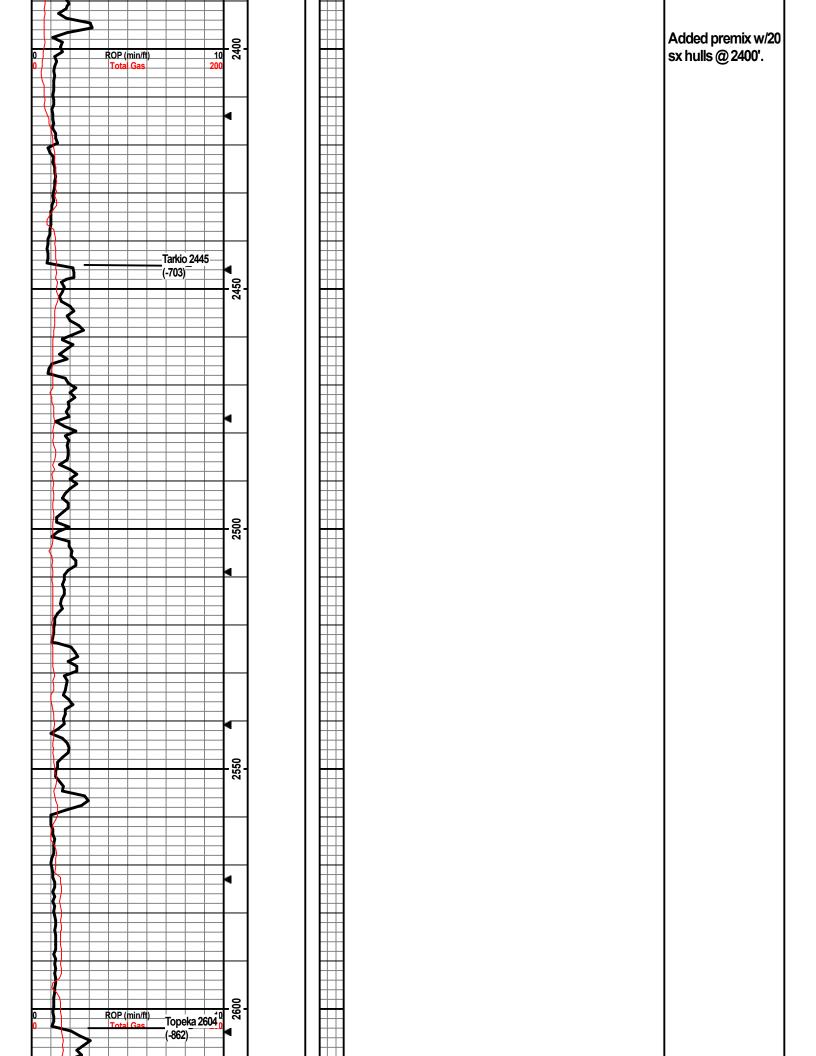
LTD= 3830', -2088'.

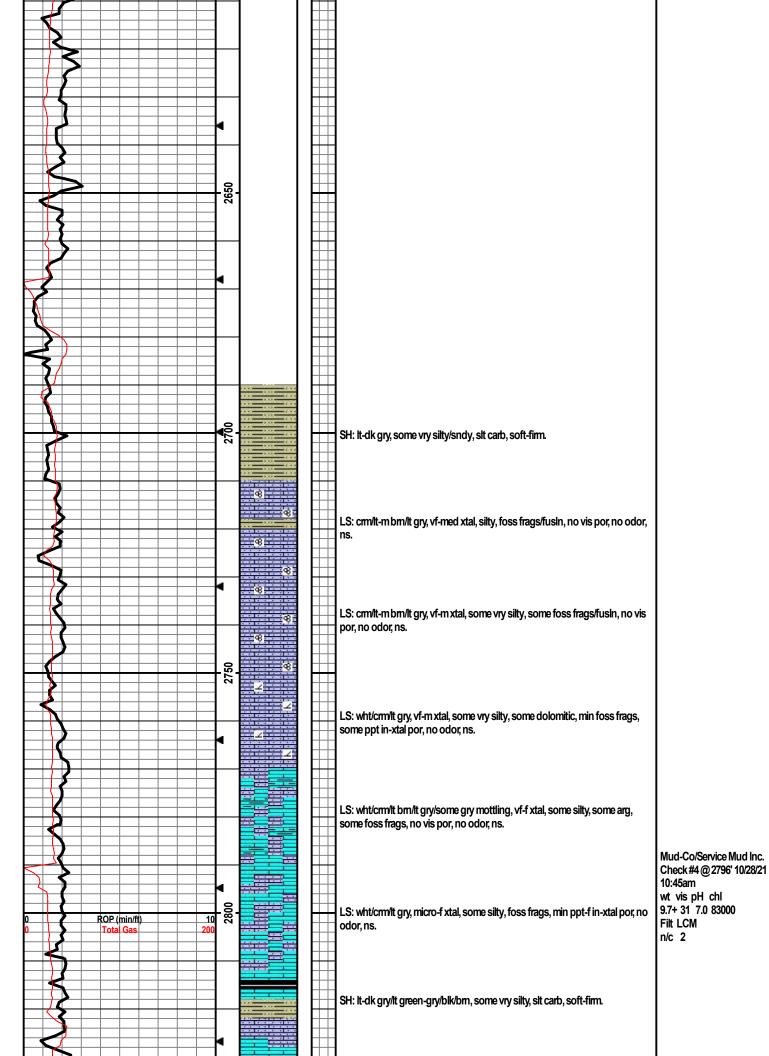
## **FORMATION TOPS**

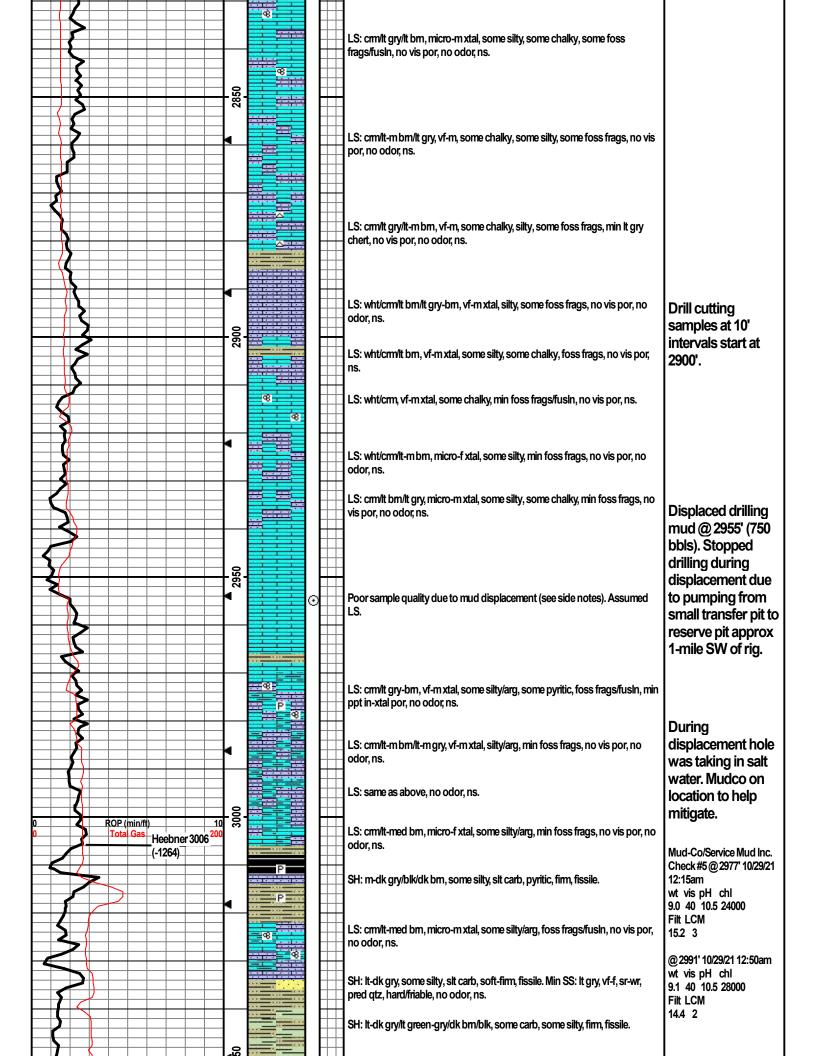
FORMATION	SAMP	LE TOPS	LOG TOPS			
	Depth	Datum	Depth	Datum		
Tarkio	2445'	-703	2445'	-703		
Topeka	2604'	-862	2605'	-863		
Heebner	3006'	-1264	3007'	-1265		
Lansing	3192'	-1450	3190'	-1448		
Stark Shale	3412'	-1670	3414'	-1672		
Base KC	3492'	-1750	3491'	-1749		
Viola	3614'	-1872	3616'	-1874		
Simpson SH	3732'	-1990	3730'	-1988		
Arbuckle	3801	-2059	3800'	-2058		
RTD	3830	-2088				
LTD			3830'	-2088		

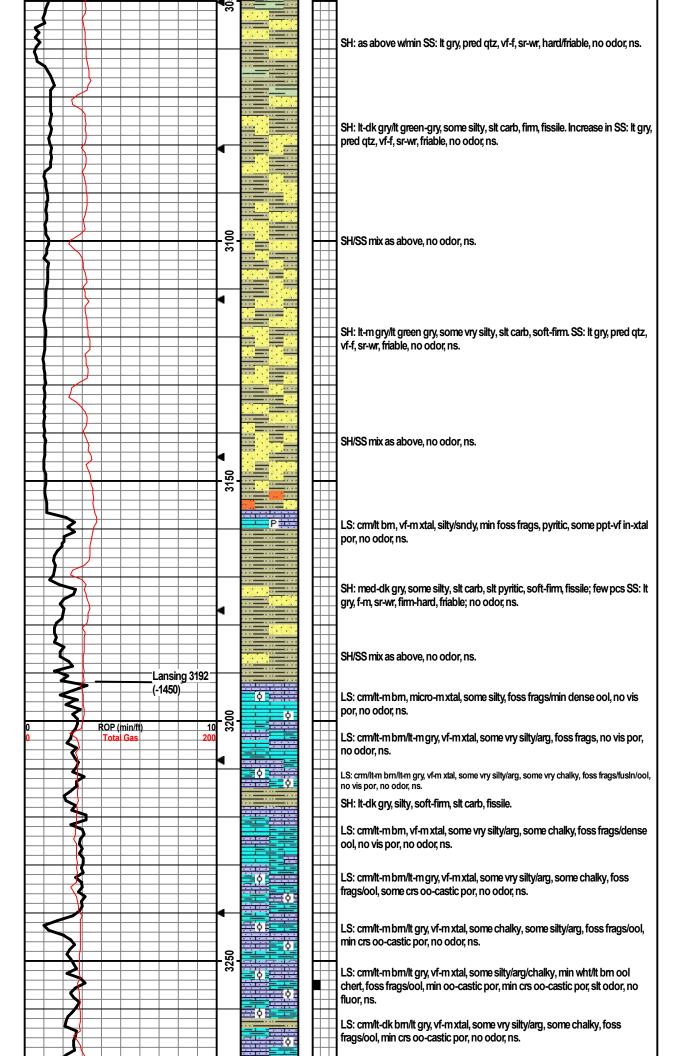
		ROC	K TYPES			
<u>LITHOLO</u> GY	700 W TWO	Sltysh	0	Ostra	•	Ferrpel
Anhy		Sdy dolo	♥	Pelec	2	Ferr
△△△△△ Cht	A const	Silty dolo	ø	Pellet	~	Glau
Coal	7-7-7-7	Shy dolo	•	Pisolite	111	Gyp
Congl		Shaly Is	Ø	Plant	4	Hvymin
Dol		•	ш	Strom	K	Kaol
Gyp	FOSSIL		<b>Φ</b>	Fuss	TT	Marl
Lmst		Algae	6	Oomold	*	Minxl
Salt	≖ .	Amph			Φ	Nodule
Shale	P	Belm	<b>MINERA</b>	L	••	Phos
Shcol		Bioclst	11	Anhy	P	Pyr
Shgy	Φ	Brach		Arggrn	<b>⊞</b>	Salt
Sitst	T	Bryozoa	=	Arg		Sandy
Ss	ভ	Cephal	В	Bent		Silt
Carb sh	<u> </u>	Coral	N	Bit		Sil
Dol Dol	0	Crin	ß	Brecfrag	S	Sulphur
Dtd .	8	Echin	1	Calc	$\overline{\vee}$	Tuff
Gry sh	ex	Fish	•	Carb	*	Chlorite
Sandylms	98	Foram	<u> </u>	Chtdk		Dol
Shale	F	Fossil		Chtlt	\$1 <sub>0</sub>	Sand
Sitstn	Ø	Gastro	∠	Dol		Sity
Shlysits	<b>♦</b>	Oolite	+	Feldspar		-
Shlysits	<u> </u>	Oolite	+	Feldspar		

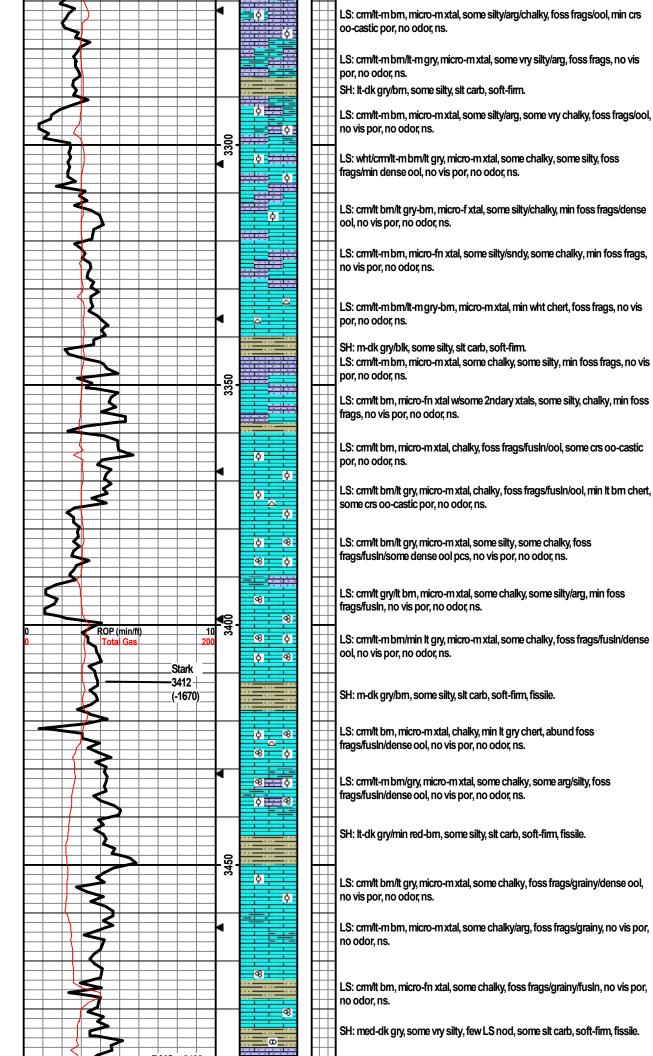
Rate of Penetration (ROP) ROP (min/ft) Total Gas	DEPTH	Lithology	CFS Point	Oil Shows	Geological Descriptions	Remarks
0 ROP (min/ft) 10 0 Total Gas 200	22				Morning Report Depth/Activity (7:00 am) 10/22/2021: MIRU. 10/25/2021: Finish RU, Spud. 10/26: Drilling @332'. 10/27: Drilling @1750'. 10/28: Drilling @2680'.	Mud-Co/Service Mud Inc. Check#1 @ 0' 10/22/16; predrilling instructions. Mud-Co/Service Mud Inc. Check#2 @ 590' 10/26/21
					10/29: Drilling @3208'. 10/30: Drilling @3608'. 10/31: 03:15am TD @3830'; 7am CTCH after wiper trip to SC.	10:45am wt vis pH chl 8.9 28 7.0 NA Filt LCM n/c 0 Mud-Co/Service Mud Inc.
	2250					Check#3 @ 1955' 10/27/21 11:30am wt vis pH chl 9.7 27 7.0 135000 Filt LCM n/c 0
					Oil Shows Indicator: Left Block 0-10 sample tray pcs w/show, Middle Block 10-20 tray pcs w/show, Right Block 20+tray pcs w/show.	
					Geologist on location @ 2290', 10/27/2021	
	2300				ROP Data begins @ 2300' on 10/27/2021. Recorded from drillers geolograph record, and iball/Bloodhound gas detector system.	Drill cutting samples at 20' intervals start at 2300'. Samples from
	•				Formation tops and lithologies have been adjusted to correlate to the electric log.	2300' to 2700' were too fine for descriptions.
	2350					Survey Record Deg @ Ft 0.75 @ 241' 1.0 @ 3830'
3	-					



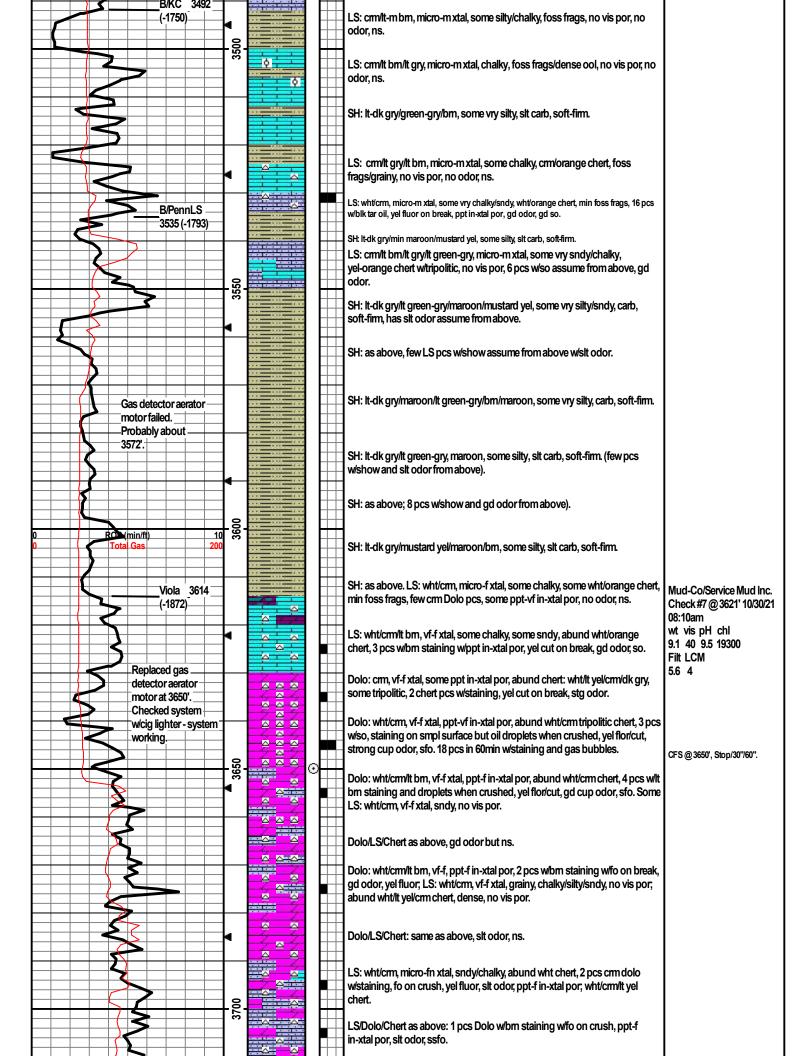


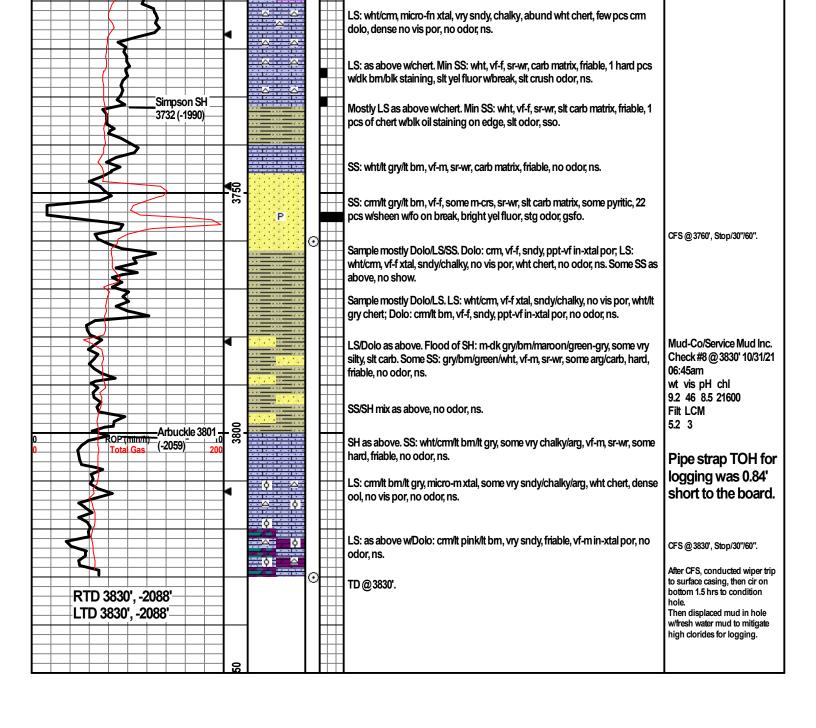






Mud-Co/Service Mud Inc. Check#6@3303' 10/29/21 10:55am wt vis pH chl 9.1 42 9.5 26600 Filt LCM 5.6 1.5







Please Remit To: P.O. Box 549

## FIELD TICKET No.

Hays, KS 67601 WIRELINE SERVICES Phone: (785) 628-6395 Fax: (785) 628-3651

NVOICE NO.	1 22	P.O. NO.			_		AFE NO.	
CUSTOMER CATAL	nd Mesa	LEASE	che	we	120		WELL NO.	_
ADDRESS		FIELD Ca	1/0	164	× s	TATE 5	COUNTY	7
		LOCATION		•	330	FOLO	19/6/	Z
CITY		CASING SIZ	E & WT				TBG. SIZE	
STATE	ZIP	TYPE OF JO	В					
ORDERED BY		TITLE					SERVICE SUPV.	
PART NO.	DESCRIPTI		RI	EV. DDE	QTY.	UNIT	AMOUNT	Ī
10.76.240.100	Service	Chase		702	7	PRICE		÷
6								
5.75 8 20.0053	Set 5/2 0	IBPE						,
	3720		-		3720	4		-
.75.815.006	Darl 111	1/1/10						1
./3.813.000_	129005	S/1'CA						
	3633-		-					_
	17 84				48	total		
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	2 Carr	12/5						I
								-
							2014	-
CALLED OUT	ON LOCATION	COMPLETED		TOTAL	SED/ICE	& MATERIALS		İ
Time	Time	Tir		TOTAL	SERVICE			
Date	Date	Da	-			DISCOUNT		!
			-			TAX		-
*ACCIDENT REPORT MUST BE ATTACH					TO	TAL CHARGES		
WITH MY INITIALS, I CONFIRM THE "HOURS" COLUMN, ACCURATELY	AT THE TIME SHOWN IN THE REFLECTS MY COMPENSABLE TIME.	<b>—</b>						
Employee Name (Print)	Hours	Initials						
Linkha	15							
Z.L.								

CUSTOMER AGREES to pay (the "Company") on a net 45 day basis from date of invoice to avoid loss of discount. Invoices older then 45 days are subject to loss of discount on ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the Item(s) disputed, specifying the reason(s) therefor, payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

CUSTOMER REPRESENTATIVE



Please Remit To: P.O. Box 549

Hays, KS 67601 Phone: (785) 628-6395

## FIELD TICKET No.

5421

DATE \_\_//-/7-2/

	Fax: (785) 628-365	1	UNI	T#	1063		
INVOICE NO.		BO NO					
CUSTOMER (3/an	d Mesq	P.O. NO.	16.11	2,201		AFE NO.	5
	<i>a</i> / / <i>c</i> - 7	LEASE S	VALUE C	1201		WELL NO. 4-	
ADDRESS		FIELD W	11 9 Ca		ATE	COUNTY K	110
		LOCATION	3301	FIL	1 916	FEL	
CITY		CASING SIZE	& WT.	2 35-	225-1	OTBG. SIZE	
STATE	ZIP	TYPE OF JOE	Bon	1	1 /	2016	
ORDERED BY		TITLE				SERVICE SUPV.	
PART NO.	DESCRIPTION		REV. CODE	QTY.	UNIT PRICE	AMOUNT	
18.70.240,1000	Service Ch	range					
1.71 2111 2 2 2 2	A	1,1					
10.70.214.0600	BEOTH E	and for					
	0-3790			37.90	7		
16,76.212.0600	O Deptons 1	4 11					
0,70.242.0600		100	7	1061			
	3/90 - 2			1390		<del> </del>	:
10,75,805,0065	Pert 4X	4 399	2-	16			-
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	3752-5	6					l

"HOURS" COLUMN, ACCURATELY REFLECTS MY COMPENSABLE TIME.						
Employee Name (Print)	Hours	Initials				
Lunbbers						
Kobben	V					

ON LOCATION

Time

Date

CALLED OUT

Time

Date

\*ACCIDENT REPORT MUST BE ATTACHED WHEN NOT SIGNED

CUSTOMER AGREES to pay (the "Company") on a net 45 day basis from date of invoice to avoid loss of discount. Invoices older then 45 days are subject to loss of discount on ticket. If Customer disputes any item invoiced, Customer shall, within 20 days after receipt, notify the Company of the item(s) disputed, specifying the reason(s) therefor; payment of the disputed item(s) may be withheld until settlement of dispute, but payment of undisputed portion of invoice shall be made without delay. All payments shall be made at the address shown on the reverse side of this document. In the absence of a separate written contract, CUSTOMER REPRESENTATIVE REPRESENTS AND WARRANTS THAT HE/SHE IS AUTHORIZED TO ENTER INTO THIS AGREEMENT ON BEHALF OF CUSTOMER AND ACCEPTS ALL TERMS AND CONDITIONS AS PRINTED ON THE REVERSE SIDE OF THIS DOCUMENT (WHICH INCLUDES INDEMNITY LANGUAGE THAT ALLOCATES RISKS RELATED TO THE ABOVE DESCRIBED SERVICES). Pricing and extensions, if shown above, are subject to verification and correction at time of invoicing.

COMPLETED

\_\_\_\_ Time

\_ Date

x Juffell

CUSTOMER	REPRESENTATIVE	

**TOTAL SERVICE & MATERIALS** 

DISCOUNT

**TOTAL CHARGES** 

**TAX** 

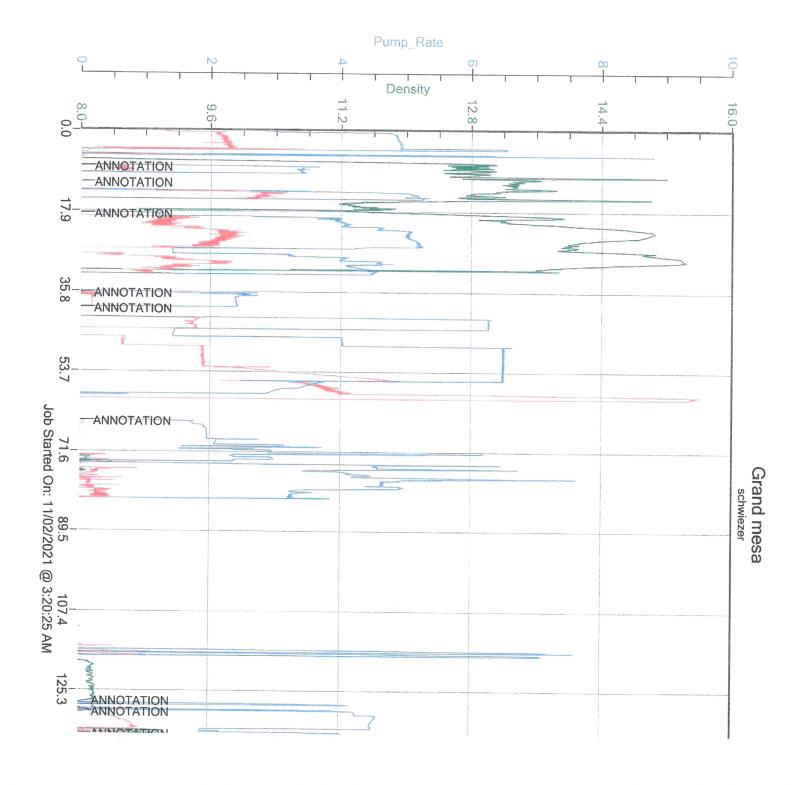


CEMEN	TTRE	ATMEN	IT REP	ORT						
			and the second second		ompany Well:	C-Li				
	Customer: Grand Mesa Operating Cor City, State: Sylvia Kansas					Schweizer 4-3		wp 2028		
			*	County:	Reno Kansas	Date	10/25/2021			
Field Rep: James Mayfelld				i	S-T-R:	S-T-RR 35-22s-10w		surface		
Dow	/nhole	Informati	<b>o</b> n		Calculated Slur	ry - Lead	n a	Iculated Slurry - Tail		
Hol	e Size:	12 1/4	in		Blend:	60/40/ 2 & 3		Biend: A 2%cc		
	Depth:		ft		Weight:	14.6 ppg	Weight			
	g Size:		in		Water / Sx:	5.2 gal / sx	Water / Sx			
Casing			ft		Yield:	1.21 ft <sup>3</sup> / sx	Yield	3-7-		
Tubing /			in		Annular Bbls / Ft.:	bbs / ft.	Annular Bbls / Ft.			
	Depth:		ft		Depth:	ft	Depth			
Tool/P					Annular Volume:	0.0 bbls	Annular Volume	0 bbls		
	Depth:		ft		Excess:		Excess			
Displace	ement:	14.0	bbis		Total Slurry:	54.0 bbls	Total Slurry:	0.0 bbls		
TIME	RATE	PSI	STAGE BBLs	TOTAL BBLs	Total Sacks:	250 sx	Total Sacks:			
2:30 PM	l la	1 30	JDES	BBES	REMARKS					
2:40 PM					on location job and safety					
		******************************			spot trucks and rig up					
4:15 PM		***************************************		•	start casing in the hole					
4:55 PM				•	casing on bottom and circu	ileta				
				*	and on bottom and once	nate				
5:05p					start cement					
	4.5	250.0	5.0	5.0	fresh water					
	4.5	250.0	54.0	59.0	mix 250 sack cement					
5:20 PM				59.0	cement in			**************************************		
5:25 PM	3.0	150.0		59.0	start displacement					
5:30 PM			14.0		displacement in					
					cement did not circulate					
					run 80 ft 1 inch					
8:35 PM					start cement					
	0.3	100.0	34.0		mix 160 sacks cement					
9:30 PM					cement to surface					
	-+									
		CREW	•		UNIT		SUMMAR	Υ		
Cementer:		M Brungardt			916	Average Rate	Average Pressure	Total Fluid		
ump Ope	rator ilk #1:	R Osb			176/522	3.1 bpm	188 psi	107 bbls		
	ilk #1: ilk #2:	R Valo			181 182					
					102					



CEMENT	TRE	ATMEN	T REP	ORT	,				
		Grand N	AND DESCRIPTION OF THE PERSON		Well:				
							Schweizer 4-35	Ticket:	wp 2045
City, State: Sylvia Kansas			County:		Reno Kansas	Date:	10/31/2021		
Field Rep: Jqames Mayfeild			S-T-R:		35-22s-10w	Service:	5 1/2 productin pipe		
Down	nhole li	nformatio	on		Calculated Slu	rry - Lea	d	Cal	culated Slurry - Tail
Hole	Size:	7 7/8	in		Blend:		-LD	Blend:	
Hole D	Depth:	3060	ft		Weight:	15.0	ppg	Weight:	
Casing	Size:	5 1/2	in		Water / Sx:	6.1	gal / sx	Water / Sx:	
Casing D	Depth:	3819	ft		Yield:	1.49	ft³/sx	Yield:	
Tubing /	Liner:		in		Annular Bbls / Ft.:		bbs / ft.	Annular Bbls / Ft.:	bbs / ft.
D	Depth:		ft		Depth:		ft	Depth:	ft
Tool / Pa	acker:				Annular Volume:	0.0	bbls	Annular Volume:	0 bbls
Tool D			ft		Excess:			Excess:	
Displace	ment:	90.0	bbls		Total Slurry:	40.0	bbls	Total Slurry:	12.7 bbls
			STAGE	TOTAL	Total Sacks:	150	sx	Total Sacks:	50 sx
and the latest desired	RATE	PSI	BBLs	BBLs	REMARKS				
9:45 PM				•	on location job and safety	у			
10:00 PM				•	spot trucks and rig up				
				-	centralizers3,5,7,9,11,13	3			
				•	basket bottom of #2				
11:30 PM				•					
1:30 AM				•	start casing in the hole				
1:30 AW				•	casing on bottom and circ	culate			
3:25 AM				-	start flush				
3:30 AM	5.0	350.0	24.0	24.0	flush in				
3:35 AM	-	000.0	7.6	31.6	plug rat ,,,,,rat hole 30 sa	cke			
3:40 AM			- 110	01.0	start cement	icks ,,			
	5.0	300.0	9.0		scavenger mix 20 sacks				
	5.0	300.0	40.0		mix 150 sacks				
4:00 AM					cement in and shut down				
					wash pump and lines				
4:10 AM					start displacement				
	6.5	300.0	20.0						
	6.5	350.0	55.0						
	6.5	550.0	70.0						
	3.0	600.0	80.0		slow rate				
4:30 AM	3.0	700.0	90.5		bump plug at700 psi to 15	00 psi			
					plug did hold				
No estimate							RESISSION OF THE PARTY OF		
		CREW	7 W/5 (6)	E STATE OF	UNIT		<b>建筑型。建筑区域</b>	SUMMAR	Y
	enter:		ingardt		916		Average Rate	Average Pressure	Total Fluid
Pump Ope	rator: ılk #1:	R Ost			179/522		5.1 bpm	431 psi	396 bbls
THE RESERVE AND ADDRESS.					182/256				

ftv: 15-2021/01/25 mplv: 105-2021/01/27



Pro-Stim ChemicalsLLC **Acidizing Report** Date 11/18/21 Customer GRAND MCSA Pro-Stim Chemical Yard
CUNVINGHAM Pro-Stim Number Well Name & Number SCHWEIZINGER 4-35 Formation County RENO State ICS Interval 3633-45 Well Type: Completion Recompletion Workover D Oil Gas □ Water D Disposal Perf 🗆 OH 🗆 Job Pumped Via: Tubing 🙈 Plug Depth Casing Packer Depth Annulus 🗆 CTU Combination 3615 Casing Size: 51/2 GRD WT Depth Tubing Size: 27/8 Spot 4.27 BBL Casing Vol. Tbg Vol 21.64 ,71 Ann Vol OH Vol Total Displacement 21.64 250 7.5% MCA 3-MCA 5-RAS-10 Customer Representative Signature 22 BBL 2% KLI Treatment Record Increment Cum Pressure Time Type Fluid Rate BMP Observations Vol Bbls Vol Bbls Tubing Casing SPOT ACID ACID 3.3 D 1 Safety Meeting 0 l 3.3 SPOT, N 0 4.37 Prs Test to \_\_ START ACID 20 3.2 4.4 0 17 21 3.4 OUT 6 ALID 0 21 FLUSH ON FLUSH 3.4 6.1 D 24 0 21.3 70 LOADED 25 200 11 , 8 21,46 STAGING 1/ . 2 30 21,58 200 200 .36 Li 35 21.80 40 .05 21.92 200 11 45 .15 11 21.98 200 22.13 10 50. 11 400 .16 11 55 400 22,28 .14 40 22.38 400 4 ,15 29.54 65 11 500 .14 72 61 ... 22.48 TREATID 400 74 ,5 11 110 23.35 75 M 24,71 VAC 1.45 DISPLACED/ JOB COMPLETE 11 27.14 78 VAC **Treatment Synopsis** Fluid BPM . 5 Avg Inj Rate Total Injected H20 22 Acid 6 Oil 500 Final VAC 200 ISIP V AC Treating Prs Avg. 5'SI 10°SI 15'SI AR-CU 20 25 30

Pro-Stim Chemicals LLC **Acidizing Report** Date 11/19/21 Customer GRAND MESA Pro-Stim Chemical Yard Pro-Stim Number 7 - 5 Well Name & Number SCH W Z-12 INGER Formation 4-35 County State Reno Interval 3633-45 Well Type: Completion □ Recompletion 2 Workover □ Oilo Gas□ Water 🗆 Disposal □ Perf 🗆 OHO Plug Depth Job Pumped Via: Packer Depth Tubing & Casing Annulus 🗆 CTU Combination □ 3615 Casing Size: Tubing Size: 2 1/8 51/2 GRD WT Depth Spot Casing Vol. Tbg Vol OH Vol Ann Vol Total Displacement .71 20.53 21.64 7505-1 15% NEFE - 8-CNE-99 15-RA5-10 Customer Representative Signature 32 8BC 2% KUL Treatment Record Increment Cum Pressure Time Type Fluid Rate BMP Observations Vol Bbls Vol Bbls Tubing Casing START ACID 5.77 ACID 90 Safety Meeting 0 2.17 ALTO DOT psi 2 17 Prs Test to 6.0 20 9.41 1 / 5 6.03 20 18.41 ACID OUT 5 19 20 ON FLUSH FLUSH 6.03 20-13 60 LOADED 1.7 11 4.81 430 21.77 11 4.82 400 36.65 7 4 480 4 89.57 5.2 ri 5.15 46.78 500 11 500 DISPLACED 50.68 5.22 10 -0 VAL 15/P 10 50.85 0 **Treatment Synopsis** 32 Fluid BPM ( Total Injected 18 Avg Inj Rate H20 Acid Oil 15'SI ISIP VAC 5'SI 10'SI 500 Final 500 Avg. Max Treating Prs 500

AR-CU

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# Pro-Stim Chemicalsuc

208045

**Acidizing Report** CUSTOMER GRAND MESA Pro-Stim Chemical Yard
CUNP I NG HAM Pro-Stim Number Well Name & Number SCH WEIZINGER 4-35 State /< S County RENO Interval 3633-45 OHO Well Type: Completion Recompletion Workover □ Oil Gas D Disposal Perf D Packer Depth Plug Depth CTU Combination Job Pumped Via: Tubing & Casing a Annulus 🗅 3615 Tubing Size: 2 7/8 4.27 Casing Size: 51/2 GRD Depth OH Vol Total Displacement 21.64 Casing Vol. Ann Vol Tbg Vol 21.64 .71 250 7.5% MCH 3-MCA 22BBL 290 KLL Customer Representative Signature Treatment Record Cum Pressure Observations Increment Rate BMP Type Fluid Time Tubing Casing Vol Bbls Vol Bbls SPOT ALID Safety Meeting ACI D 3.3 11 0 Prs Test to SPOT , ~ 4.37 33 l START ACID 4.4 3.2 20 OUT ALID 11 6 3.4 0 21 ON FLASH D 21 FLUSH 3.4 LOADED 70 21.3 24 0 STAGING 200 21,46 25 ,8 11 21,58 200 1/ 30 .36 200 21.80 35 21.92 200 . 05 40 u 21.98 .15 200 45 11 22.13 400 110 50. 400 .16 22.28 11 55 400 .14 22.38 60 22.54 .15 500 65 TREATID .14 22.68 400 72 ul 110 74 23.35 11 24,71 VAC 75 DISPLACED/ JOB COMPLETE 1.45 VAL 27.16 78 **Treatment Synopsis** Oil Total Injected H20 22 Acid 6 Fluid BPM - 5 Avg inj Rate 10'SI 15'SI ISIP V AC 5'SI Avg. 200 Final VAC Max 500 Treating Prs 30 20

AR-CU

#### Pro-Stim Chemicals LLC **Acidizing Report** Pro-Stim Number Charitham Pro-Stim Chemical Yard Customer veiter #4-35 Formation Well Name & Number 3633-45 Interval KS County OHD Perf O Disposal D Water O Gas □ Recompletion X Workover □ Oil Completion D Well Type: Packer Depth Plug Depth Combination □ CTUD Casing 🗆 Annulus C Tubing & Job Pumped Via: 2% Tubing Size: Depth GRD WT Casing Size: Total Displacement QH Vol Tbg Vol 20.9 Ann Vol Casing Vol. 25 gals RAS-10, 25 gals SDA 95, ... Customer Representative Signature \_ Treatment Record Pressure Cum Increment Rate BMP Vol Bbls Casing Tubing Type Fluid Time Vol Bbls 4 Safety Meeting Prs Test to 10 11 20 Pumped 4 bbs min 30 . . 60 11 11 11 11 100 120 11 11

**Treatment Synopsis** Oil H20 60 Acid 60 Total injected Fluid BPM Avg Inj Rate 15'SI 10'SI Vac 5'SI Avg. Final vac Treating Prs 25 AR-CU

Pro-Stim ChemicalsLLC **Acidizing Report** Date 11/18/21 Customer GRAND MCSA Pro-Stim Chemical Yard
CUNVINGHAM Pro-Stim Number Well Name & Number SCHWEIZINGER 4-35 Formation County RENO State ICS Interval 3633-45 Well Type: Completion Recompletion Workover D Oil Gas □ Water D Disposal Perf 🗆 OH 🗆 Job Pumped Via: Tubing 🙈 Plug Depth Casing Packer Depth Annulus 🗆 CTU Combination 3615 Casing Size: 51/2 GRD WT Depth Tubing Size: 27/8 Spot 4.27 BBL Casing Vol. Tbg Vol 21.64 ,71 Ann Vol OH Vol Total Displacement 21.64 250 7.5% MCA 3-MCA 5-RAS-10 Customer Representative Signature 22 BBL 2% KLI Treatment Record Increment Cum Pressure Time Type Fluid Rate BMP Observations Vol Bbls Vol Bbls Tubing Casing SPOT ACID ACID 3.3 D 1 Safety Meeting 0 l 3.3 SPOT, N 0 4.37 Prs Test to \_\_ START ACID 20 3.2 4.4 0 17 21 3.4 OUT 6 ALID 0 21 FLUSH ON FLUSH 3.4 6.1 D 24 0 21.3 70 LOADED 25 200 11 , 8 21,46 STAGING 1/ . 2 30 21,58 200 200 .36 Li 35 21.80 40 .05 21.92 200 11 45 .15 11 21.98 200 22.13 10 50. 11 400 .16 11 55 400 22,28 .14 40 22.38 400 4 ,15 29.54 65 11 500 .14 72 61 ... 22.48 TREATID 400 74 ,5 11 110 23.35 75 M 24,71 VAC 1.45 DISPLACED/ JOB COMPLETE 11 27.14 78 VAC **Treatment Synopsis** Fluid BPM . 5 Avg Inj Rate Total Injected H20 22 Acid 6 Oil 500 Final VAC 200 ISIP V AC Treating Prs Avg. 5'SI 10°SI 15'SI AR-CU 20 25 30

Pro-Stim Chemicals LLC **Acidizing Report** Date 11/19/21 Customer GRAND MESA Pro-Stim Chemical Yard Pro-Stim Number 7 - 5 Well Name & Number SCH W Z-12 INGER Formation 4-35 County State Reno Interval 3633-45 Well Type: Completion □ Recompletion 2 Workover □ Oilo Gas□ Water 🗆 Disposal □ Perf 🗆 OHO Plug Depth Job Pumped Via: Packer Depth Tubing & Casing Annulus 🗆 CTU Combination □ 3615 Casing Size: Tubing Size: 2 1/8 51/2 GRD WT Depth Spot Casing Vol. Tbg Vol OH Vol Ann Vol Total Displacement .71 20.53 21.64 7505-1 15% NEFE - 8-CNE-99 15-RA5-10 Customer Representative Signature 32 8BC 2% KUL Treatment Record Increment Cum Pressure Time Type Fluid Rate BMP Observations Vol Bbls Vol Bbls Tubing Casing START ACID 5.77 ACID 90 Safety Meeting 0 2.17 ALTO DOT psi 2 17 Prs Test to 6.0 20 9.41 1 / 5 6.03 20 18.41 ACID OUT 5 19 20 ON FLUSH FLUSH 6.03 20-13 60 LOADED 1.7 11 4.81 430 21.77 11 4.82 400 36.65 7 4 480 4 89.57 5.2 ri 5.15 46.78 500 11 500 DISPLACED 50.68 5.22 10 -0 VAL 15/P 10 50.85 0 **Treatment Synopsis** 32 Fluid BPM ( Total Injected 18 Avg Inj Rate H20 Acid Oil 15'SI ISIP VAC 5'SI 10'SI 500 Final 500 Avg. Max Treating Prs 500

AR-CU

30

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# Pro-Stim Chemicalsuc

208045

**Acidizing Report** CUSTOMER GRAND MESA Pro-Stim Chemical Yard
CUNP I NG HAM Pro-Stim Number Well Name & Number SCH WEIZINGER 4-35 State /< S County RENO Interval 3633-45 OHO Well Type: Completion Recompletion Workover □ Oil Gas D Disposal Perf D Packer Depth Plug Depth CTU Combination Job Pumped Via: Tubing & Casing a Annulus 🗅 3615 Tubing Size: 2 7/8 4.27 Casing Size: 51/2 GRD Depth OH Vol Total Displacement 21.64 Casing Vol. Ann Vol Tbg Vol 21.64 .71 250 7.5% MCH 3-MCA 22BBL 290 KLL Customer Representative Signature Treatment Record Cum Pressure Observations Increment Rate BMP Type Fluid Time Tubing Casing Vol Bbls Vol Bbls SPOT ALID Safety Meeting ACI D 3.3 11 0 Prs Test to SPOT , ~ 4.37 33 l START ACID 4.4 3.2 20 OUT ALID 11 6 3.4 0 21 ON FLASH D 21 FLUSH 3.4 LOADED 70 21.3 24 0 STAGING 200 21,46 25 ,8 11 21,58 200 1/ 30 .36 200 21.80 35 21.92 200 . 05 40 u 21.98 .15 200 45 11 22.13 400 110 50. 400 .16 22.28 11 55 400 .14 22.38 60 22.54 .15 500 65 TREATID .14 22.68 400 72 ul 110 74 23.35 11 24,71 VAC 75 DISPLACED/ JOB COMPLETE 1.45 VAL 27.16 78 **Treatment Synopsis** Oil Total Injected H20 22 Acid 6 Fluid BPM - 5 Avg inj Rate 10'SI 15'SI ISIP V AC 5'SI Avg. 200 Final VAC Max 500 Treating Prs 30 20

AR-CU

#### Pro-Stim Chemicals LLC **Acidizing Report** Pro-Stim Number Charitham Pro-Stim Chemical Yard Customer veiter #4-35 Formation Well Name & Number 3633-45 Interval KS County OHD Perf O Disposal D Water O Gas □ Recompletion X Workover □ Oil Completion D Well Type: Packer Depth Plug Depth Combination □ CTUD Casing 🗆 Annulus C Tubing & Job Pumped Via: 2% Tubing Size: Depth GRD WT Casing Size: Total Displacement QH Vol Tbg Vol 20.9 Ann Vol Casing Vol. 25 gals RAS-10, 25 gals SDA 95, ... Customer Representative Signature \_ Treatment Record Pressure Cum Increment Rate BMP Vol Bbls Casing Tubing Type Fluid Time Vol Bbls 4 Safety Meeting Prs Test to 10 11 20 Pumped 4 bbs min 30 . . 60 11 11 11 11 100 120 11 11

**Treatment Synopsis** Oil H20 60 Acid 60 Total injected Fluid BPM Avg Inj Rate 15'SI 10'SI Vac 5'SI Avg. Final vac Treating Prs 25 AR-CU