

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD

Gas DH EOR

OG GSW

CM (Coal Bed Methane)

Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to EOR Conv. to SWD

Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. 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: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

| | |
|--|---|
| Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|--|---|

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used | | | | | | | |
|---|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| Report all strings set-conductor, surface, intermediate, production, etc. | | | | | | | |
| Purpose of String | Size Hole Drilled | Size Casing Set (In O.D.) | Weight Lbs. / Ft. | Setting Depth | Type of Cement | # Sacks Used | Type and Percent Additives |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|--|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone | | | | |
| | | | | |

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

| | | | | | |
|---|--|---------|-------------|---------------|---------|
| Date of first Production/Injection or Resumed Production/Injection: | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____ | | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |

| | | |
|---|---|------------------------------------|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> | PRODUCTION INTERVAL: Top Bottom |
|---|---|------------------------------------|

| Shots Per Foot | Perforation Top | Perforation Bottom | Bridge Plug Type | Bridge Plug Set At | Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i> |
|----------------|-----------------|--------------------|------------------|--------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | | | |
|----------------|-------|---------|------------|--|
| TUBING RECORD: | Size: | Set At: | Packer At: | |
|----------------|-------|---------|------------|--|

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Tri United, Inc |
| Well Name | VINE 2 |
| Doc ID | 1750880 |

All Electric Logs Run

| |
|-------------------------|
| |
| micro |
| radiation guard |
| dual induction |
| compensated density/neu |

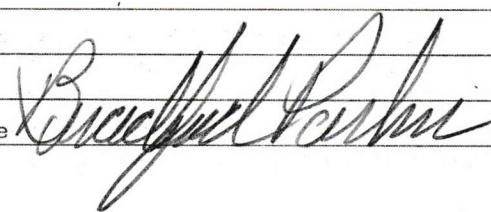
QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3959

| | | | | | | | | | | | | | | |
|---|----------|------|----|------|-----|-------|-----|---|-------|-------|----|-------------|--------|--------|
| Date | 10-18-23 | Sec. | 35 | Twp. | 11S | Range | 19W | County | Ellis | State | Ks | On Location | Finish | 6:00pm |
| # 15-051-27101-00-00 Lease VINE | | | | | | | | Location HAYS 7N 4W 3 1/2 N | | | | | | |
| Contractor Double D | | | | | | | | Well No. 2 | | | | | | |
| Type Job SURFACE | | | | | | | | Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | |
| Hole Size 12 1/4 | | | | | | | | Charge To TRI UNITED | | | | | | |
| Csg. 8 1/2 | | | | | | | | T.D. 229 | | | | | | |
| Tbg. Size | | | | | | | | Depth | | | | | | |
| Tool | | | | | | | | Street | | | | | | |
| Cement Left in Csg. 15 | | | | | | | | Depth | | | | | | |
| Meas Line | | | | | | | | Displace 13.6 | | | | | | |
| EQUIPMENT | | | | | | | | Common 140 | | | | | | |
| Pumptrk 16 No. Cementer | | | | | | | | Poz. Mix 35 | | | | | | |
| Bulktrk No. Driver | | | | | | | | Gel. 3 | | | | | | |
| Bulktrk 9 No. Driver | | | | | | | | Calcium 6 | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | | Hulls | | | | | | |
| Remarks: | | | | | | | | Salt | | | | | | |
| Rat Hole | | | | | | | | Flowseal | | | | | | |
| Mouse Hole | | | | | | | | Kol-Seal | | | | | | |
| Centralizers | | | | | | | | Mud CLR 48 | | | | | | |
| Baskets | | | | | | | | CFL-117 or CD110 CAF 38 | | | | | | |
| D/V or Port Collar | | | | | | | | Sand | | | | | | |
| Set e 229 | | | | | | | | Handling 184 | | | | | | |
| Cent w/ 775M | | | | | | | | Mileage | | | | | | |
| Pump plug w/ 13.6 bbls | | | | | | | | FLOAT EQUIPMENT | | | | | | |
| Cem + did CIRC | | | | | | | | Guide Shoe | | | | | | |
| | | | | | | | | Centralizer | | | | | | |
| | | | | | | | | Baskets | | | | | | |
| | | | | | | | | AFU Inserts | | | | | | |
| | | | | | | | | Float Shoe | | | | | | |
| | | | | | | | | Latch Down | | | | | | |
| | | | | | | | | Pumptrk Charge Surface | | | | | | |
| | | | | | | | | Mileage 17 | | | | | | |
| Signature  | | | | | | | | Tax | | | | | | |
| | | | | | | | | Discount | | | | | | |
| | | | | | | | | Total Charge | | | | | | |

Thanks

QUALITY OILWELL CEMENTING, INC.

Federal Tax I.D.# 20-2886107

Phone 785-483-1071
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3966

| | | | | | | | | | | | | | | | |
|-----------------------------------|----------------------------|------|---------------|--|----|--|-------|---------------------------|-------|-------|----|-------------|--|--------|----------|
| Date | 10-28-23 | Sec. | 35 | Twp. | 11 | Range | 19 | County | Ellis | State | KS | On Location | | Finish | 11:30 AM |
| # | 15-051-27101-00-00 | | | | | | | Location Buckeye Rd 3W 3N | | | | | | | |
| Lease | VINE | | | Well No. | 2 | | Owner | | | | | | | | |
| Contractor | Double D | | | To Quality Oilwell Cementing, Inc. | | | | | | | | | | | |
| Type Job | Long String | | | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | | | | | |
| Hole Size | 7 7/8 | | T.D. | 3654 | | Charge To TRI United | | | | | | | | | |
| Csg. | 5 1/2 | | Depth | Street | | | | | | | | | | | |
| Tbg. Size | | | Depth | City State | | | | | | | | | | | |
| Tool | | | Depth | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | | | |
| Cement Left in Csg. | 30.41 | | Shoe Joint | 30.41 | | Cement Amount Ordered 150# Com 10% Salt S ^g Gel | | | | | | | | | |
| Meas Line | | | Displace | 88.12 | | 400# QmDC 4" Flo Seal | | | | | | | | | |
| EQUIPMENT | | | | | | | | | | | | | | | |
| Pumptrk | 17 | No. | Cementer | Bill | | Common 150 | | | | | | | | | |
| | | | Helper | | | Poz. Mix 400 | | | | | | | | | |
| Bulktrk | 14 | No. | Driver | Nick | | Gel. | | | | | | | | | |
| | | | Driver | Doug | | Calcium | | | | | | | | | |
| Bulktrk | 21 | No. | Driver | Doug | | Hulls | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | | | | | | | | | |
| Remarks: | Salt 13 | | | | | | | | | | | | | | |
| Rat Hole | 30 | | Flowseal 100# | | | | | | | | | | | | |
| Mouse Hole | Kol-Seal 750# | | | | | | | | | | | | | | |
| Centralizers | Mud CLR 48 | | | | | | | | | | | | | | |
| Baskets | CFL-117 or CD110 CAF 38 | | | | | | | | | | | | | | |
| D/V or Port Collar | Sand | | | | | | | | | | | | | | |
| | Handling 570 | | | | | | | | | | | | | | |
| | Mileage | | | | | | | | | | | | | | |
| | FLOAT EQUIPMENT | | | | | | | | | | | | | | |
| | Guide Shoe | | | | | | | | | | | | | | |
| | Centralizer 6 | | | | | | | | | | | | | | |
| | Baskets 4 | | | | | | | | | | | | | | |
| | AFU Inserts | | | | | | | | | | | | | | |
| | Float Shoe | | | | | | | | | | | | | | |
| | Latch Down 1 | | | | | | | | | | | | | | |
| | TRI plex shoe 1 | | | | | | | | | | | | | | |
| | Pumptrk Charge Prod String | | | | | | | | | | | | | | |
| | Mileage 17 | | | | | | | | | | | | | | |
| Thanks | | | | | | | | | | | | | | | |
| Signature Eugene E. Seiden | | | | | | | | | | | | | | | |
| Tax | | | | | | | | | | | | | | | |
| Discount | | | | | | | | | | | | | | | |
| Total Charge | | | | | | | | | | | | | | | |

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Federal Tax I.D.# 20-2886107

Phone 785-483-1071

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No. 3990

Cell 785-324-1041

| | | | | | | | | | |
|-----------------------------------|-------------|------|---------------|---|--|-------------|--------|--------------|--|
| Date | Sec. | Twp. | Range | County | State | On Location | Finish | | |
| 11/21-23 | | | | Ellis | KS | | | | |
| # 15-051-27101-00-00 | | | | Location HAYS TN 3W 3N | | | | | |
| Lease | VINE | | | Well No. | 2 | | | Owner | |
| Contractor | Rocket | | | To Quality Oilwell Cementing, Inc. | | | | | |
| Type Job | TOP STAGE 1 | | | You are hereby requested to rent cementing equipment and furnish cementer and helper* to assist owner or contractor to do work as listed. | | | | | |
| Hole Size | 7 3/8 | | | T.D. | Charge To TRS United | | | | |
| Csg. | 5 1/2 | | | Depth | Street | | | | |
| Tbg. Size | 2 3/8 | | | Depth | City State | | | | |
| Tool | | | | Depth | The above was done to satisfaction and supervision of owner agent or contractor. | | | | |
| Cement Left in Csg. | Shoe Joint | | | Cement Amount Ordered 2504 QMDC | | | | | |
| Meas Line | Displace | | | 1000 # Gel | | | | | |
| EQUIPMENT | | | | Common 170 8 1/2 QMDC | | | | | |
| Pumptrk | 16 | No. | Cement Helper | Bill | | | | | |
| Bulktrk | | No. | Driver | Nick | | | | | |
| Bulktrk | 3 | No. | Driver | Doug | | | | | |
| JOB SERVICES & REMARKS | | | | Hulls | | | | | |
| Remarks: | | | | Salt | | | | | |
| Rat Hole | | | | Flowseal | | | | | |
| Mouse Hole | | | | Kol-Seal | | | | | |
| Centralizers | | | | Mud CLR 48 | | | | | |
| Baskets | | | | CFL-117 or CD110 CAF 38 | | | | | |
| D/V or Port Collar | | | | Sand | | | | | |
| BPE 2020 Test 1000 # | | | | Handling 250 | | | | | |
| Spot 24 Sand | | | | Mileage | | | | | |
| ports 1293 | | | | FLOAT EQUIPMENT | | | | | |
| pump 600 # Gel | | | | Guide Shoe | | | | | |
| Cemt 1704 | | | | Centralizer | | | | | |
| Cemt did CIRC | | | | Baskets | | | | | |
| Used | | | | AFU Inserts | | | | | |
| 1704 | | | | Float Shoe | | | | | |
| 600 # Gel | | | | Latch Down | | | | | |
| State pluggers | | | | Pumptrk Charge Squeeze | | | | | |
| Pat STAAB | | | | Mileage 15 | | | | | |
| X Signature <i>Eryon E. Cole</i> | | | | Thanks | | | | Tax | |
| | | | | | | | | Discount | |
| | | | | | | | | Total Charge | |

Tri United, Inc.

Vine #2 API: 15-051-27101
SE-NE
Elev. 2097' G.L
 2104' K.B.

Ellis County, Kansas

35-11S-19W
8-5/8 @ 225' w/ 175sx 80/20 3%cc 2% gel
5-1/2 @ 3650 w/ 520sx qmdc/com 10% salt

Drilling Contractor: Double D Drilling, LLC

Comparison Well

Turi United, Inc.

Vine #1

SW-NW-SE-NE 35-11S-19W

K.B. 2112'

Oct 30, 2023

| Formation | Log Top | Datum | Reference Log Top | Datum | Struc. Comp. |
|-----------|---------|-------|-------------------|-------|--------------|
| Anhydrite | 1428' | +676 | 1436' | +676 | - |
| Base | 1470' | +634 | 1480' | +632 | +2 |
| Topeka | 3104' | -1000 | 3102' | -990 | -10 |
| Heebner | 3331' | -1227 | 3338' | -1226 | -1 |
| LKC | 3371' | -1267 | 3378' | -1266 | -1 |
| BKC | 3600' | -1496 | 3608' | -1496 | - |
| Arbuckle | 3646' | -1542 | 3658' | -1546 | +4 |

Porosity Description:

Topeka

3100-3108 L.s. wht-tan mstly pr xlyn poro, rar fos, vslt stn in prt, rar sfo

Toronto

3346-54 L.s. wht-gry pr inxlyn poro, slt fos, vslt stn, vslt sfo on break

LKC

3408-10 L.s. wht-tan, pr inxlyn poro rar fos, vry pr sfo on break,

3450-60 L.s. wht-tan, foss, slt ool, fr-gd infoss poro, pr-fr sfo on break, no odor

Arbuckle Dol. Wht-gry, rhombic, vgd inxlyn poro, vstrng odor, vgd sfo

Remarks:

Due to structural position and sample shows, it was decided by all parties to set production casing on the Vine #2 and complete the well.

Respectfully Submitted

Lyle Herrman