

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: | |
|----------------|-------|---------|------------|--|

QUALITY WELL SERVICE, INC.

7972

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

| Date | Sec. | Twp. | Range | County | State | On Location | Finish |
|-----------------------------------|---|--|-------|---------------------------|-------|--------------|--------|
| 5-20-22 | 9 | 30 | 15 | Butcher | Ks | | 6:15 |
| Lease Riley | Well No. 1X | Location | | | | | |
| Contractor Murfin | 104 | Owner | | | | | |
| Type Job Conductor | To Quality Well Service, 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 17.5 | T.D. 94' | Charge To Griffin | | | | | |
| Csg. 13 3/8 | Depth 86.75 | Street | | | | | |
| Tbg. Size | Depth | City State | | | | | |
| Tool | Depth | City State | | | | | |
| Cement Left in Csg. 10' | Shoe Joint | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | |
| Meas Line | Displace | Cement Amount Ordered 400 sq Common 3% cc | | | | | |
| EQUIPMENT | | | | 2% Gel 1/2 P.S. 1200 1200 | | | |
| Pumptrk 8 No. | | Common 120 | | | | | |
| Bulktrk 17 No. | | Poz. Mix | | | | | |
| Bulktrk No. | | Gel. 225 # | | | | | |
| Pickup No. | | Calcium 338 # | | | | | |
| JOB SERVICES & REMARKS | | | | Hulls | | | |
| Rat Hole | | | | Salt | | | |
| Mouse Hole | | | | Flowseal 60# | | | |
| Centralizers | | | | Kol-Seal | | | |
| Baskets | | | | Mud CLR 48 | | | |
| D/V or Port Collar | | | | CFL-117 or CD110 CAF 38 | | | |
| Ran two jts 13 3/8 to 86.75 | | | | Sand | | | |
| landed on 8 5/8 sub. Hooked | | | | Handling 131 | | | |
| up broke circulation with | | | | Mileage 25 | | | |
| mud pump hooked up pumped | | | | FLOAT EQUIPMENT | | | |
| 120 sq Common 3% cc 2% gel | | | | Guide Shoe | | | |
| 1/2 p.s. displaced 12 1/4 bbl's | | | | Centralizer | | | |
| 14 2/8 shut in circulated cement | | | | Baskets | | | |
| to surface | | | | AFU Inserts | | | |
| | | | | Float Shoe | | | |
| | | | | Latch Down | | | |
| | | | | LMV 25 | | | |
| | | | | Service Supervisor | | | |
| | | | | Pumptrk Charge conductor | | | |
| | | | | Mileage 50 | | | |
| Driver Derek Nathan Bryan | | | | | | Tax | |
| | | | | | | Discount | |
| X Signature | | | | | | Total Charge | |

QUALITY WELL SERVICE, INC.

7973

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Office 620-727-3410
Fax 620-672-3663

Rich's Cell 620-727-3409
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| | | | | | | | | | | | | | | | |
|---------------------------------------|------------|----------|------------|------|--|---|---|--------|--------|--------------|----|-------------|--|--------|------|
| Date | 5-21-22 | Sec. | 9 | Twp. | 30 | Range | 15 | County | Barber | State | Ks | On Location | | Finish | 3:30 |
| Lease | Riley | Well No. | IX | | | Location | | | | | | | | | |
| Contractor | Murfin 104 | | | | | Owner | | | | | | | | | |
| Type Job | Surface | | | | | To Quality Well Service, 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 | | T.D. | | 263 | | Charge To | | | | | | | | |
| Csg. | 8 5/8 | | Depth | | 262.13 | | Griffin | | | | | | | | |
| Tbg. Size | | | Depth | | Street | | | | | | | | | | |
| Tool | | | Depth | | City State | | | | | | | | | | |
| Cement Left in Csg. | 10' | | Shoe Joint | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | | |
| Meas Line | | | Displace | | 15.5 | | Cement Amount Ordered 460 sx Common 3% cc | | | | | | | | |
| EQUIPMENT | | | | | | | 22 Gal 1/2" P.S. Used 440 sx | | | | | | | | |
| Pumptrk | 8 | No. | | | Common 460 | | | | | | | | | | |
| Bulktrk | 12 | No. | | | Poz. Mix | | | | | | | | | | |
| Bulktrk | | No. | | | Gel. 827 | | | | | | | | | | |
| Pickup | | No. | | | Calcium 1241 | | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | Hulls | | | | | | | | |
| Rat Hole | | | | | | | Salt | | | | | | | | |
| Mouse Hole | | | | | | | Flowseal 220 | | | | | | | | |
| Centralizers | | | | | | | Kol-Seal | | | | | | | | |
| Baskets | | | | | | | Mud CLR 48 | | | | | | | | |
| D/V or Port Collar | | | | | | | CFL-117 or CD110 CAF 38 | | | | | | | | |
| Pump logs 8 5/8 csg set @ | | | | | | | Sand | | | | | | | | |
| Hook up to csg break circulation | | | | | | | Handling 464' | | | | | | | | |
| with misc pump 10 bbls H2O mix | | | | | | | Mileage 25 | | | | | | | | |
| 430sx Common 3% cc 22 Gal 1/4 P.S. | | | | | | | FLOAT EQUIPMENT | | | | | | | | |
| Displaced 155 bbls H2O shut in | | | | | | | Guide Shoe | | | | | | | | |
| circulated cement to pit | | | | | | | Centralizer | | | | | | | | |
| | | | | | | | Baskets | | | | | | | | |
| Waited topped off 13 3/8 with 10sx | | | | | | | AFU Inserts | | | | | | | | |
| Common 3% cc 22 Gal 1/2 P.S. | | | | | | | Float Shoe | | | | | | | | |
| | | | | | | | Latch Down | | | | | | | | |
| | | | | | | | LMV 25 | | | | | | | | |
| | | | | | | | Service Supervisor | | | | | | | | |
| | | | | | | | Pumptrk Charge Surface | | | | | | | | |
| | | | | | | | Mileage 50 | | | | | | | | |
| Daniel Benjamin Nathan X Signature | | | | | | | | | | Tax | | | | | |
| | | | | | | | | | | Discount | | | | | |
| | | | | | | | | | | Total Charge | | | | | |

QUALITY WELL SERVICE, INC.

7966

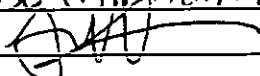
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Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

| Date | Sec. | Twp. | Range | County | State | On Location | Finish |
|---|-------------------------------|--|------------|--------|-------|-------------|--------|
| 5-26-22 | 9 | 30S | 15W | BARBER | KI | | |
| Lease RILEY | Well No. 1X | Location CROFT, KI S to Y E thro CATTLE I.S | | | | | |
| Contractor Martin Del G. RIG #104 | Owner E S into R.G | | | | | | |
| Type Job 5 1/2 I.S | To Quality Well Service, Inc. | | | | | | |
| Hole Size 7 7/8 | T.D. 4834' | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | |
| Csg. 5 1/2 15.5 | Depth 4830.89 | Charge To Griffin | | | | | |
| Tbg. Size | Depth | Street | | | | | |
| Tool | Depth | City | State | | | | |
| Cement Left in Csg. | Shoe Joint 21.40 | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | |
| Meas Line | Displace 114.46 | Cement Amount Ordered 175 lb Proc 2% FEL 10% SALT | | | | | |
| EQUIPMENT | | 5 1/2" Rd Seal 6% C16A 25% C4IP .25% PS | | | | | |
| Pumptrk B No. | | Common | 175 lb | | | | |
| Bulktrk 10 No. | | Poz. Mix | | | | | |
| Bulktrk No. | | Gel. | 329" | | | | |
| Pickup No. | | Calcium | | | | | |
| JOB SERVICES & REMARKS | | Hulls | | | | | |
| Rat Hole 30 x | | Salt | 964" | | | | |
| Mouse Hole | | Flowseal | 44" | | | | |
| Centralizers 1-2-3-4-5-6-7 | | Kol-Seal | 375" | | | | |
| Baskets | | Mud CLR 48 | 500 GAL | | | | |
| D/V or Port Collar | | CFL-117 or CD-110-GAF-38 | C16A 99" | | | | |
| Run 115 lbs 5 1/2 15.5" CSG SET @ 4830.89 | | Sand CL-19 GEL C4IP | 41" | | | | |
| START CSG. CSG ON Bottom TAG | | Handling | 217 | | | | |
| Hook up to CSG. BREAK circ w/ LG | | Mileage | 251 5425 | | | | |
| DEEP Ball circ w/ LG | | 5 1/2 FLOAT EQUIPMENT | | | | | |
| START Pumptrk 10 3/8" HR 12 3/8" MF 10 3/8" HR | | Guide-Shoe | 11" M 1 EA | | | | |
| START Plug R. Hole 30 x | | Centralizer | 7 EA | | | | |
| START mic! Pump 145 lb Proc w/ CSG 1/4.8 1/2" | | Baskets | | | | | |
| SHUT DOWN wash up TEL RELEASE 5 1/2 LO PLG | | AFU Inserts | | | | | |
| START Disn w/ 2% KLL | | Float Shoe | 1 EA | | | | |
| LEFT PSI 99 Bbls at 550' | | Latch Down | 1 EA | | | | |
| Plug Down 115 Bbls out 1300' | | SERVICE SUN | 1 EA | | | | |
| PS on CSG 1700' | | LMJ | 25 | | | | |
| RELEASE! HELD 1/2 Bbl BACK | | Pumptrk Charge | 1.5 | | | | |
| Good circ thro JOB | | Mileage | 50 | | | | |
| THANK YOU | | Tax | | | | | |
| PLEASE CALL AGAIN TOMORROW MIKE BRADY | | Discount | | | | | |
| Signature  | | Total Charge | | | | | |

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

Well Name: Riley #1X
 API: 15-007-24425
 Location: NW NW NW SE
 License Number: 33936
 Spud Date: 05/20/2022
 Surface Coordinates: 2445' FSL & 2555' FEL
 Region: Barber County
 Drilling Completed: 05/26/2022

Bottom Hole Vertical Wellbore
 Coordinates:
 Ground Elevation (ft): 1982' K.B. Elevation (ft): 1987'
 Logged Interval (ft): 3800' To: 4834' Total Depth (ft): 4834'
 Formation: Ordovician (Simpson Shale) @ RTD
 Type of Drilling Fluid: Mud-Co. Chemical Drispac - Displaced 2831-2877' w/ 700 bbls.
 Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: Griffin Management, LLC
 Address: 126 S. Main
 Pratt, KS 67124-0347

GEOLOGIST

Name: Eli J. Felts
 Company: Griffin Management, LLC
 Address: efelts@griffinmgmt.com
 316.765.4070

Drilling Report

Murfin Rig #104
 Tool Pusher: James Mayfield

Info Pertaining to Riley #1X (new hole)

5/20/2022
 Spud @ 3:30 PM

 5/21/2022
 Drilling @ 195'

 5/22/2022
 Drilling @ 824'

 5/23/2022
 Drilling @ 2315'

 5/24/2022
 Drilling @ 3470'

 5/25/2022
 Drilling @ 4175'

 5/26/2022
 RTD @ 4834' 3:30 AM
 CTCH @ RTD & Short Trip (15 Stands - 1.5 Hours)
 MW Wireline Logged (11:45 - 2:45 PM)
 Run Production Casing

 5/27/2022
 Release Rig @ 6:15 AM

Problems

Original Well (Riley #1) was ~20' South of this location.
 Lost Circulation @ 107'. Got Stuck tripping out; worked 1.75 Hours. Cellar Box dropped 4'; sand washing out past sills.
 Layed Down Collars & Plug Riley #1.

 Skid Rig to Riley #1X (20' North).
 Set (3) joints 13.375" @ 94' w/ 110 sxs.
 Lost Circulation @ 107' (107-263 lost 1000 bbls)
 Set (6) joints 8.625" @ 263' w/ 440 sxs.

Pipe Setting

13.375" Set @ 94' w/ 110 sxs.
 8.625" 23# Set @ 263' w/ 440 sxs.
 5.5" 15# Set @ 4830' w/ 175 sxs.

