KOLAR Document ID: 1800560

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					
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: ()	□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: 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)					
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 haid disposal if hadica offsite.					
GSW Permit #:	Operator Name:					
	Lease Name: License #:					
Spud Date or Date Reached TD Completion Date or	QuarterSec 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 Approved by: Date:

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Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	pS. F	R [East	West	County:					
open and closed and flow rates if	, flowing and sh gas to surface t ty Log, Final Lo	nut-in pressurest, along wit	es, whe h final c ain Geo	ther shut-in pre hart(s). Attach physical Data a	essure reached extra sheet if r and Final Electr	station more : ric Loc	level, hydrosta space is needed	tic pressures, d.	bottom hole tempe	val tested, time tool erature, fluid recovery, Digital electronic log
Drill Stem Tests (Attach Addit			Ye	es No		Lo	og Formatio	n (Top), Deptl	n and Datum	Sample
Samples Sent to	Geological Sur	vey	Ye	es 🗌 No		Name)		Тор	Datum
Cores Taken Electric Log Run Geologist Repor List All E. Logs F	t / Mud Logs		Y€ Y€	es No						
			Repo		RECORD [Nev	w Used rmediate, producti	on. etc.		
Purpose of St		ze Hole Orilled	Siz	e Casing (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	OF MENTING /					
Purpose:	[Depth	Typo	of Cement	# Sacks Use		EEZE RECORD	Typo a	nd Percent Additives	
Perforate Protect Ca Plug Back	Top	Bottom	туре	or cement	# Sacks Use	,u		туре а	ia reicent Additives	
Plug Off Z										
Did you perform Does the volum Was the hydraul	e of the total base	fluid of the hyd	draulic fra	cturing treatmen		•	Yes ns? Yes	No (If No	, skip questions 2 an , skip question 3) , fill out Page Three o	,
Date of first Produ	ction/Injection or	Resumed Produ	uction/	Producing Meth			Coolift 0	thor (Fundain)		
Estimated Produc	otion	Oil Bb	le.	Flowing Gas	Pumping Mcf	Wate		ther <i>(Explain)</i> bls.	Gas-Oil Ratio	Gravity
Per 24 Hours		Oli Bb	15.	Gas	IVICI	vvale	ı Di	JIS.	Gas-Oil Hallo	Gravity
DISPO	OSITION OF GAS	S:		N	METHOD OF CO	MPLE.	TION:		PRODUCTIO	N INTERVAL:
Vented	Sold Use	d on Lease		Open Hole				nmingled	Тор	Bottom
(If vente	ed, Submit ACO-18	.)			(5	SUDITIIL I	ACO-5) (Subi	mit ACO-4)		
Shots Per Foot	Perforation Top	Perforation Bottom	on	Bridge Plug Type	Bridge Plug Set At		Acid,		Cementing Squeeze Kind of Material Used)	Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	C3Oil, LLC
Well Name	LONG 3
Doc ID	1800560

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	8.5	7	14	1741	60/40	120	60/40
Liner	8.5	4.5	11	1742	60/40	65	60/40

.∪ E 7TH . O Box 92 .√REKA, KS 67045 (620) 583-5561



Cement or Acid Field Report
Ticket No. 1964

Foreman Kevin McCoy

Camp Eureka

Date	Cust. ID#	Lease	e & Well Number		Section	Township	Range	County	State
11-21-14			# 2 3					Gω	Ks
Customer		-	•	Safety	Unit #	Driv		Unit #	Driver
C30	14			Meeting	104	Alan ,			
Mailing Address				KM	110	Scott			
600 A	RROWhead	DR.		SW	141	Allen	6.		
City		State	Zip Code	AG					
	STRAWN	Ks	66839						
Job Type 41/2	. /		th <u>1761</u>		Slurry Vol. 56	866		oing	
Casing Depth_/			e <u>N/A</u>		Slurry Wt. <u>13</u>		Dri	Il Pipe	
Casing Size & W		Cement Le	eft in Casing 45		Water Gal/SK		Oth	ner <u>BP@17</u>	46
Displacement 2	7.5 BBL	Displace	ement PSI 1000		Bump Plug to		BP	M	
Remarks: SA	Fety Meet,	ing: BP@	1746: 41/2"	INER SE	+ @ 1745	INSIDE 7'	CASING.	Big up To.	41/2 LINCE.
BREAK CIL	Culation	w/ 10 EbL	Fresh water. 1	MIXEd	225 5Ks 60,	140 POZMIX	Cement	w/ 4% Gel	2% CACL=
1/4 Flu SeA	4/5K @ 13	3.9#/9AL YI	eld 1.40 = 56	C66 51	URRY. WASI	out pump	of Lines.	Shut down	. Release
Plug. Displ	Ace Ply 7	to 1702 w/	27.5 BBL WA	ter. F	Mowed A	/19 W/ :	111-e Line	. FINAL PUI	nping
PRESSURE 100	o PSI. Sho	it IN @ 70	0 PS1. Good Ca	mest 1	Returns to -	SURFACE = 1	15 RGC 3	STURRY. Job	Complete.
Rig down.		44.00							/
/					10-11-11-11-11-11-11-11-11-11-11-11-11-1				

Code	Qty or Units	Description of Product or Services	Unit Price	Total
104	1	Pump Charge	1050.00	1050.00
107	35	Mileage	3.95	138:25
203	225 SKS	60/40 Pozmix Cement	12.75	2868.75
206	775 #	Gel 4%	. 20 #	155.00
205	400 #	CACLZ 2%	. 60 #	240.00
209	55 *	Flo Seal 1/4 # /5K	2.25 *	123.75
168 B	9.67 Tons	Ton Mileage 35 Miles	1.35	456.91
113	3 HRS	80 BBL VAC TRUCK	85.00	255.00
224	3000 gAls	City water	10.00/1000	30.00
			1	
403	1	41/2 Top Rubber Plag	45.00	45.00
		THANK YOU	Sub TotAL	5362.66
		THANK YOU 7.15%	Sales Tax	247.57