#### KOLAR Document ID: 1809231

Confider	ntiality Re	quested:
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	- DESCRIP	WEII &	IFASE
	INSIONI		$\mathbf{W} \mathbf{L} \mathbf{L} \mathbf{L} \boldsymbol{\alpha}$	LLASL

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from Dorth / South Line of Section
City: State: Zip:+	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
	Elevation: Ground: Kelly Bushing:
	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	Drilling Fluid Management Plan
Plug Back Liner Conv. to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:      Dual Completion Permit #:	Dewatering method used:
Dual Completion         Permit #:           SWD         Permit #:	Location of fluid disposal if hauled offsite:
EOR         Permit #:	Location of huid disposar in natied offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. 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:									

#### KOLAR Document ID: 1809231

Operator Name:	Lease Name: Well #:
Sec TwpS. R East 🗌 West	County:

Page Two

**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 (Attach Additional Sh	acate)	Y	′es 🗌 No			Sample				
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum	
Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:			Yes ☐ No Yes ☐ No Yes ☐ No							
		Rep	CASING ort all strings set-c		] Ne	w Used rmediate, productio	on, etc.			
Purpose of String	Size Hole Drilled	Siz	ze Casing et (In O.D.)	Weight Lbs. / Ft.		Setting Type of Depth Cemen		# Sacks Used	Type and Percent Additives	
[			ADDITIONAL	CEMENTING /	SQU	EEZE RECORD				
Purpose:	Depth Top Bottom	Туре	e of Cement	# Sacks Use	d		Type and	Percent Additives		
Protect Casing Plug Back TD Plug Off Zone										
<ol> <li>Did you perform a hydra</li> <li>Does the volume of the</li> <li>Was the hydraulic fracture</li> </ol>	total base fluid of the	hydraulic fr	acturing treatment		-	☐ Yes ns? ☐ Yes ☐ Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three		
Date of first Production/Inj Injection:	jection or Resumed Pr	oduction/	Producing Meth	iod:		Gas Lift 🗌 O	ther <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil	Bbls.	s. Gas Mcf Water Bbls. Gas-Oil Ratio					Gravity		
DISPOSITIO	N OF GAS:		Ν	IETHOD OF COM	MPLE	TION:		PRODUCTIC Top	DN INTERVAL: Bottom	
Vented Sold (If vented, Subn	Used on Lease		Open Hole		Dually Comp.       Commingled         (Submit ACO-5)       (Submit ACO-4)		•	юр		
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At				Shot, Cementing Squeeze Record nt and Kind of Material Used)		
TUBING RECORD:	Size:	Set At:		Packer At:						

Form	ACO1 - Well Completion
Operator	Natural Gas Pipeline Company of America LLC
Well Name	AMA 425-A B3 NGPL 3
Doc ID	1809231

## Casing

		Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	14	10.75	9.1	20	Bentonite	15	N/A

# CITATION DEEP GROUNDBED DRILL LOG & RECTIFIER FORM

CLIENT	INFO	ORMATIC	DN														
Client																	
Facility	_	AMA 425A DW-3 Haddam County WASHINGTON State									Customer Contact Kevin Brown Phone No. +1 (308) 325						
City		Haddam County			ty	WASHINGT	ON State	Ks			Pho	ne No.	+1 (30	08) 325-3	3563		
DEEP G	DEEP GROUNDBED & DRILLING LOG INFORMATION								New Installation			Existing Rectifier					
Hole Dic	Hole Dia. 10" Total Depth 250' Casing Feet 20'			et 20'	Dia.	10"	10" Type SDR-21 PVC		21 PVC	Groundbed GPS			GPS				
No. Anc	odes	13	Size a	& Type			Anode Le		Size	#8	Type H			Ν	39.8717		
Lbs. Col		5000	Coke	э Туре	SC-3		Top of Co		n 89'		Vent 1				-97.2454	417	
Lbs. Plug	g	2950	Plug	Туре	Bent	onite	Top of Plu	g  3'				L	.ogging	y Volts	/olts 13.2		
						Ele	ectric Log		Durit				AI .		Electric Log		g
Depth Ft.	DF	RILLER'S LO	ЭG	Anode NO.	Valta	Amps	Amps	Remarks	Depth Ft.	DRIL	LER'S LC	og ľ	Anode NO.	Volta	Amps	Amps	Bomarka
г.				NO.	Volts	Before	After	Kennurks	F1.				NO.	Volts	Before	After	Remarks
0									205				5			7.7	
5 10		Casing							210 215	s	and stone		4		1.5	7.0	
15		220119			<u> </u>				213		Rock				1.1	7.0	
20		Casing							225				3			8.1	
25		- · ·							230		Rock				1.3	7.0	
30 35		Sand				1.1			235 240		Rock	-+	2		1.2	7.9	
40		Red clay			<u> </u>	1.7			240			-+	1		1.2	6.0	
45									250		Rock				1.3		
50		Red clay				1.6			255								
55 60		Red clay				1.7			260 265								
65		Red clay				1.7			270								
70		Red clay				1.4			275								
75									280								
80		Red clay				1.4			285								
85 90		Red clay				1.3			290 295								
95		1100 010				1.5			300								
100		Red clay				1.6			305								
105									310								
110 115		Red clay				1.5			315 320								
120		Red clay				1.7			325								
125				13			8.2		330								
130		Red clay				1.7			335								
135		Red clay		12		1 E	8.4		340								
140 145		Red clay		11		1.5	9.0		345 350								
145		Red clay				1.6	0.0		355								
155				10			9.8		360								
160		Red clay				1.6			365								
165 170		Sand stone		9		1.6	9.8		370 375								
175		54.14 510116		8			8.7		380								
180		Sand stone				1.8			385								
185				7		4 5	7.4		390								
190 195		Rock		6		1.5	7.8		395 400								
200	5	Sand ston	е			1.6	1.0			I			Total				
	. 501																
						AI	NODE JUN		)X							со	MMENTS
Cir.	An	np Cir.	/	Amp	Cir.	ļ	Amp	Cir. A	mp	Cir.	Amp	р	Cir.	A	mp		
1		6			11			16		21			26				
2		7			12			17		22			27				
3		8			13			18		23			28				
4		9			14			19		24			29				
5 Shunt		10	L	Amp	15			20		25			30				
Shunt		Μv		Amp	I							! I	OTAL				
L																	

