KOLAR Document ID: 1813367

CORRECTION #1

Confidentiality Requested:
☑ Yes ☐ No

CONFIDENTIAL

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 # 34089
Name: Agricultural Energy Services
Address 1: PO BOX 31865
Address 2:
City: EDMOND State: OK Zip: 73003 + 0032
Contact Person: Montgomery Escue
Phone: (405) 208-2096
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Tom Williams
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 #:

06/15/2024	06/27/2024	09/30/2024
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No.: 15-175-22293-00-00
Spot Description:
SW- NW- SE -SE Sec. 15 Twp. 33 S. R. 31 ☐ East ☑ West
856 Feet from ☐ North / ☑ South Line of Section
1212 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
GPS Location: Lat: *(e.g. xx.xxxxx)*, Long: *(e.g. -xxx.xxxxx)*
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Seward
Lease Name: LELIA MAY GEORGE Well #: 1-15
Field Name:
Producing Formation: Marmaton
Elevation: Ground: 2737 Kelly Bushing: 2750
Total Vertical Depth: 6086 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 1615 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: 0 ppm Fluid volume: 210 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: Max's Water Service
Lease Name: IB Regier 1 License #: 21232
Quarter NE Sec. 17 Twp. 33 S. R. 27 ☐ East ☑ West
County: Meade Permit #: D21232.0

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: 10/04/2024
☐ Confidential Release Date: 10/04/2026
☑ Wireline Log Received ☑ Drill Stem Tests Received
☑ Geologist Report / Mud Logs Received
☐ UIC Distribution
ALT ☑ I ☐ II ☐ III Approved by: Kelsey Cox Date: 01/22/2025