KOLAR Document ID: 1834864

Confident	tiality R	equested:
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	- DESCRIPT	/FII &	I FASE
	Instont			LLAJL

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:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec 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 III Approved by: Date:				

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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			og Formatio	n (Top), Depth a	and Datum	Sample
Samples Sent to Geolo			⁄es 🗌 No	1	Name	Э		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud List All E. Logs Run:		□ Y □ Y	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 Depth	Type of Cement	# 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									
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons?				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.	Gas	Mcf	Wate	er Bb	ls.	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		-	·	mingled	юр	
	foration Perform Top Botto		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeezend of Material Used)	
TUBING RECORD:	Size:	Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	RJ Energy, LLC
Well Name	WOLFE MCADAM 12
Doc ID	1834864

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	40	portland	5	
Production	5.625	2.875	6.5	899	portland	120	

6	Soil	6	
18	clay and gravel	24	
33	Shale	57	
63	Lime	120	start 12/13/2024
66	Shale	186	finish 12/16/2024
100	Lime	286	set 40' 7"
43	Shale	329	ran 899' 2 7/8
147	Lime	476	cemented to surface 120 sxs
188	Shale	664	
23	Lime	687	
52	Shale	739	
31	Lime	770	
13	Shale	783	
11	Lime	794	
11	Shale	805	
5	Lime	810	
11	Shale	821	
8	Lime	829	
35	Shale	864	
12	bkn sand	876	good show
54	Shale	930	td

IMG_8422.jpg

	HAMMERSON CORPORATION PO BOX 180				nvoic	
	PO BOX 189					
	Gas, KS 66742			Date 12/24/2024	2510	
Residence				12/24/2024	2510	<u> </u>
Γ	Bill To					
R	I Dan]				
G	2. ENERGY LLC 2082 NE NEOSHO RD ARNETT, KS 66032					
L						
]				
		P.O. No.	Ter	ms	Projec	t
			Due on	receipt		
Quantity	Description			Rate	Ar	nount
160	Well Mud (\$10.20 Per Sack) Wolfe Mcadam 12W Ticket	#25109		10	.20	1,632.
1	i nour kate	120107			5.00	65.
1 160	Fuel Surcharge Well Mud (\$10.20 Per Sack) Wolfe Mcadam 12 Ticket #2	25117		1(0.20	35 1,632
1	Hour Rate	and the second			5.00	65
160	Fuel Surcharge Well Mud (\$10.20 Per Sack) Wolfe Mcadam 16 Ticket #2	5120			5.00	3: 1,63
1].	Hour Rate			6	5.00	1,05
160	Fuel Surcharge	#25126			35.00	3
114	Well Mud (\$10.20 Per Sack) Wolfe Mcadam 16W Ticket Hour Rate	#25120			65.00	1,63
1 F	uel Surcharge				35.00	
160 1	Vell Mud (\$10.20 Per Sack) JB George 1W Ticket #2512	8			10.20	1,6
	our Rate uel Surcharge				65.00 35.00	
	ALES TAX			e	5.50%	
1						
						•
1						
our business						
				Tota		