

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
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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
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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:	
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EPOC, LLC
Andover, Kansas

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

Well Name: Eck A #6
API: 15-015-24188
Location: NW NW SE NW section 32-T23S-R5E
License Number: 35831
Spud Date: 12-14-22
Surface Coordinates:
Region: Butler County
Drilling Completed: 12-18-22

Bottom Hole
Coordinates:
Ground Elevation (ft): 1488 K.B. Elevation (ft): 1494
Logged Interval (ft): 2000 To: R.T.D. Total Depth (ft): 2571
Formation: Kinderhook
Type of Drilling Fluid: Chemical

Printed by MudLog from WellSight Systems 1-800-447-1534 www.WellSight.com

OPERATOR

Company: EPOC, LLC
Address: 313 E. Aaron Dr.
Andover, Kansas 67002-8649

GEOLOGIST

Name: William M. Stout
Company:
Address: 1441 N. Rock Road #1903
Wichita, Kansas 67206

FORMATION TOPS

G.L. 1488 K.B. 1494

Formation	Sample	Log
Kansas City	2058 -564	2078 -584
BKC	2193 -699	2212 -718
Marmaton	2267 -773	2293 -799
Altamont	2309 -815	2336 -842
Cherokee	2388 -894	2413 -919
Comglomerate	2402 -908	2429 -935
Mississippi	2413 -919	2440 -946
Mississippi Lime	2498 -1004	2524 -1030
Kinderhook	2502 -1008	2528 -1034
Total Depth	2571 -1077	2596 -1102

CASING

205' 8 5/8" surface casing @ 215'
5 1/2" production casing.

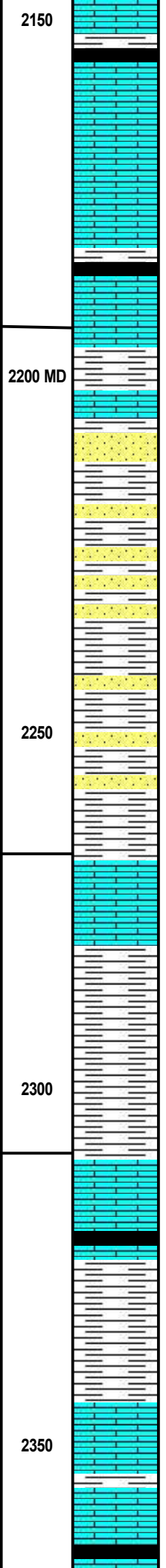
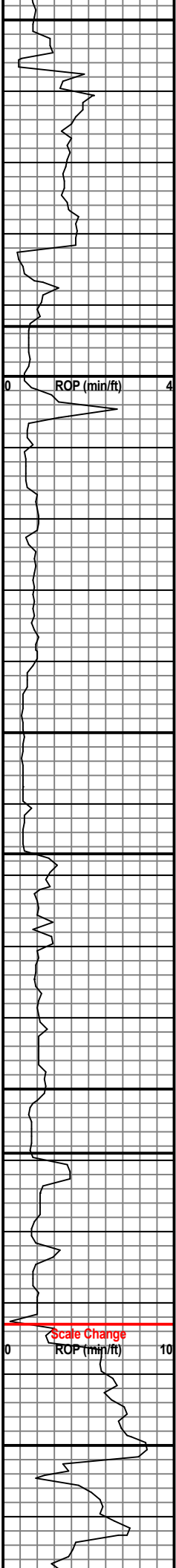
Comments

The decision was made to set and cement 5 1/2" casing to further evaluate the Mississippi Chert through perforations.

ROCK TYPES

	Anhy		Clyst		Gyp		Mrlst		Shgy
	Bent		Coal		Igne		Salt		Sltst
	Brec		Congl		Lmst		Shale		Ss
	Cht		Dol		Meta		Shcol		Till

Curve Track 1 ROP (min/ft) _____	MD	Lithology	Geological Descriptions	Remarks
	2050		Sh- gy, m gy, sli sdy. Sh- gy, m gy. Sh- a.a. Sh- gy, dk gy, tr Ls- lt bm, bm, f-x, dns.	7:00 P.M. 12-16-22 There was a joint of drill pipe drilled but not tallied. Log top depth are correct. Kansas City 2058' -564
	2100		Ls & Sh- a.a. Ls- lt bm, lt gy, f-x, fos, sli chky, NS. NV por. Ls- lt bm, bm, f-x, fos, dns, NS, s/ Sh- gy, gm. Ls- lt bm, f-x, fos, chky, s/ dns, NS. Ls- a.a. Ls- lt bm, bm, f-x, fos, dns, sli chty, NS, w/ Sh- gy, gm, tr blk. Ls- lt bm, lt gy, f-x, fos, dns, NS, Sh- a.a. Ls- a.a.	e-log 2078' -584



2150 Ls- lt bm, gy, f-x, fos, dns, NS, w/ Sh- gy, blk, s/ carb.

Ls- lt bm, bm, f-x, fos, dns, NS, tr Ss- gy, f-gm, arg, mica, NV por.

Ls- a.a.

Ls- lt bm, bm, lt gy, f-x, fos, dns, w/ sh- gy, tr blk.

2200 MD Ls- lt bm, f-x, fos, dns, NS, w/ Sh- gy, s/ sdy.

Ls Sh- a.a.

Ss- gy, f- gm, arg, calc, mica, NS, Sh- gy, gm, Ls- a.a.

Ss- a.a.

2250 Ss- gy, vy arg, w/ Sh- gy,

Ls- lt bm, bm f-x, fos, dns, w/ Sh- gy gm, sdy.

Sh- gy, dk gy, gm, sdy, Ls- a.a.

2300 Sh- gy, gm, sdy, Ls- a.a.

Ls- lt bm, bm, f-x, fos, dns, w/ Sh- a.a.

Sh- gy, dk gy, gm.

Ls- lt bm, lt gy, f-x, few fos, dns, NS, abund Sh- a.a. tr red.

2350 Ls- lt bm, bm, f-x, dns, few fos, NS, w/ Sh- gy, gm.

Ls- a.a. w/ Sh- a.a. s/ blk.

Base Kansas City 2193' -699

e-log 2212' -718

Marmaton 2267' -773

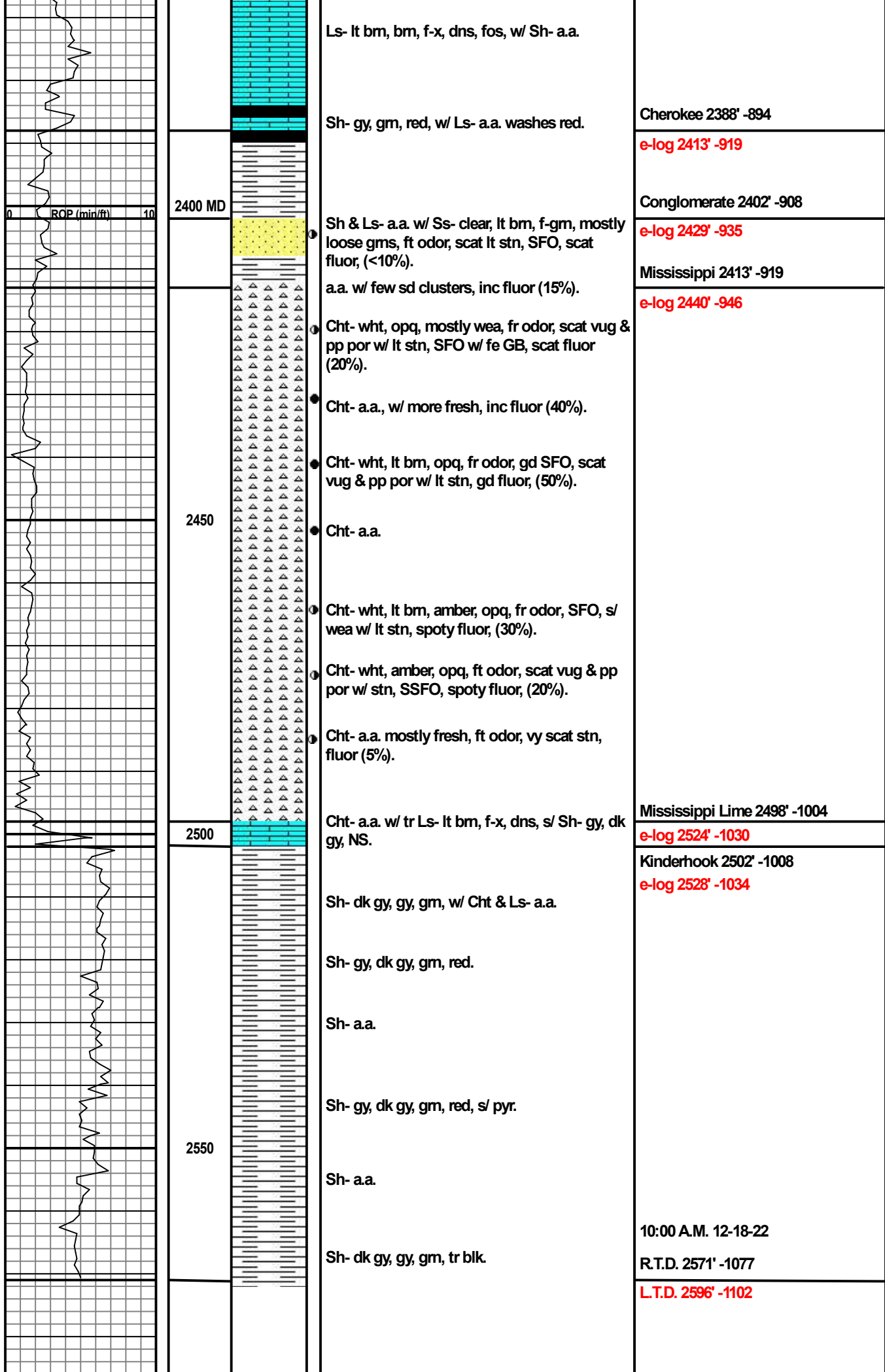
e-log 2293' -799

Vis. 35
Wt. 9.3#
WL. 12.0
LCM 1#

Altamont 2309' -815

e-log 2336' -842

Trip bit @ 2333' 5:45 A.M.
12-17-22
Depth correction after trip from
2345' to 2333'.
Back drilling 1:00 P.M.
12-17-22



310 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report
 Ticket No. **6907**
 Foreman Kevin McCoy
 Camp EUREKA

API # 15-015-24188

C/G
 DR19
 RIG 1

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State
12-15-22	1423	ECK "A" #6	32	235	5E	Butler	Ks
Customer		Safety Meeting		Unit #	Driver	Unit #	Driver
EPOC LLC		Km SF RM		111	Shannon F.		
Mailing Address				110	Russ M.		
313 E. AARON DR.							
City	State	Zip Code					
ANDOVER	Ks	67002					

Job Type SURFACE Hole Depth 212' Slurry Vol. 33 Bbl Tubing _____
 Casing Depth 202' G.L. Hole Size 12 1/4" Slurry Wt. 15" Drill Pipe _____
 Casing Size & Wt. 8 5/8" 23" Cement Left in Casing 15' ± Water Gal/SK _____ Other _____
 Displacement 12.5 BBL Displacement PSI _____ Bump Plug to _____ BPM _____

Remarks: SAFETY Meeting: Rig up to 8 5/8" casing. BREAK CIRCULATION w/ 10 BBL fresh water. Mixed 135 SKS CLASS "A" Cement w/ 3% CaCl2, 2% Gel, 1/4" FloSeal/SK @ 15"/GAL, yield 1.35 = 33 BBL Slurry. Displace w/ 12.5 BBL fresh water. Shut casing in. Good Cement Returns to SURFACE = 8 BBL Slurry to pit. Job Complete. Rig down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C 101	1	Pump Charge	950.00	950.00
C 107	.50	Mileage	5.00	250.00
C 200	135 SKS	CLASS "A" Cement	18.55	2504.25
C 205	380 "	CaCl2 3%	.75 "	285.00
C 206	250 "	Gel 2%	.30 "	75.00
C 209	35 "	FloSeal 1/4" /SK	2.80 "	98.00
C108B	Tons	Ton Mileage 50 miles	1.50	476.25
			Sub Total	4688.50
			Less 5%	241.55
			Sales Tax	192.55

THANK YOU
 M

6.5%

Authorization By Tim Stack Title C/G Daily Toolpusher Total 4,587.50

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

E 7TH
 Box 92
 KEKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report

Ticket No. **6920**
 Foreman David Gardner
 Camp Eureka

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State		
12-18-22	1423	Eck A' #6				Butler	KS		
Customer EPOC, LLC			Unit #		Driver		Unit #	Driver	
Mailing Address 313 E. Aaron Dr.			104		Allen B.				
City Andover			113		Dan				
State KS		Zip Code 67002							

Job Type Longstring Hole Depth 2602' Slurry Vol. 41 Bbl Longstring Tubing _____
 Casing Depth 2569.79 G.L. Hole Size 7 7/8" Slurry Wt. 13.8^g Drill Pipe _____
 Casing Size & Wt. 5 1/2" 15.50* Cement Left in Casing 0' Water Gal/SK _____ Other _____
 Displacement 61 1/2 Bbl Displacement PSI 1000 Bump Plug to 1500 PSI BPM _____

Remarks: Safety Meeting: Used 5 1/2" casing set @ 2569.79' G.L. Rig up to 5 1/2 casing. Break circulation w/ 15 Bbl fresh water. Mixed 125 SKS Thick Set Cement w/ 5" Kolseal/sk, 2" Phenoseal/sk @ 13.8^g/gal, yield 1.85 = 41 Bbl slurry. Wash out pump & lines. Shut down. Release Latch Down plug. Displace plug to seat w/ 61 1/2 Bbl fresh water. (KCL in 1st 30 Bbl) Final pumping pressure of 1000 PSI. Bump plug to 1500 PSI. Wait 2 mins. Release pressure. Float & plug held. Good circulation while cementing. Job complete. Rig down.

Plug R.H. w/ 20 SKS
Centralizers on #2, 5, 15, 25, 35

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C102W	1	Pump Charge	1495.00	1495.00
C107	50	Mileage	5.00	250.00
C201	145 SKS	Thick-Set Cement	24.25	3516.25
C207	725*	Kolseal 5"/sk	.56	406.00
C208	290*	Phenoseal 2"/sk	1.55	449.50
C108B	7.98 Tons	Ton Mileage - 50 Miles	1.50	598.50
C661	1	5 1/2 AFU Float Shoe w/ Latch Down Insert	364.00	364.00
C421	1	5 1/2 Latch Down Plug	285.00	285.00
C504	5	5 1/2 x 7 7/8 Centralizers	59.00	295.00
C222	1 1/2 Gals	KCL (In 1 st 30 Bbl Displacement water)	32.00	48.00
<u>Thank You</u>			Sub Total	7707.25
			Less 5%	-402.79
			6.5 % Sales Tax	348.64
			Total	7653.10

Authorization _____

Title _____

Total

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.