

Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West County: _____

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 <i>(Attach Additional Sheets)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Name | Top | Datum |
| 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: | | | | | |

| <div style="text-align: center;"> CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used </div> <div style="text-align: center;">Report all strings set-conductor, surface, intermediate, production, etc.</div> | | | | | | | |
|--|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| 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 (Explain) _____ | | | |
| 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 |
| | | | |

| 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: | | |

| | |
|-----------|------------------------|
| Form | ACO1 - Well Completion |
| Operator | Altavista Energy, Inc. |
| Well Name | STRAHM WEST A-53 |
| Doc ID | 1851630 |

Casing

| Purpose Of String | Size Hole Drilled | Size Casing Set | Weight | Setting Depth | Type Of Cement | Number of Sacks Used | Type and Percent Additives |
|-------------------|-------------------|-----------------|--------|---------------|----------------|----------------------|----------------------------|
| Surface | 9.875 | 7 | 15 | 40 | Portland | 8 | NA |
| Production | 5.875 | 2.875 | 6.5 | 1105 | Econobond | 115 | See Ticket |
| | | | | | | | |
| | | | | | | | |

Summary of Changes

Lease Name and Number: STRAHM WEST A-53

API/Permit #: 15-207-29990-00-00

New Doc ID: 1851630

Parent Doc ID: 1837632

Correction Number: 1

Approved By: Alexis Vincent

| Field Name | Previous Value | New Value |
|---|----------------|--|
| Date of First or Resumed Production or SWD or Enhr Electric Log Run? | No | 06/17/2025 Yes |
| Elogs_PDF | | Gamma Ray/Neutron/CCL Alexis Vincent |
| Approved By | Kelsey Cox | |
| Approved Date | 04/07/2025 | 07/10/2025 |
| Method Of Completion - Perf | No | Yes |
| Perf_acid1 | | 31 Perfs - 2" DML RTG |
| Perf_perf1bottom | | 1030 |
| Perf_perf1top | | 1020 |
| Perf_shots1 | | 3 |

Summary of changes for correction 1 continued

| Field Name | Previous Value | New Value |
|-----------------------------|----------------|-----------|
| Producing Method Pumping | No | Yes |
| Production - Barrels Oil | | 2 |
| Production Interval #1 | | 1020 |
| Production Interval #3 | | 1030 |