Confidentiality Requested:
☑ Yes ☐ No

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
January 2018
Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 34223
Name: Utah Oil LLC
Address 1: 2394 UTAH RD
Address 2:
City: RANTOUL State: KS Zip: 66079 + 9025
Contact Person: Brad Leach
Phone: (785) 214-9472
CONTRACTOR: License # 34223
Name: Utah Oil LLC
Wellsite Geologist: None
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 #:

07/21/2025	07/23/2025	07/23/2025
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No.: 15-059-27515-00-00
Spot Description:
N2 - S2 - NW - NE Sec. 19 Twp. 17 S. R. 21 ☑ East ☐ West
970 Feet from ☑ North / ☐ South Line of Section
1980 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: Franklin
Lease Name: REINKE Well #: KOI-8B
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 946 Kelly Bushing: 949
Total Vertical Depth: 655 Plug Back Total Depth: 612
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
If yes, show depth set: Feet
If Alternate II completion, cement circulated from: 655
feet depth to: 0 w/ 76 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 30 bbls
Dewatering method used: Evaporated
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: 09/01/2025
☐ **Confidential Release Date:** 09/01/2027
☑ **Wireline Log Received** ☐ **Drill Stem Tests Received**
☐ **Geologist Report / Mud Logs Received**
☑ **UIC Distribution**
ALT ☐ **I** ☑ **II** ☐ **III** **Approved by:** Alexis Vincent **Date:** 09/03/2025