KOLAR Document ID: 1854336

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U-7
August 2019

CASING MECHANICAL INTEGRITY TEST

Disposal: ☐ Enhanced Recovery: ☑ KCC District No.: 1

Operator License No.: 36164 Name: MAD Operators LLC

Address 1: 7 SW 26 AVE

Address 2:

City: GREAT BEND State: KS Zip: 67530 + 6525

Contact Person: Susan Schneweis Phone: (620) 793-3051

API No.: 15-165-21997-00-01 Permit No.: E31550.2

SE - NE - NW - NE Sec. 34 Twp. 18 S. R. 16 ☐ East ☑ West

4912 Feet from ☐ North / ☑ South Line of Section

1454 Feet from ☑ East / ☐ West Line of Section

Lease: DDD ROSE Well No.: 1

County: Rush

Well Construction Details: ☐ New well ☐ Existing well with changes to construction ☑ Existing well with no changes to construcion

Maximum Authorized Injection Pressure: 800 psi Maximum Injection Rate: 1500 bbl/d

	Conductor	*Surface*	*Intermediate*	*Production*	*Liner*	*Tubing*
Size:	NA	8.625	NA	5.5	NA	2.875
Set at:		1046		3682		3602
Sacks of Cement:		485		130		Sealtite
Cement Top:		0		2975		
Cement Bottom:		1046		3682		

Packer Type: Arrow Set 1-X Set at: 3602

☐ DV Tool ☐ Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): 3695 (3662) feet depth

Zone of Injection Formation: REGAN SAND Top Feet: 3608 Bottom Feet: 3624 Perf. or Open Hole: Perf

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? ☐ Yes ☑ No

If Dual Completion - Injection is: ☐ Above Production ☐ Below Production

FIELD DATA

GPS Location: Datum: ☐ NAD27 ☑ NAD83 ☐ WGS84 Lat: 38.44887 Long: -99.07478 Date Acquired: 04/11/2016

MIT Type: Tubing and Packer (or Initial Pressure) Test MIT Reason: 5-YEAR TEST

Time in Minute(s):	0	15	30			
Pressures: Set up 1	310	310	310			
Set up 2						
Set up 3						

Tested: ☐ Casing ☑ or Casing - Tubing Annulus System Pressure during test: 0 Bbls. to load annulus: 0

Test Date: 10/17/2025 Using: AW Industries LLC Company's Equipment

The zone tested for this well is between 0 feet and 3602 feet.

The test results were verified by operator's representative:

Name: Shaun Petz Title: Field worker Phone: (620) 617-7331

KCC Office Use Only

The results were:

☑ Satisfactory

☐ Not Satisfactory

Next MIT: 10/16/2030

State Agent: Ken Scofield Title: E.C.R.S. Witness: ☑ Yes ☐ No

Remarks: