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 # 36295
Name: JP&4 LLC
Address 1: 721 N PRAIRIE DUNES ST
Address 2:
City: WICHITA State: KS Zip: 67230 + 6650
Contact Person: Scott Wise
Phone: ( 785 ) 737-6132
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Andrew Stenzel
Purchaser: CHS

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 #:

| 06/04/2026 | 06/17/2026 | 07/17/2026 |
|---|---|---|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No.: 15-193-21161-00-00
Spot Description:
NE - NE - SW - NW Sec. 10 Twp. 8 S. R. 34 ☐ East ☑ West
1453 Feet from ☑ North / ☐ South Line of Section
1100 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: Thomas
Lease Name: BRADFORD Well #: 1-10
Field Name:
Producing Formation: LKC
Elevation: Ground: 3208 Kelly Bushing: 3219
Total Vertical Depth: 4780 Plug Back Total Depth: 4737
Amount of Surface Pipe Set and Cemented at: 355 Feet
Multiple Stage Cementing Collar Used? ☑ Yes ☐ No
If yes, show depth set: 2780 Feet
If Alternate II completion, cement circulated from: 2780
feet depth to: 0 w/ 525 sx cmt.

**Drilling Fluid Management Plan**
*(Data must be collected from the Reserve Pit)*
Chloride content: 7500 ppm Fluid volume: 500 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: 10/01/2026
☐ **Confidential Release Date:** 09/30/2028
☑ **Wireline Log Received** ☑ **Drill Stem Tests Received**
☑ **Geologist Report / Mud Logs Received**
☐ **UIC Distribution**
**ALT** ☐ I ☑ II ☐ III **Approved by:** Alexis Vincent **Date:** 10/02/2026