

## Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1 September 1999 Form Must Be Typed

# WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

| Operator: License # 31514                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | API No. 15 - 15-033-21,327                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name: Throughbred Associates, L.L.C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | County: Comanche                                                                                                                                                                                                               |
| Address: 8100 E 22nd St. N. Bldg. 600 Ste. F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | C_NV.SESec15_Twp32_S. R19 East  West                                                                                                                                                                                           |
| City/State/Zip: Wichita, KS 67226                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1980' feet from S N (circle one) Line of Section                                                                                                                                                                               |
| Purchaser: N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1980' teet from E / W (circle one) Line of Section                                                                                                                                                                             |
| Operator Contact Person: Robert C. Patton                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Footages Calculated from Nearest Outside Section Corner:                                                                                                                                                                       |
| Phone: ( <u>.316</u> ) <u>685-1512</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (circle one) NE SE NW SW                                                                                                                                                                                                       |
| Contractor: Name: Pickrell Drilling Co., Inc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Lease Name: Herd Well #: 4                                                                                                                                                                                                     |
| License: 5123 RECEIVE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Field Name: N/A                                                                                                                                                                                                                |
| Wellsite Geologist: Robert Patton KANSAS CORPORATION C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | MAYSOLICANG Formation: N/A                                                                                                                                                                                                     |
| Design As Time of Completions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2022' 2017'                                                                                                                                                                                                                    |
| New Well Re-Entry Workover DEC 16 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | O2 <sub>Total Depth: 5910' Plug Back Total Depth: 736'</sub>                                                                                                                                                                   |
| Oil SWD SIOW Temp. Abd.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Amount of Surface Pipe Set and Cemented at 726' Feet                                                                                                                                                                           |
| OIN SWD SIOW LEMP. Abd. CONSERVATION DIV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ISION                                                                                                                                                                                                                          |
| Gas ENHR SIGW WICHITA KS  Dry Other (Core, WSW, Expl., Cathodic, etc)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | If yes, show depth setFeet                                                                                                                                                                                                     |
| If Workover/Re-entry: Old Well Info as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | If Alternate II completion, cement circulated from                                                                                                                                                                             |
| Operator:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | feet depth to sx cmt.                                                                                                                                                                                                          |
| ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | sx cmr.                                                                                                                                                                                                                        |
| Well Name: Original Total Depth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Drilling Fluid Management Plan ACT / 3-21-03 (Data must be collected from the Reserve Pit)                                                                                                                                     |
| Deepening Re-perf Conv. to Enhr./SWD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                          |
| Plug Back Plug Back Total Depth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Chloride contentppm Fluid volumebbls                                                                                                                                                                                           |
| Commingled Docket No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Dewatering method used                                                                                                                                                                                                         |
| in the contract of the contrac | Location of fluid disposal if hauled offsite:                                                                                                                                                                                  |
| Dual Completion Docket No  Other (SWD or Enhr.?) Docket No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Operator Name:                                                                                                                                                                                                                 |
| Other (SWD or Enhr.?) Docket No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Lease Name: License No.:                                                                                                                                                                                                       |
| 8-8-2002 8-20-2002 9-23-2002                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Quarter Sec Twp. S. R East West                                                                                                                                                                                                |
| Spud Date or Date Reached TD Completion Date or Recompletion Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | County: Docket No.:                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                |
| INSTRUCTIONS: An original and two copies of this form shall be filed with a Kansas 67202, within 120 days of the spud date, recompletion, workover information of side two of this form will be held confidential for a period of 12 107 for confidentiality in excess of 12 months). One copy of all wireline logs a TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | r or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply.  2 months if requested in writing and submitted with the form (see rule 82-3- and geologist well report shall be attached with this form. ALL CEMENTING |
| All requirements of the statutes, rules and regulations promulgated to regulat herein are complete and correct to the best of my knowledge.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | e the oil and gas industry have been fully complied with and the statements                                                                                                                                                    |
| The contribute of the desired of the desired the tributed of the desired the tributed of the desired to the des |                                                                                                                                                                                                                                |
| Signature: 12 EX                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | KCC Office Use ONLY                                                                                                                                                                                                            |
| Title Managing Partner Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Letter of Confidentiality Attached                                                                                                                                                                                             |
| Subscribed and sworn to before me this aday of October                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                |
| 192002                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Wireline Log Received                                                                                                                                                                                                          |
| Notary Public: Karry Public: K | Geologist Report Received                                                                                                                                                                                                      |
| S at 3 70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | UIC Distribution                                                                                                                                                                                                               |
| Date Commission Expires                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                |

#### Side Two

| Operator Name: Throu                                                                                   | ator Name: Throughbred Associates, L.L.C                                               |                                              |                              | se Name. Herd Well #: 4 |                                                                                      |                     |                 |                  |  |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------|------------------------------|-------------------------|--------------------------------------------------------------------------------------|---------------------|-----------------|------------------|--|
| Sec. 15 Twp. 32                                                                                        |                                                                                        |                                              | County: Com                  |                         |                                                                                      |                     |                 |                  |  |
| INSTRUCTIONS: Show<br>tested, time tool open a<br>temperature, fluid recov<br>Electric Wireline Logs s | nd closed, flowing an ery, and flow rates if                                           | d shut-in pressures,<br>gas to surface test, | , whether sl<br>along with 1 | hut-in pres             | sure reached                                                                         | static level, hydro | static pressure | es, bottom hole  |  |
| Drill Stem Tests Taken<br>(Attach Additional She                                                       | eels)                                                                                  | ☐ Yes ✓ No                                   |                              | Lo                      | g Formati                                                                            | on (Top), Depth a   | nd Datum        | Sample           |  |
| Samples Sent to Geological Survey   ✓ Yes No Cores Taken   Yes ✓ No                                    |                                                                                        | ☑ Yes No                                     | No                           |                         | Name                                                                                 |                     | Тор             |                  |  |
|                                                                                                        |                                                                                        |                                              | See Attachment               |                         |                                                                                      |                     |                 |                  |  |
| Electric Log Run<br>(Submit Copy)                                                                      |                                                                                        | ✓ Yes No                                     |                              |                         |                                                                                      | KANSAS CORF         | CEIVED          |                  |  |
| ist All E. Logs Run:<br>See Attachment                                                                 |                                                                                        |                                              |                              |                         |                                                                                      | DEC                 | 16 2002         | MISSION          |  |
|                                                                                                        |                                                                                        |                                              |                              |                         |                                                                                      | CUNSERVA            |                 |                  |  |
|                                                                                                        |                                                                                        |                                              | RECORD                       | Nev                     |                                                                                      |                     | TA, KS          |                  |  |
| Durana of String                                                                                       | Size Hole                                                                              | Report all strings set-<br>Size Casing       |                              | ight                    | Setting                                                                              | Type of             | # Sacks         | Type and Percent |  |
| Purpose of String                                                                                      | Drilled                                                                                | Set (In O.D.)                                | Lbs.                         | ĬFt.                    | Depth                                                                                | Cement              | Used            | Additives        |  |
| See Attachment                                                                                         |                                                                                        |                                              |                              |                         |                                                                                      |                     |                 |                  |  |
|                                                                                                        |                                                                                        |                                              |                              |                         |                                                                                      |                     |                 |                  |  |
| Purpose:                                                                                               | Purpose: Depth Type of Cement                                                          |                                              | #Sacks                       |                         | Used Type and Percent Additives                                                      |                     |                 |                  |  |
| Protect Casing Plug Back TD Plug Off Zone                                                              |                                                                                        |                                              |                              |                         |                                                                                      |                     |                 | · · · · · ·      |  |
| Shots Per Foot                                                                                         | PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated |                                              |                              |                         | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth |                     |                 |                  |  |
|                                                                                                        |                                                                                        |                                              |                              | · · ·                   |                                                                                      |                     |                 |                  |  |
|                                                                                                        |                                                                                        |                                              |                              |                         |                                                                                      |                     |                 |                  |  |
|                                                                                                        |                                                                                        | <u> </u>                                     | - <u>-</u> ::                |                         |                                                                                      | · · · · ·           |                 |                  |  |
| TURING RECORD                                                                                          | Sizo                                                                                   | Sot At                                       | Packer                       | At                      | Liner Run                                                                            |                     |                 |                  |  |
| TUBING RECORD Size Set At Packer A                                                                     |                                                                                        |                                              |                              | Line, (Mi)              | Yes ✔ No                                                                             | ·                   |                 |                  |  |
| Date of First, Resumed Pr                                                                              | roduction, SWD or Enhr.                                                                | Producing Me                                 | thod                         | Flowing                 | Pumpi                                                                                | ing Gas Lif         | ft Othe         | er (Explain)     |  |
| Estimated Production<br>Per 24 Hours                                                                   | Oil Bbl                                                                                | s. Gas                                       | Mcf                          | Wate                    | r E                                                                                  | Bbls. C             | Gas-Oil Ratio   | Gravity          |  |
| Disposition of Gas                                                                                     | METHOD OF COMPLETION Production Interval                                               |                                              |                              |                         |                                                                                      |                     |                 |                  |  |
| Vented Sold (If vented, Sum                                                                            | Used on Lease it ACO-18.)                                                              | Open Hole                                    |                              | rf. D                   | ually Comp.                                                                          | Commingled _        |                 |                  |  |

#### Attachment to ACO-1

OPERATOR:

Thoroughbred Associates, LLC

LEASE NAME:

Herd #4

LOCATION:

C NW SE, 1980' FSL 1980' FEL

Sec. 15-T32S-R19W

Comanche, County, Kansas API#: 15-033-213270000

### List of all E. Logs Run:

Sonic Log
Dual Induction Log
Compensated Neutron Density
Micro Log
Geologists Report

## Casing Record:

Conductor: Set 100' of 20" csg.

Surface: Drid 12 ¼" hole to 448' and lost circ. Dry drld 12 ½" hole to 726;. Ran 16 jst. Of new 8 5/8" 23# surface set @ 692'. Cmt w/100sx Lite, 3% CC w ¼# FC, followed by 100sx Class A 2% gel 3% CC. Cmt did not circ. Cmt dodwn backside w/175sx Lite, 3%CC w/1/4#FC.

| Heebner     | 4263' –2241 |
|-------------|-------------|
| Brown Lime  | 4440' –2418 |
| Lansing     | 4462' –2440 |
| Stark       | 4762' –2740 |
| Marmaton    | 4932' –2910 |
| Altamont    | 4974' -2952 |
| Cherokee    | 5063' -3041 |
| Mississippi | 5146' -3124 |
| Cowley      | 5375' -3353 |
| Viola-Dol.  | 5814' -3792 |
| RTD         |             |
| LTD         |             |
|             | 5906        |

