

Kansas Corporation Commission Oil & Gas Conservation Division 1076076

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #_	34592		API No. 15
	ource Exploration & De	velopment, LLC	Spot Description:
Address 1: 9393 W 110	TH ST, STE 500		SE_SE_SE_NW Sec. 14 Twp. 14 S. R. 22 F East West
Address 2:			2847 Feet from North / South Line of Section
City: OVERLAND PARK	State: KS Zip:	66210 +	Feet from East / West Line of Section
Contact Person: Bradley	Kramer		Footages Calculated from Nearest Outside Section Corner:
Phone: (913) 669-	2253		□NE □NW ☑SE □SW
CONTRACTOR: License			County: Johnson
Name: Utah Oil LLC			Lease Name: KNABE D Well #: KR-8
Wellsite Geologist: N/A			Field Name: Gardner
Purchaser: Coffeyville R			Producing Formation: Bartlesville
Designate Type of Comple	tion:		Elevation: Ground: 1026 Kelly Bushing: 0000
	_ `	Workover	Total Depth: 923 Plug Back Total Depth: 906
v oil		□ siow	Amount of Surface Pipe Set and Cemented at: 20 Feet
Gas D&	= ====	☐ SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No
	□ GSW	Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Metha	_		If Alternate II completion, cement circulated from:
Cathodic Oth	er (Core, Expl., etc.):	-	feet depth to: 906 w/ 119 sx cmt.
If Workover/Re-entry: Old	Well Info as follows:		teet depth to: sx cmt.
Operator:			The state of the s
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:	Original Tot	al Depth:	
Deepening	Re-perf. Conv. to E	NHR Conv. to SWD	Chloride content: 000000 ppm Fluid volume: 150 bbls
	Conv. to	gsw	Dewatering method used: Evaporated
Plug Back:	Plug	Back Total Depth	Location of fluid disposal if hauled offsite:
☐ Commingled	Permit #:		Operator Name:
Dual Completion	Permit #:	*****	Lease Name: License #:
☐ SWD	Permit #:		
□ ENHR	Permit #:	· · · · · · · · · · · · · · · · · · ·	Quarter Sec. Twp S. R. East West
☐ GSW	Permit #:		County: Permit #:
09/13/2011	09/15/2011	09/22/2011	
Spud Date or Date	ate Reached TD	Completion Date or	

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY	
Letter of Confidentiality Received	
Date:	_
Confidential Release Date:	_
☑ Wireline Log Received	
Geologist Report Received	
UIC Distribution	
ALT I JII III Approved by: Deenna Garrison Date: 03/13/20	112

Side Two



Operator Name: Kans	as Resource Explor	ration & Development, LLC			KNABE D		Well#:KR	<u>-8</u>	
Sec. 14 Twp. 14	s. R. <u>22</u>	✓ East	County:	<u>John</u>	son	 			
time tool open and clo	sed, flowing and shu es if gas to surface te	nd base of formations pen- ut-in pressures, whether sl est, along with final chart(s I well site report.	hut-in press	sure read	ched static level,	hydrostatic pre	essures, bottom h	ole temp	erature, fluid
Drill Stem Tests Taken (Attach Additional S		Yes No		₽ Lo		n (Top), Depth			Sample
Samples Sent to Geole	ogical Survey	Yes No		Nam Bartles			Тор 841.0'		Datum 85'
-			☐ Yes ☑ No ☑ Yes ☐ No ☑ Yes ☐ No		STIN STIN				
List All E. Logs Run:				r					
Gamma Ráy Neutron CCL									
		CASING	RECORD	Ne	w Used				
	Size Hole	Report all strings set-o	conductor, sur Weig		ermediate, production	on, etc. Type of	# Sacks	Type	and Percent
Purpose of String	Drilled Drilled	Set (In O.D.)	Lbs./		Depth	Cement	Used		Additives
Surface	9.875	7	14		20	Portland	5	<u> </u>	
Production	5.625	2.857	6.5		906	50/50 Poz	119		
		ADDITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose: —— Perforate	Depth Top Bottom	Type of Cement	# Sacks Used		Type and Percent Additives				
Protect Casing Plug Back TD Plug Off Zone	-								
Shots Per Foot		ION RECORD - Bridge Plug Footage of Each Interval Per				cture, Shot, Cem	ent Squeeze Recor Material Used)	d	Depth
3	841.0' - 848.0' 2	22 Perfs		2" DML RTG 841.0				841.0* - 848.0	
				<u>.</u>					
TUBING RECORD:	Size:	Set At: 886*	Packer At	t:	Liner Run:	Yes 🗸	No		
Date of First, Resumed	Production, SWD or EN	NHR. Producing Meth	hod:	9 🗆	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Wat	er Bl	bls.	Gas-Oil Ratio		Gravity
							55054574		
	ON OF GAS:		METHOD OF ✓ Perf. [Duath		nmingled	PRODUCTION	ON INTER	:VAL:
Vented Sold	_	Other (Specify)		(Submit		mit ACO-4)			



ticket number 32820
LOCATION OF LAWG
FOREMAN Alga Mada

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT CEMENT

			1	· · ·				
DATE	CUSTOMER#	WELL	NAME & NUN	BER	SECTION	TOWNSHIP	RANGE	COUNTY
9-15-11	4448	Knab	e D	KR-8	NW 14	14	22	びひ
CUSTOMER Sensor	as Resso	ureas	E +D		TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDRE	SS	W LEG	L VV	-	516	Alann	See Jay	Megt
9393	3 wi	10 25	57e500		495	Cacon X	(B)	
CITY		STATE	ZIP CODE	i -	505/7106	Belenn	TAKN	
Overla.	nd Park	155	66210		548	KOSTAD	KD	1
JOB TYPE_/C	245.57/1-5	HOLE SIZE_5	3/8	HOLE DEPTI	923	CASING SIZE & Y	VEIGHT 2	8
CASING DEPTH	904	DRILL PIPE		TUBING			OTHER	
SLURRY WEIGH	1 /. ·	SLURRY VOL		WATER gal/s	sk	CEMENT LEFT In		<u>~</u>
DISPLACEMENT		DISPLACEMENT		MIX PSI	200	RATE5	pan	
REMARKS: 1	^ -	1/	eeting	<u> </u>	tables 4	Ed sat.	M_{ij}	red
4 Dam	ped 100	2 F gel	+0	cond!	tion w	ell follo	wed k	y 1195
50/50 Ceme	POZ P	49 270	sel d	1/2 td f	herosea	1 por sa	ck, C	rculate
<u> </u>	<i>y F Y</i>	71464	ed p	uno.	800 R	CY X	oluge 1	<u>-a</u>
	20 10:1	<u>الما المال</u> المال المال	<u> </u>	ne coc	800 FC	<u> </u>	7 7 100	y 7 , _
	CO CAL	<u>v. F</u> ,			·	·		
W-1	lah Dri	ling	-				lew the	4/
		* ***/)				1	1. 11/4	
		·		<u> </u>		//	J.W.	
ACCOUNT	QUANITY	or UNITS	DI	SCRIPTION of	SERVICES or PRO	DUCT	UNIT PRICE	TOTAL
5401			PUMP CHARG	E	· <u> </u>			975.00
5406	30		MILEAGE					120.00
5402	ି ବ	04	c.a.s	ins f	optage			
5407		4	ton	mile	8			33000
5501C	17	2	trans	001+		T106		112.00
				·			·····	
1194	119	SK O#	50150	P02				1243.55
11183	<u> </u>	<i>₽</i>	9.0	<u>. [</u>				60.00
4402		⊥ !	2/2	place				5620
11074	60	£ .	Pher	10 SPA	, <u> </u>			73.20
				`				
			•				,	
	<u> </u>			<u> </u>	-			
		-			-~-11	$\sim_{\downarrow} \sim$		
					<u>- ' 11,140</u>	`		
	 _				<u> </u>			
bovtn 9737							SALES TAX	107.82
	.	· N/_					ESTIMATED TOTAL	31335
AUTHORIZTION_	7	74		TITLE			DATE	

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.