

CONFIDENTIAL WE

Kansas Corporation Commission Oil & Gas Conservation Division

1087903

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 #336	40		API No. 15 - 15-207-28150-00-00	_
Name: Haas Petroleum,			Spot Description:	
Address 1: 11551 ASH ST.,	STE 205		NW_SW Sec. 36 Twp. 23 S. R. 14 🗗 East We	st
Address 2:			1980 Feet from North / South Line of Section	on
City: LEAWOOD			660 Feet from East / West Line of Section	on
Contact Person: Mark Haas Phone: (913) 499-837	3		Footages Calculated from Nearest Outside Section Corner: NE NW SE SW Woodson	
CONTRACTOR: License #			County: Woodson G. Ertwards 1i-HP	
Name: Skyy Drilling, LLC			Lease Name: G. Edwards Well #; 1i-HP	_
Wellsite Geologist: GGR, Inc.		•	Field Name:	_
Purchaser:			Producing Formation: Mississippian	_
Designate Type of Completion:			Elevation: Ground: 1123 Kelly Bushing: 0	
✓ New Well	Re-Entry	Workover	Total Depth: 1725 Plug Back Total Depth:	
✓ Oil WSW Gas D&A	☐ SWD ☐ ENHR	☐ slow	Amount of Surface Pipe Set and Cemented at: 41 Female Fema	eel
□ og	☐ GSW	Temp. Abd.	If yes, show depth set: Fe	æl
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from:	
Cathodic Other (ore, Expl., etc.):		feet depth to:w/sx c	រាារ
If Workover/Re-entry: Old Wel	Info as follows:			
Operator:			Drilling Fluid Management Plan	
Well Name:		CHARLES THE THE TAXABLE PARTY OF TAX	(Data must be collected from the Reserve Pit)	
Original Comp. Date:	Original Tota	al Depth:	Chloride content: 0 ppm Fluid volume: 0 b	bls
Deepening Re-p	perf. Conv. to E	NHR Conv. to SWD	Dewatering method used: Evaporated	
Plug Back:	Plug	Back Total Depth	Location of fluid disposal if hauled offsite:	
☐ Commingted	Permit #:	· · · · · · · · · · · · · · · · · · ·	Operator Name:	
Dual Completion	Permit #:		Lease Name: License #:	
SWD	Permit #:		Quarter Sec TwpS. R East [] W	e.
ENHR	Permit #:			
☐ GSW	Permit #:		County: Permit #:	
	20/2012	06/20/2012		
Spud Date or Date Recompletion Date	Reached TD	Completion Date or Recompletion Date		

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
Ę	Letter of Confidentiality Received Date: 07/18/2012
	Confidential Release Date:
	Geologist Report Received UIC Distribution
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