

Kansas Corporation Commission Oil & Gas Conservation Division

1096823

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 # 34170			API No. 15 -	15-003-254	73-00-00			
Name: Sirius Energy Corp. Address 1: 526 COUNTRY PL,	SOUTH		Spot Descrip	ption:		21 _{S. R.} 2	20 ▼ East[∫West
Address 2: City: ABILENE Sta	ate: TX Zip	79606 + 7032	2710 2209				South Line of West Line of	
Contact Person: Randy Teter Phone: (785) 4488571			i i	alculated from ; NE			Corner:	
CONTRACTOR: License # 3207 Name: Leis, John E.	9		County: An	Ewing B		w	/ell #: Q-13	
Wellsite Geologist: n/a Purchaser: CVR Energy			Field Name:		uirrel sand			
Designate Type of Completion: ✓ New Well Re-	Entry	Workover		Ground: 1044 . 717 Pl		, ,	0	
✓ Oil WSW	SWD ENHR	☐ SIOW ☐ SIGW		Surface Pipe Se ge Cementing			^r No	Feet
OG CM (Coal Bed Methane) Cathodic Other (Core	GSW , Expl., etc.):	Temp. Abd.	If yes, show If Alternate I feet depth to	Il completion, o		lated from: ²¹		Feet
If Workover/Re-entry: Old Well Inf	o as follows:		reet depth to);	V	,, -		sx cmt.
Operator: Well Name:		· · · · · · · · · · · · · · · · · · ·		id Manageme		it)		
Original Comp. Date: Re-perf.	_	ENHR Conv. to SWD	Chloride cor Dewatering	method used:		Fluid volume d	: 120	bbis
Plug Back: Commingled Dual Completion	Back Total Depth	Location of fluid disposal if hauled offsite: Operator Name: Lease Name: License #:						
SWD ENHR	Permit #:		Quarter	e: Sec.	Twp.	S. R.	East	West
GSW 05/16/2012 05/16/2		05/17/2012	County:		Peri	mit #:		
Spud Date or Date Rea Recompletion Date		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
Letter of Confidentiality Received Date:
☑ Confidential Release Date: ☑ Wireline Log Received
Geologist Report Received UIC Distribution ALT I Approved by: Deanna Garrisor Date: 10/23/2012

PRODUCTION INTERVAL:

Side Two Ewing B Well #: Operator Name: Sirius Energy Corp. Lease Name: County: Anderson Sec. 13. Twp.21 S. R. 20 ✓ East West INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wireline Logs surveyed. Attach final geological well site report. ✓ Sample Formation (Top), Depth and Datum Log ✓ No Yes Drill Stem Tests Taken (Attach Additional Sheets) Datum Top Name gl 620 Samples Sent to Geological Survey Yes √ No Squirrel Sand ✓ No Yes Cores Taken No Yes Electric Log Run √ Yes No Electric Log Submitted Electronically (If no, Submit Copy) List All E. Logs Run: Gamma Ray / Neutron / CCL Used CASING RECORD ✓_I New Report all strings set-conductor, surface, intermediate, production, etc. Type and Percent # Sacks Type of Setting Weight Size Casing Size Hole Additives Used Cement Purpose of String Set (In O.D.) Lbs. / Ft. Depth Drilled 6 Portland 20 21 9.875 Surface Kol seal 40% **OWC** 60 718 6.5 2.875 5.625 Production ADDITIONAL CEMENTING / SQUEEZE RECORD Type and Percent Additives Depth Type of Cement # Sacks Used Purpose: Top Bottom Perforate Protect Casing Plug Back TD Plug Off Zone Acid, Fracture, Shot, Cement Squeeze Record PERFORATION RECORD - Bridge Plugs Set/Type (Amount and Kind of Material Used) Depth Shots Per Foot Specify Footage of Each Interval Perforated Liner Run: Packer At: Set At: TUBING RECORD: Yes | No Producing Method: Date of First, Resumed Production, SWD or ENHR. Gas Lift Other (Explain) Flowing Pumping Gravity Gas-Oil Ratio Bbls. Water Bbis. Gas Mcf Oil Estimated Production Per 24 Hours

METHOD OF COMPLETION:

✓ Perf.

Open Hole

Other (Specify)

Dually Comp.

Commingled

(Submit ACO-4)

DISPOSITION OF GAS:

(If vented, Submit ACO-18.)

Sold

Vented

Used on Lease

Page; 1

GARNETT TRUE VALUE HOMECENTER
410 N Maple
Garnett, KS 66032
{785} 448-7106 FAX {785} 448-7135

Merchant Copy INVOICE
THIS COPY MUST REMAIN AT MERCHANT AT ALL TIMES!

invoice: 10185481

	Special : Instructions : : Sale rep #: WAYN	IE WAYNE ST	ANLEY	Acc	f rep code:	Time: Ship Date Involce D Due Date	ate: 05/18/12	2 2
	526 COU	old To: SIRIUS ENERGY CORP 526 COUNTRYPLACE SOU ABILENE, TX 79605-7032		Ship To: SIRIUS ENERG UTH (325) 565-0152		CORP		
				(325) 865-9152				
	Customer #: 00018	360	Cus	stamer PO:	Ord	ef By:	······································	1 .
ORDER .	SHIP L U/M	ITEM#		DESCRIPTION	A 12	0 4 4 1 4	popimg0t	
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			0	chant Copy		۲	OTAL	\$629.47