

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1100016

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 # 6279		·	API No. 15 - 15-207-28116-00-00
Name: Patrick Developme			Spot Description:
Address 1: 3408 W 93 RD			SW_NE_NW_NE Sec. 19 Twp. 26 S. R. 17  ✓ East West
Address 2: City: LEAWOOD	State: KS Zip:	66206 + 2005	4700 Feet from North / South Line of Section  1875 Feet from ✓ East / West Line of Section
Contact Person: Kerry Patrick Phone: ( 913 ) 381-2814 CONTRACTOR: License # 33			Footages Calculated from Nearest Outside Section Corner:  NE NW SE SE
Name: Hat Drilling LLC			County: 1700ddol. S EARL GREY
Wellsite Geologist: none			Field Name:
Purchaser:			Producing Formation: Squirrel
Designate Type of Completion:			Elevation: Ground: 1008 Kelly Bushing: 1018
✓ New Well	e-Entry	Workover	Total Depth: 855 Plug Back Total Depth: 850
✓ Oil WSW Gas D&A OG CM (Coal Bed Methane)	SWD ENHR	SIOW SIGW Temp. Abd.	Amount of Surface Pipe Set and Cemented at:  Multiple Stage Cementing Collar Used?  If yes, show depth set:  If Alternate II completion, cement circulated from:
Cathodic   Other (Co	re, Expl., etc.):		
If Workover/Re-entry: Old Well In	nfo as follows:		teet depth to: sx cmt
Operator:			
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:		NHR Conv. to SWD	Chloride content: 0 ppm Fluid volume: 100 bbls  Dewatering method used: Evaporated
Commingled		· · · · · · · · · · · · · · · · · · ·	Location of fluid disposal if hauled offsite:  Operator Name:
Dual Completion SWD			Lease Name: License #:
ENHR			Quarter Sec. Twp. S. R.   East West
GSW			County: Permit #:
04/19/2012 04/20/		04/23/2012	•
Spud Date or Date Re 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.

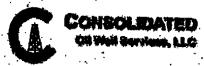
Submitted Electronically

KCC Office Use ONLY
Letter of Confidentiality Received
Date:
Confidential Release Date:
✓ Wireline Log Received
Geologist Report Received
UIC Distribution
ALT II Approved by: Dearna Garrison Date: 11/09/2012

Side Two



Operator Name: Pat	rick Developme	ent Corporation	Lease I	Name: S EAR	L GREY	Well #:	PDC #6
Sec. 19 Twp.26	s. R. <u>17</u>		County	Woodson			-
anno tool opon una oic	es if gas to surface	test, along with final ch	ier snut-in nress	sure reached eta	tic level budge	totic proposition ball.	ts giving interval tested, m hole temperature, fluid copy of all Electric Wire-
Drill Stem Tests Taken	·····	Yes ✓ No		L Log F	formation (Ton)	, Depth and Datum	
(Attach Additional S	Sheets)	į, , 100 i <u>v</u> 110	,	:	отпацоп (тор)	, Depth and Datum	Sample
Samples Sent to Geof	ogical Survey	_ Yes ☑ No		Name		Тор	Datum
Cores Taken Electric Log Run Electric Log Submitted (If no, Submit Copy,	•	Yes ✓ No Yes □ No Yes □ No	•				
List All E. Logs Run:				Squirrel		822	830
Cornish Wireline			,				
· · · · · · · · · · · · · · · · · · ·			NG RECORD set-conductor, sur				
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weig Lbs./	ht Set	ting T	ype of # Sacks ement Used	Type and Percent Additives
Production	5.825	2.825	6.5	849	50/50	Pos 134	2% gel
Surface	8.625	7	23.57	20	Portla	and 6	
Purpose:  ✓ Perforate  Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom -	ADDITION Type of Cement	WAL CEMENTIN # Sacks t	G / SQUEEZE RE		Type and Percent Additiv	es
Shots Per Foot	PERFORAT Specify	ION RECORD - Bridge F Footage of Each Interval	Plugs Set/Type Perforated	A	cid, Fracture, Sho (Amount and	ot, Cement Squeeze Rec Kind of Material Used)	ord Depth
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Ru	n: Yes	No	
Date of First, Resumed Pi	roduction, SWD or EN	IHR. Producing M	lethod:	Gas Lift	Other (Expl	ain)	
Estimated Production Per 24 Hours	i Oil	Bbls. Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITION	OF GAS:		METHOD OF C	OMPLETION:		PRODUCT	ION INTERVAL:
Vented Sold	Used on Lease	Open Hole		Dually Comp.	Commingled (Submit ACO-4)	!	
(ii verkeu, Suom	. AUU-10.)	Other (Specify)			,		



TICKET NUMBER FOREMAN .

PΦ	Box	884,	Cha	nute,	KS	66720	)
620	431	9210	or	800~	467-	8676	

	CUSTOMER#	٠٠ .٧٧٠	ELL NAME & NU		SECT	ION .	TOWNSHIP	RANGE	COUN
41-23-12	6316	SEarl	Correy.	PDC.6	1/2	19	26	<del> </del> , <del>, , , -</del>	<del>-  </del>
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MAILING ADDR	TIOK UP	LKELOY	ment	_	" TRUC	Ж# .	DRIVER	TRUCK#	DRIVE
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CASING DEPTH		ORILL PIPE		TUBING		. , ;		OTHER	
SLURRY WEIGH		BLURRY VOL		WATER gal	/sk		CEMENT   BET	7	<del></del>
DISPLACEMENT	r <u>5-867</u> d	NSPLACEME	NT PSI_ 8 00	2 MIX PSL		:	RATE 4 6	In CASING I	es
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CODE	QUANITY or	UNITS	DE	ESCRIPTION of	SERVICES	or PROI	nlicit :	T. T	
	QUANITY or	UNITS		ESCRIPTION of	SERVICES	or PROI	DUCT .	UNIT PRICE	TOTAL
SHOL	1		PUMP CHARG		SERVICES	or PROI	DUCT .	UNIT PRICE	_ J
540L 540C	7,5	5			<b>FSERVICES</b>	or PROI	DUCT	UNIT PRICE	1030.
5401 5406 5402	75 850	5	PUMP CHARG	ie – Z	SERVICES	or PROI	DUCT	UNIT PRICE	1030.
5401 5406 5402 5402	7,5	5	PUMP CHARG	ie – Z		or PROI	DUCT	UNIT PRICE	800.0
5401 5406 5402	75 850	5	PUMP CHARG	ie – Z		or PROI	DUCT	UNIT PRICE	1030.0 300.0
5401 5406 5402 5402	75 850	5	PUMP CHARG MILEAGE C.G.(S.)	ie – Z		or PROI	DUCT	UNIT PRICE	1030.0 300.0 566.1
5401 5406 5402 5402	75 850	5	PUMP CHARG MILEAGE C.G.(S.)	ie – Z		or PROI	DUCT	UNIT PRICE	1030.0 300.0
5401 5401 5402 5402 55021	75 852 422:	5 2' 48	PUMP CHARG MILEAGE C.C.(S.) ton	ins for niles Lac	ata ge	or PROI	DUCT	UNIT PRICE	1030.0 300.0
5401 5406 5402 5402 55020	75 850	5 2' 48	PUMP CHARGE MILEAGE  C.G. (S.)  FROM  SD (SD)	ins for niles Lac	ata ge	or PROI	DUCT	UNIT PRICE	1030.0 300.0 566.0 270.2
5401 5401 5402 5402 55021 1124 1118B	75 852 422:	5 2' 48	PUMP CHARG MILEAGE C.C.(S.) ton	ins for niles Lac	ata ge	or PROI	DUCT	UNIT PRICE	1030.0 300.0 566.0 270
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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.