



Confidentiality Requested:

Yes No

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer

- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hoffman T 4
Doc ID	1270712

All Electric Logs Run

ARRAY COMPENSATED TRUE RESISTIVITY TRUE VERTICAL DEPTH LOG
ARRAY COMPENSATED TRUE RESISTIVITY MEASURED DEPTH LOG
BOREHOLE COMPENSATED SONIC ARRAY MEASURED DEPTH LOG
BOREHOLE COMPENSATED SONIC ARRAY TRUE VERTICAL DEPTH LOG
MICROLOG TRUE VERTICAL DEPTH LOG
MICROLOG MEASURED DEPTH
QUAD COMBO MEASURED DEPTH LOG
QUAD COMBO TRUE VERTICAL DEPTH LOG
SPECTRAL DENSITY DUAL SPACED NEUTRON MEASURED DEPTH LOG
SPECTRAL DENSITY DUAL SPACED NEUTRON TRUE VERTICAL DEPTH LOG
SURVEY REPORT

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hoffman T 4
Doc ID	1270712

Tops

Name	Top	Datum
HEEBNER	3917	
TORONTO	3935	
LANSING	4076	
MARMATON	4719	
CHEROKEE	4917	
ATOKA	5112	
MORROW	5246	
ST GENEVIEVE	5525	
ST LOUIS	5917	

Summary of Changes

Lease Name and Number: Hoffman T 4

API/Permit #: 15-175-22230-01-00

Doc ID: 1270712

Correction Number: 3

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	07/10/2015	11/09/2015
Save Link	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 57522	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 70712
Well Type	GAS	OIL



Confidentiality Requested:

Yes No

CONFIDENTIAL WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1250101
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
-----------------------------------	-----------------	---

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hoffman T 4
Doc ID	1250101

All Electric Logs Run

ARRAY COMPENSATED TRUE RESISTIVITY TRUE VERTICAL DEPTH LOG
ARRAY COMPENSATED TRUE RESISTIVITY MEASURED DEPTH LOG
BOREHOLE COMPENSATED SONIC ARRAY MEASURED DEPTH LOG
BOREHOLE COMPENSATED SONIC ARRAY TRUE VERTICAL DEPTH LOG
MICROLOG TRUE VERTICAL DEPTH LOG
MICROLOG MEASURED DEPTH
QUAD COMBO MEASURED DEPTH LOG
QUAD COMBO TRUE VERTICAL DEPTH LOG
SPECTRAL DENSITY DUAL SPACED NEUTRON MEASURED DEPTH LOG
SPECTRAL DENSITY DUAL SPACED NEUTRON TRUE VERTICAL DEPTH LOG
SURVEY REPORT

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hoffman T 4
Doc ID	1250101

Tops

Name	Top	Datum
HEEBNER	3917	
TORONTO	3935	
LANSING	4076	
MARMATON	4719	
CHEROKEE	4917	
ATOKA	5112	
MORROW	5246	
ST GENEVIEVE	5525	
ST LOUIS	5917	

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Hoffman T 4
Doc ID	1250101

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
4	5645-5647, 5639-5641, 5628-5633, 5613-5624 St. Louis	Acid-5000 gal 15%HCL, flushed w/ 41 bbls.	5613-5647
	RBP@5475		5475
2	5418-5422, 5399-5405, 5377-5387 Chester	19 lbs of 100 mesh, 14,0393 lbs of 40/70 sand,6,430,000 SCF	5377-5322

ALLIED OIL & GAS SERVICES, LLC 064548

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Liberal KS

DATE <u>12-19-14</u>	SEC <u>7</u>	TWP <u>32S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION	JOB START <u>12:30</u>	JOB FINISH <u>2:00 P.M.</u>
HOFFMAN LEASE	WELL # <u>T-4</u>	LOCATION <u>Liberal KS Supreme Leaders</u>			COUNTY <u>Seward</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)		<u>W + CR 20, 3M. to Baks Ranch Sign, follow Main Rd. to Rig.</u>					

CONTRACTOR Saxon 142

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 1358 ft

CASING SIZE 8 5/8 24 F DEPTH 1358 ft

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 1500 PSI MINIMUM

MEAS. LINE SHOE JOINT 41.22 ft

CEMENT LEFT IN CSG. 2.6 BBls

PERFS.

DISPLACEMENT 84 BBls

OWNER Merid Energy

CEMENT

AMOUNT ORDERED 230 sk AMDC "C", 3% CC,
2% SA-SI, 1/4 lb/sk Flosele
200 sk "C", 3% CC, 1/4 lb/sk F.S.

EQUIPMENT

PUMP TRUCK CEMENTER Ruben Chavez

531-541 HELPER Jaime Torres

BULK TRUCK

955-692 DRIVER Jose Calderon

BULK TRUCK

DRIVER

COMMON "C" 200 sk @ 24.40	4,880.00
POZMIX @	
GEL @	
CHLORIDE 17 sk @ 64.00	1,088.00
ASC @	
AMDC "C" 230 sk @ 31.00	7,130.00
SA-SI 44 lb @ 17.55	772.20
Flosele 108 lb @ 2.97	320.76
@	
@	
@	
@	
@	
@	

REMARKS: TOTAL 14,190.96

Well Name Hoffman T-4

AFE 35151

GL# 83001025

Signature James Carter

Activity Date 12/18/14

Invoice Office Liberal KS

SERVICE

Mat Handling 479.40 c.f @ 2.48	-1,185.91
PUMP TRUCK CHARGE	2,213.25
Dragage 1066.20 T.M @ 2.60	2,772.13
MILEAGE Heavy 50 M. @ 7.20	385.00
MANIFOLD + head 1 @ 275.00	275.00
light Vehicle 50 M. @ 4.40	220.00
@	
TOTAL	7,054.79

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

Top non rotating plug 1 @	963.81
Non rotating float collar 1 @	1,440.00
Guide Shoe 1 @	460.00
Centralizer 14 @ 75.00	1,050.00
Stop collar 1 @	56.00
TOTAL	3,969.81

PRINTED NAME James CARTER

SIGNATURE James Carter

SALES TAX (If Any)

TOTAL CHARGES 25,215.56

DISCOUNT 1/2 IF PAID IN 30 DAYS

NET = 16,894.43

ALLIED OIL & GAS SERVICES, LLC 052802

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal Ks.

DATE <u>12-25-14</u>	SEC. <u>7</u>	TWP. <u>32S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION	JOB START <u>8:30</u>	JOB FINISH <u>9:30 a.m.</u>
LEASE <u>Hoffman</u>	WELL # <u>T-4</u>	LOCATION <u>Not Supreme feeders, On CR</u>			COUNTY <u>Seward</u>	STATE <u>Ks</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		<u>20W3M, To Bokes Ranch Sig, Mani Rlt to Rig</u>					

CONTRACTOR Saxon # 142 OWNER MERIT ENERGY

TYPE OF JOB Long string

HOLE SIZE 7 7/8 T.D. 5850 ft

CASING SIZE 5 1/2 17# DEPTH 5846 ft

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1600 Pst MINIMUM _____

MEAS. LINE _____ SHOE JOINT 44.53 ft

CEMENT LEFT IN CSG. 1 BOV

PERFS. _____

DISPLACEMENT 135 BBls

EQUIPMENT _____

PUMP TRUCK CEMENTER Ruben Chavez

531-541 HELPER Jaimo Torres

BULK TRUCK _____

955-692 DRIVER Ivan Carrillo

BULK TRUCK _____

_____ DRIVER _____

CEMENT

AMOUNT ORDERED 360 sk 50/50 Poz-H,
2% Gel, 5% Gyp Seal, 10% Salt, 5 lbs sk
Gils, 1/4 lb sk F.S., 5% FL-160, 2% Dispersion

COMMON	@	_____	_____
POZMIX	@	_____	_____
GEL	@	_____	_____
CHLORIDE	@	_____	_____
ASC 50/50 H-Poz	@	<u>16.55</u>	<u>6,066.00</u>
Super Flush	@	<u>58.70</u>	<u>704.40</u>
Gyp Seal	@	<u>37.60</u>	<u>1,165.60</u>
Salt	@	<u>26.35</u>	<u>579.70</u>
Gilsonite	@	<u>9.8</u>	<u>1,764.00</u>
Flosole	@	<u>2.97</u>	<u>267.30</u>
FL-160	@	<u>18.90</u>	<u>2,872.50</u>
CA-3i	@	<u>10.30</u>	<u>628.30</u>
_____	@	_____	_____
_____	@	_____	_____

REMARKS:

Well Hoffman-4

AFE 35151

GL 860257 P

Office Liberal KS

Date 12-25-14

TOTAL 14,048.10

SERVICE

Mat Handling	<u>485.00</u>	@ <u>2.48</u>	<u>-1,202.95</u>
PUMP TRUCK CHARGE			<u>3,099.25</u>
Dragage	<u>944.32 T.M.</u>	@ <u>2.60</u>	<u>2,377.22</u>
MILEAGE heavy	<u>50 Mi</u>	@ <u>7.70</u>	<u>385.00</u>
MANIFOLD + head	<u>1</u>	@ <u>275.00</u>	<u>275.00</u>
Light Vehicle	<u>50 Mi</u>	@ <u>4.40</u>	<u>220.00</u>
Circulating Iron	<u>1</u>	@ <u>400.00</u>	<u>400.00</u>

TOTAL 7,959.42

CHARGE TO: MERIT ENERGY

STREET _____

CITY _____ STATE _____ ZIP _____

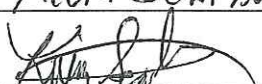
PLUG & FLOAT EQUIPMENT

Guideshoe	<u>1</u>	@	<u>280.80</u>
SS Float collar	<u>1</u>	@	<u>725.40</u>
Centralizer	<u>20</u>	@ <u>57.33</u>	<u>1,146.60</u>
stop collar	<u>1</u>	@	<u>49.14</u>
Top rubber plug	<u>1</u>	@	<u>258.26</u>

TOTAL 2,460.20

To: Allied Oil & Gas Services, LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Kevin Scarberry

SIGNATURE 

SALES TAX (If Any) _____

TOTAL CHARGES 24,467.72

DISCOUNT _____ IF PAID IN 30 DAYS

NET = 16,393.³⁷

WELL DETAILS							
+N/-S	+E/-W	Northing	Ground Level:	2726.21	Latitude	Longitude	
0.00	0.00	232961.69	Easting	1285446.92	37° 16' 50.22115 N	100° 57' 22.00545 W	

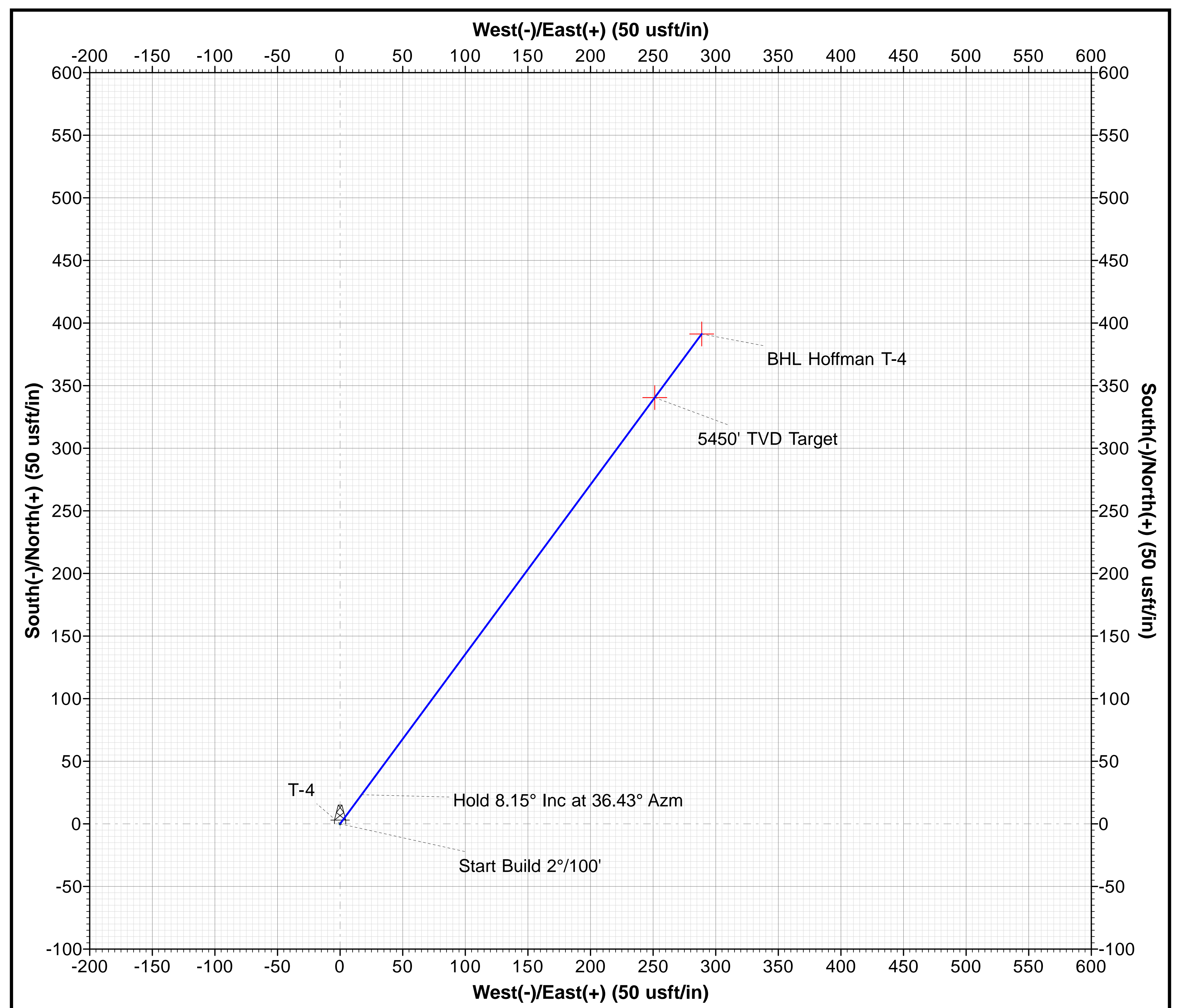
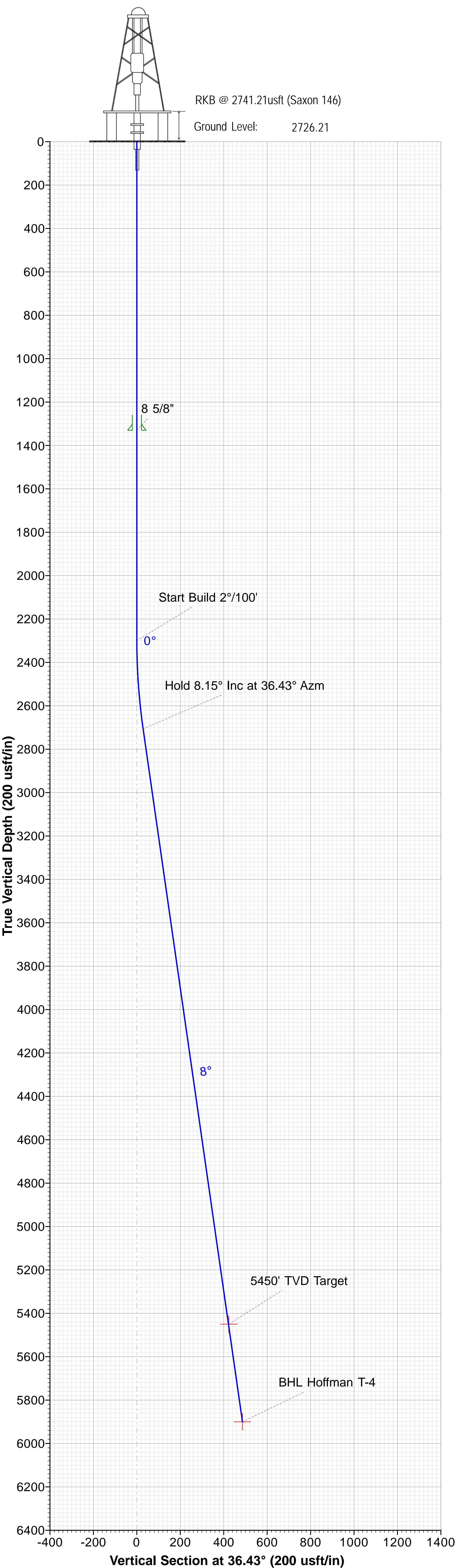
SECTION DETAILS											
Sec	MD	Inc	Azi	TVD	+N/-S	+E/-W	Dleg	TFace	VSec	Target	Annotation
1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
2	2300.00	0.00	0.00	2300.00	0.00	0.00	0.00	0.00	0.00		Start Build 2°/100'
3	2707.49	8.15	36.43	2706.12	23.28	17.18	2.00	36.43	28.93		Hold 8.15° Inc at 36.43° Azm
4	5933.96	8.15	36.43	5900.00	391.28	288.81	0.00	0.00	486.32	BHL Hoffman T-4	TD at 5933.96

DESIGN TARGET DETAILS									
Name	TVD	+N/-S	+E/-W	Northing	Easting	Latitude	Longitude	Shape	
5450' TVD Target	5450.00	340.49	251.32	233302.18	1285698.24	37° 16' 53.65192 N	100° 57' 19.00794 W	Point	
BHL Hoffman T-4	5900.00	391.28	288.81	233352.97	1285735.73	37° 16' 54.16367 N	100° 57' 18.56079 W	Point	

FORMATION TOP DETAILS
 No formation data is available

Map System: US State Plane 1927 (Exact solution)
 Datum: NAD 1927 (NADCON CONUS)
 Ellipsoid: Clarke 1866
 Zone Name: Kansas South 1502
 Local Origin: Well T-4, Grid North
 Latitude: 37° 16' 50.22115 N
 Longitude: 100° 57' 22.00545 W
 Grid East: 1285446.92
 Grid North: 232961.69
 Scale Factor: 1.000
 Geomagnetic Model: IGRF2010_14
 Sample Date: 13-Nov-14
 Magnetic Declination: 6.07°
 Dip Angle from Horizontal: 64.94°
 Magnetic Field Strength: 51465
 To convert a Magnetic Direction to a Grid Direction, Add 7.58°
 To convert a Magnetic Direction to a True Direction, Add 6.07° East
 To convert a True Direction to a Grid Direction, Add 1.51°

LEGEND
 — Plan 2 11-19-14





MERIT ENERGY COMPANY

Merit Energy

Seward County, Kansas (NAD27)

Hoffman

T-4

Wellbore #1 Job #1412306

Plan: Plan 2 11-19-14

Standard Planning Report

19 November, 2014



Database:	Compass 5000 GCR	Local Co-ordinate Reference:	Well T-4
Company:	Merit Energy	TVD Reference:	RKB @ 2741.21usft (Saxon 146)
Project:	Seward County, Kansas (NAD27)	MD Reference:	RKB @ 2741.21usft (Saxon 146)
Site:	Hoffman	North Reference:	Grid
Well:	T-4	Survey Calculation Method:	Minimum Curvature
Wellbore:	Wellbore #1 Job #1412306		
Design:	Plan 2 11-19-14		

Project	Seward County, Kansas (NAD27)		
Map System:	US State Plane 1927 (Exact solution)	System Datum:	Mean Sea Level
Geo Datum:	NAD 1927 (NADCON CONUS)		
Map Zone:	Kansas South 1502		

Site	Hoffman				
Site Position:	Northing:	232,961.69 usft	Latitude:	37° 16' 50.22115 N	
From: Map	Easting:	1,285,446.92 usft	Longitude:	100° 57' 22.00545 W	
Position Uncertainty:	0.00 usft	Slot Radius:	13-3/16 "	Grid Convergence:	-1.51 °

Well	T-4					
Well Position	+N/-S	0.00 usft	Northing:	232,961.69 usft	Latitude:	37° 16' 50.22115 N
	+E/-W	0.00 usft	Easting:	1,285,446.92 usft	Longitude:	100° 57' 22.00545 W
Position Uncertainty		0.00 usft	Wellhead Elevation:	0.00 usft	Ground Level:	2,726.21 usft

Wellbore	Wellbore #1 Job #1412306				
Magnetics	Model Name	Sample Date	Declination (°)	Dip Angle (°)	Field Strength (nT)
	IGRF2010_14	11/13/2014	6.07	64.94	51,465

Design	Plan 2 11-19-14			
Audit Notes:				
Version:	Phase:	PLAN	Tie On Depth:	0.00
Vertical Section:	Depth From (TVD) (usft)	+N/-S (usft)	+E/-W (usft)	Direction (°)
	0.00	0.00	0.00	36.43

Plan Sections										
Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)	TFO (°)	Target
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2,300.00	0.00	0.00	2,300.00	0.00	0.00	0.00	0.00	0.00	0.00	
2,707.49	8.15	36.43	2,706.12	23.28	17.18	2.00	2.00	8.94	36.43	
5,933.96	8.15	36.43	5,900.00	391.28	288.81	0.00	0.00	0.00	0.00	BHL Hoffman T-4

Database:	Compass 5000 GCR	Local Co-ordinate Reference:	Well T-4
Company:	Merit Energy	TVD Reference:	RKB @ 2741.21usft (Saxon 146)
Project:	Seward County, Kansas (NAD27)	MD Reference:	RKB @ 2741.21usft (Saxon 146)
Site:	Hoffman	North Reference:	Grid
Well:	T-4	Survey Calculation Method:	Minimum Curvature
Wellbore:	Wellbore #1 Job #1412306		
Design:	Plan 2 11-19-14		

Planned Survey										
Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)	
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
100.00	0.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
200.00	0.00	0.00	200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
300.00	0.00	0.00	300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
400.00	0.00	0.00	400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500.00	0.00	0.00	500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600.00	0.00	0.00	600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
700.00	0.00	0.00	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
800.00	0.00	0.00	800.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
900.00	0.00	0.00	900.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,000.00	0.00	0.00	1,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,100.00	0.00	0.00	1,100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,200.00	0.00	0.00	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,300.00	0.00	0.00	1,300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,400.00	0.00	0.00	1,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,500.00	0.00	0.00	1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,600.00	0.00	0.00	1,600.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,700.00	0.00	0.00	1,700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,800.00	0.00	0.00	1,800.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,900.00	0.00	0.00	1,900.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2,000.00	0.00	0.00	2,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2,100.00	0.00	0.00	2,100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2,200.00	0.00	0.00	2,200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2,300.00	0.00	0.00	2,300.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Start Build 2°/100'										
2,400.00	2.00	36.43	2,399.98	1.40	1.04	1.75	2.00	2.00	0.00	0.00
2,500.00	4.00	36.43	2,499.84	5.61	4.14	6.98	2.00	2.00	0.00	0.00
2,600.00	6.00	36.43	2,599.45	12.63	9.32	15.69	2.00	2.00	0.00	0.00
2,707.49	8.15	36.43	2,706.12	23.28	17.18	28.93	2.00	2.00	0.00	0.00
Hold 8.15° Inc at 36.43° Azm										
2,800.00	8.15	36.43	2,797.69	33.83	24.97	42.05	0.00	0.00	0.00	0.00
2,900.00	8.15	36.43	2,896.68	45.23	33.39	56.22	0.00	0.00	0.00	0.00
3,000.00	8.15	36.43	2,995.67	56.64	41.81	70.40	0.00	0.00	0.00	0.00
3,100.00	8.15	36.43	3,094.66	68.05	50.23	84.58	0.00	0.00	0.00	0.00
3,200.00	8.15	36.43	3,193.65	79.45	58.64	98.75	0.00	0.00	0.00	0.00
3,300.00	8.15	36.43	3,292.64	90.86	67.06	112.93	0.00	0.00	0.00	0.00
3,400.00	8.15	36.43	3,391.63	102.26	75.48	127.10	0.00	0.00	0.00	0.00
3,500.00	8.15	36.43	3,490.62	113.67	83.90	141.28	0.00	0.00	0.00	0.00
3,600.00	8.15	36.43	3,589.61	125.08	92.32	155.46	0.00	0.00	0.00	0.00
3,700.00	8.15	36.43	3,688.60	136.48	100.74	169.63	0.00	0.00	0.00	0.00
3,800.00	8.15	36.43	3,787.59	147.89	109.16	183.81	0.00	0.00	0.00	0.00
3,900.00	8.15	36.43	3,886.58	159.29	117.58	197.99	0.00	0.00	0.00	0.00
4,000.00	8.15	36.43	3,985.57	170.70	125.99	212.16	0.00	0.00	0.00	0.00
4,100.00	8.15	36.43	4,084.56	182.10	134.41	226.34	0.00	0.00	0.00	0.00
4,200.00	8.15	36.43	4,183.55	193.51	142.83	240.51	0.00	0.00	0.00	0.00
4,300.00	8.15	36.43	4,282.54	204.92	151.25	254.69	0.00	0.00	0.00	0.00
4,400.00	8.15	36.43	4,381.53	216.32	159.67	268.87	0.00	0.00	0.00	0.00
4,500.00	8.15	36.43	4,480.52	227.73	168.09	283.04	0.00	0.00	0.00	0.00
4,600.00	8.15	36.43	4,579.51	239.13	176.51	297.22	0.00	0.00	0.00	0.00
4,700.00	8.15	36.43	4,678.50	250.54	184.93	311.40	0.00	0.00	0.00	0.00
4,800.00	8.15	36.43	4,777.49	261.94	193.34	325.57	0.00	0.00	0.00	0.00
4,900.00	8.15	36.43	4,876.48	273.35	201.76	339.75	0.00	0.00	0.00	0.00
5,000.00	8.15	36.43	4,975.47	284.76	210.18	353.92	0.00	0.00	0.00	0.00
5,100.00	8.15	36.43	5,074.46	296.16	218.60	368.10	0.00	0.00	0.00	0.00

Database:	Compass 5000 GCR	Local Co-ordinate Reference:	Well T-4
Company:	Merit Energy	TVD Reference:	RKB @ 2741.21usft (Saxon 146)
Project:	Seward County, Kansas (NAD27)	MD Reference:	RKB @ 2741.21usft (Saxon 146)
Site:	Hoffman	North Reference:	Grid
Well:	T-4	Survey Calculation Method:	Minimum Curvature
Wellbore:	Wellbore #1 Job #1412306		
Design:	Plan 2 11-19-14		

Planned Survey										
Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)	
5,200.00	8.15	36.43	5,173.45	307.57	227.02	382.28	0.00	0.00	0.00	
5,300.00	8.15	36.43	5,272.44	318.97	235.44	396.45	0.00	0.00	0.00	
5,400.00	8.15	36.43	5,371.43	330.38	243.86	410.63	0.00	0.00	0.00	
5,500.00	8.15	36.43	5,470.43	341.78	252.28	424.81	0.00	0.00	0.00	
5,600.00	8.15	36.43	5,569.42	353.19	260.69	438.98	0.00	0.00	0.00	
5,700.00	8.15	36.43	5,668.41	364.60	269.11	453.16	0.00	0.00	0.00	
5,800.00	8.15	36.43	5,767.40	376.00	277.53	467.33	0.00	0.00	0.00	
5,900.00	8.15	36.43	5,866.39	387.41	285.95	481.51	0.00	0.00	0.00	
5,933.96	8.15	36.43	5,900.00	391.28	288.81	486.32	0.00	0.00	0.00	
TD at 5933.96										

Design Targets										
Target Name	Dip Angle (°)	Dip Dir. (°)	TVD (usft)	+N/-S (usft)	+E/-W (usft)	Northing (usft)	Easting (usft)	Latitude	Longitude	
5450' TVD Target	0.00	360.00	5,450.00	340.49	251.32	233,302.18	1,285,698.24	37° 16' 53.65192 N	100° 57' 19.00794 W	
- hit/miss target										
- Shape										
- plan misses target center by 1.30usft at 5479.55usft MD (5450.18 TVD, 339.45 N, 250.55 E)										
- Point										
BHL Hoffman T-4	0.00	360.00	5,900.00	391.28	288.81	233,352.97	1,285,735.73	37° 16' 54.16367 N	100° 57' 18.56079 W	
- plan hits target center										
- Point										

Casing Points										
Measured Depth (usft)	Vertical Depth (usft)	Name	Casing Diameter (")	Hole Diameter (")						
1,330.00	1,330.00	8 5/8"	8-5/8	9-1/2						

Plan Annotations					
Measured Depth (usft)	Vertical Depth (usft)	Local Coordinates		Comment	
		+N/-S (usft)	+E/-W (usft)		
2,300.00	2,300.00	0.00	0.00	Start Build 2°/100'	
2,707.49	2,706.12	23.28	17.18	Hold 8.15° Inc at 36.43° Azm	
5,933.96	5,900.00	391.28	288.81	TD at 5933.96	