CORRECTION #1

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

1252316

Form ACO-1 August 2013 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #			API No. 15			
Name:			Spot Description:			
Address 1:			Sec TwpS. R			
Address 2:			Feet from North / South Line of Section			
City: Sta	ate: Zi	p:+	Feet from East / West Line of Section			
Contact Person:			Footages Calculated from Nearest Outside Section Corner:			
Phone: ()			□ NE □ NW □ SE □ SW			
CONTRACTOR: License #			GPS Location: Lat:, Long:			
Name:			(e.g. xx.xxxxx) (e.gxxx.xxxxxx)			
Wellsite Geologist:			Datum: NAD27 NAD83 WGS84			
Purchaser:			County:			
Designate Type of Completion:			Lease Name: Well #:			
New Well Re-l	Entry	Workover	Field Name:			
			Producing Formation:			
☐ Oil ☐ WSW ☐ D&A	☐ SWD	□ SIGW	Elevation: Ground: Kelly Bushing:			
☐ Gas ☐ D&A ☐ OG	GSW	Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:			
CM (Coal Bed Methane)	d3vv	remp. Abu.	Amount of Surface Pipe Set and Cemented at: Fee			
Cathodic Other (Core,	. Expl., etc.);		Multiple Stage Cementing Collar Used? Yes No			
If Workover/Re-entry: Old Well Info			If yes, show depth set: Feet			
Operator:			If Alternate II completion, cement circulated from:			
Well Name:			feet depth to:w/sx cmt			
Original Comp. Date:			·			
Deepening Re-perf.	Conv. to E	NHR Conv. to SWD	Drilling Fluid Management Plan			
☐ Plug Back	Conv. to G	SW Conv. to Producer	(Data must be collected from the Reserve Pit)			
O constituents at	D		Chloride content: ppm Fluid volume: bbls			
CommingledDual Completion			Dewatering method used:			
SWD			Location of fluid disposal if hauled offsite:			
☐ ENHR			Location of hala disposal in fladica offsite.			
☐ GSW			Operator Name:			
_			Lease Name: License #:			
Spud Date or Date Read	ched TD	Completion Date or	QuarterSecTwpS. R East Wes			
Recompletion Date		Recompletion Date	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

Confidentiality Requested:

Yes No

KCC Office Use ONLY					
Confidentiality Requested					
Date:					
Confidential Release Date:					
Wireline Log Received					
Geologist Report Received					
UIC Distribution					
ALT I III Approved by: Date:					



Operator Name:			Lease Name:			_ Well #:	
•	S. R						
open and closed, flow	ving and shut-in pressu	ormations penetrated. Dures, whether shut-in presith final chart(s). Attach	Detail all cores. Repessure reached stati	ort all final copie c level, hydrosta	es of drill stems to	ests giving interv	al tested, time tool
		otain Geophysical Data a or newer AND an image		gs must be ema	iled to kcc-well-lo	ogs@kcc.ks.gov	. Digital electronic log
Drill Stem Tests Taker (Attach Additional	•	Yes No		og Formatio	on (Top), Depth a	nd Datum	Sample
Samples Sent to Geo	ological Survey	☐ Yes ☐ No	Nam	е		Тор	Datum
Cores Taken Electric Log Run		Yes No					
List All E. Logs Run:							
		CASING	RECORD Ne	w Used			
		Report all strings set-			on, 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 / SQL	EEZE RECORD		'	
Purpose: Perforate Protect Casing Plug Back TD	Depth Top Bottom						
Plug Off Zone							
Does the volume of the t	•	n this well? aulic fracturing treatment ex submitted to the chemical o		Yes	No (If No, sk	ip questions 2 and ip question 3) out Page Three o	
Shots Per Foot		N RECORD - Bridge Plug potage of Each Interval Peri			cture, Shot, Cemen		Depth
	ореспу г	octage of Each filterval Fell	orateu	(2)	nount and Aind Or We	ateriai Oseuj	Берш
TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	Yes No		
Date of First, Resumed	Production, SWD or ENF	IR. Producing Meth		Gas Lift C	Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls. Gas	Mcf Wate	er B	bls.	Gas-Oil Ratio	Gravity
DISPOSITI	ON OF GAS:	Open Hole	METHOD OF COMPLE Perf. Dually (Submit A	Comp. Cor	nmingled mit ACO-4)	PRODUCTIO	N INTERVAL:
(If vented, Su	bmit ACO-18.)	Other (Specify)	(Submit)	100-0) (SUD	IIII ACU-4)		

Form	CO1 - Well Completion				
Operator	Triple T Oil, LLC				
Well Name	Kern 16				
Doc ID	1252316				

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set			Type Of Cement		Type and Percent Additives
Surface	9	7	10	20	Portland	4	50/50 POZ
Production	6.250	2.8750	8	755	Portland	135	50/50 POZ

Summary of Changes

Lease Name and Number: Kern 16 API/Permit #: 15-121-30976-00-00

Doc ID: 1252316

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	04/27/2015	05/15/2015
Date of First or Resumed Production or SWD or Enhr		4/1/2015
Producing Method Pumping	No	Yes
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 48911	//kcc/detail/operatorE ditDetail.cfm?docID=12 52316



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1248911

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 #	API No. 15
Name:	Spot Description:
Address 1:	SecTwpS. R
Address 2:	Feet from North / South Line of Section
City:	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxx) (e.gxxx.xxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
□ Oil □ WSW □ SWD □ SIOW □ Gas □ D&A □ ENHR □ SIGW	Elevation: Ground: Kelly Bushing:
OG GSW Temp. Abd.	Total Vertical Depth: Plug Back Total Depth:
CM (Coal Bed Methane)	Amount of Surface Pipe Set and Cemented at: Feet
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Demot #	Chloride content: ppm Fluid volume: bbls
Commingled Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	Location of fluid disposal if fladied offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date Recompletion Date	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:					

KOLAR Document ID: 1248911

Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	rpS	S. R	Eas	st West	County:					
	l, flowing an	d shut-in pres	sures, wh	ether shut-in pre	ssure reached	static	level, hydrostat	ic pressures, bo		val tested, time tool erature, fluid recovery,
Final Radioactivi files must be sub							gs must be emai	led to kcc-well-l	ogs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests (Attach Addit)		Yes No		Lo		n (Top), Depth a		Sample
Samples Sent to	Geological	Survey		Yes No		Name			Тор	Datum
Cores Taken Electric Log Run Geologist Report List All E. Logs F	t / Mud Log	s		Yes No Yes No Yes No						
			Rep	CASING	RECORD [Nev		on, etc.		
Purpose of St	tring	Size Hole Drilled		Size Casing let (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	CEMENTING /	SQUE	EEZE RECORD		<u>'</u>	
Purpose: Perforate		Depth Top Bottom	Тур	pe of Cement	# Sacks Use	ed		Type and	Percent Additives	
Protect Ca										
Plug Off Z										
Did you perform Does the volume Was the hydraul	e of the total	base fluid of the	hydraulic	fracturing treatment		-	Yes yes Yes	No (If No, s	kip questions 2 ar kip question 3) ill out Page Three	
Date of first Produ Injection:	ction/Injectio	n or Resumed P	roduction/	Producing Meth	od:		Gas Lift O	ther <i>(Explain)</i>		
Estimated Product Per 24 Hours		Oil	Bbls.		Mcf	Water			Gas-Oil Ratio	Gravity
DISPO	OSITION OF	GAS:		N	METHOD OF CO	MPLET	ΓΙΟΝ:			DN INTERVAL: Bottom
Vented		Used on Lease		Open Hole		Dually (Submit A		nmingled nit ACO-4)	Тор	BOLLOTTI
,	ed, Submit AC							·		
Shots Per Foot	Perforation Top	on Perfor Bott		Bridge Plug Type	Bridge Plug Set At		Acid,		ementing Squeeze and of Material Used)	
TUBING RECORI	D: S	Size:	Set A	: -	Packer At:					

Form	ACO1 - Well Completion
Operator	Triple T Oil, LLC
Well Name	Kern 16
Doc ID	1248911

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
3	684-694	2" DML RTG	10

Form	CO1 - Well Completion				
Operator	Triple T Oil, LLC				
Well Name	Kern 16				
Doc ID	1248911				

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	9	7	10	20	Portland	4	50/50 POZ
Production	6.250	2.8750	8	755	Portland	135	50/50 POZ

Miami County, KS Town Oilfield Service, Inc. Commenced Spudding: Well: Kern #16 (913) 837-8400 3-30-2015

Lease Owner: Triple T Oil

WELL LOG

hickness of Strata	Formation	Total Depth		
0 - 3	Soil - Clay	3		
11	Lime	14		
15	Shale	29		
5	Sand	34		
21	Lime	55		
70	Shale	125		
18	Lime	143		
11	Shale	154		
10	Lime	164		
35	Shale	199		
4	Lime	203		
38	Shale	241		
9	Lime	250		
16	Shale	266		
26	Lime	292		
7	Shale	299		
21	Lime	320		
4	Shale	324		
2	Lime	326		
3	Shale	329		
11	Lime	340		
198	Shale	538		
7	Lime	545		
6	Shale	551		
5	Lime	556		
4	Shale	560		
8	Sand	568		
9	Shale	577		
5	Lime	582		
8	Shale	590		
5	Lime	595		
9	Shale	604		
6	Lime	610		
8	Shale	618		
1	Lime	619		
6	Shale	625		
3	Lime	628		
55 Shale		683		
1	Sandy Shale	684		
1	Broken Sand	685		

Miami County, KS Town Oilfield Service, Inc. Commenced Spudding: Well: Kern #16 (913) 837-8400 3-30-2015

Lease Owner: Triple T Oil

7	Sand	692
2	Broken Sand	694
31	Sandy Shale	725
55	Shale	780 TD
	<u> </u>	
	-	

Short Cuts

TANK CAPACITY

BBLS. (42 gal.) equals D2x.14xh D equals diameter in feet. h equals height in feet.

BARRELS PER DAY Multiply gals. per minute x 34.2

HP equals BPH x PSI x .0004 BPH - barrels per hour PSI - pounds square inch

TO FIGURE PUMP DRIVES

- * D Diameter of Pump Sheave
- * d Diameter of Engine Sheave

SPM - Strokes per minute

RPM - Engine Speed

R - Gear Box Ratio

*C - Shaft Center Distance

D - RPMxd over SPMxR

d - SPMxRxD over RPM

SPM - RPMXD over RxD

R - RPMXD over SPMxD

BELT LENGTH - 2C + 1.57(D + d) + $\frac{(D-d)^2}{4C}$

* Need these to figure belt length

WATTS = AMPS

TO FIGURE AMPS:

VOLTS

746 WATTS equal 1 HP

Log Book

Well No	16	
FarmK	-ern	
		1
KS	/	Miami
(State)	***************************************	(County)
18	16	24
(Section)	(Township)	(Rangé)
For Tripl	· Toil	
	(Well Owner)	

Town Oilfield Services, Inc.

1207 N. 1st East Louisburg, KS 66053 913-710-5400

Kern Farm: Miami County	CA	ASING AN	ID TUBING	MEAS	UREMENTS	s
State; Well No. 16	Feet	In.	Feet	In.	Feet	Tin
Elevation 1061				40	1 661	in.
Commenced Spuding 3-30 2015	723	- 00	Ba	j	<u> </u>	-
Finished Drilling 43-31 2015		-/)				-
Driller's Name Wesley Dollard	755	انمار	760	<u>*</u>		7/
Driller's Name	780	TD			- L	17 7
Driller's Name						1
Tool Dresser's Name Kyan Ward						
Tool Dresser's Name						
Tool Dresser's Name						
Contractor's Name						
(Section) (Township) (Range)						
Distance from 5 line, 1485 ft.						
Distance from E line, 2145 ft.						
4 sacks	*					
9 415						
55/6 borehole						
•						
a 78 casing and tubing	*-					
RECORD						
10" Set 10" Pulled						
8" Set 8" Pulled		_				
7 % 4" Set <u>20</u> 6%" Pulled,						
4" Set 4" Pulled						

-1-

2" Pulled

Thickness of		Total	
Strata	Formation	Depth	Remarks
0-3	Soil-clay	3	٠
	Lime!	14	_
15	Shele	29	redbed
<u>5</u> 21	sand	34	no Oil
	Lime	55	
70	Shele	125	
18	Lime	143	
	Shal-e	154	
10	Lime	164	
35	Shal-e	199	Some save - 90 Oil
4	Lime	203	3,70 01
38	Shale	241	
9	Lim-e	250	
16	Shal-e	266	
26	Lime	292	
7	Shel-P	299	
21	Lime	320	, i
4	Shele	324	
2	Lime	326	
3	Shele	329	
//	Lime	340	Hertha
198	Shal e	538	
7	Lime	545	2
6	Shale	551	
5	Lime	556	
4	Shale	560	
8	Sand	568	ador - slight show
	-2-	1.	-3-

Thickness of Strata Formation Total Depth Remarks 9 Shele 577 5 Lime 542 8 Shele 590 5 Lime 595	
5 Lime 582 8 Shele 590 5 Lime 595	
8 Shele 590 5 Lime 595	
5 Lime 595	
5 Lime 595	
	
9 Shale 604	
6 Lime 610	
8 shale 618	W
1 Lime 619	
6 Shale 625	42
3 Lime 628	
55 Shale 683	
1 sandy shelp 684 odor -no show	
1 broken sand 685 good Oil	
7 Sand 692 solid - and saturation	
2 broken sand 694 25% good 0:1	
31 Sandy Shelf 185	
55 Shele 780 TD	

-4-

-5-

Town Oilfield Service

P.O Box 339 Louisburg, Ks 66053 913-837-8400

Ticket Number
Location
Foreman

Field Ticket & Treatment Report Cement

Date Customer# Well Name & Number Section Township Range County 4-1-15 Mern 16 18 16 24 MI Mailing Address State Zip Code Job Type long & hring Hole Size 5 5/8 Hole Depth 780 Casing Size & Weight 2 1/8 Casing Depth ______ Other______ Other______ Displacement 4.6 Displacement PSI 500 Mix PSI 350 Rate & 13/2/2) Account Code Quantity or Units Description of Services or Product Unit Price Total 700 Pump Charge Cement Truck 250 Water Truck 150 Cement 135 2 1080 Gel Plug 25 Sales Tax Estimated Total 2205 Title

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.