CORRECTION #1

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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	East West
Address 2:			F	eet from North /	South Line of Section
City: Stat	te: Zip:	+	F	Feet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section	Corner:
Phone: ()				w □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:	\	Nell #:
New Well Re-E	Entry [Workover	Field Name:		
	_	_	Producing Formation:		
☐ Oil ☐ WSW	SWD	SIOW	Elevation: Ground:	Kelly Bushing	g:
☐ Gas ☐ D&A	☐ ENHR	SIGW	Total Vertical Depth:	Plug Back Total	Depth:
☐ OG	GSW	Temp. Abd.	Amount of Surface Pipe S	•	·
☐ CM (Coal Bed Methane) ☐ Cathodic ☐ Other (Core,	Fundado):			Collar Used? Yes	
	,				
If Workover/Re-entry: Old Well Info					
Operator:				cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:	Original Tota	al Depth:			
Deepening Re-perf.	Conv. to ENI	HR Conv. to SWD	Drilling Fluid Manageme		
☐ Plug Back	Conv. to GS\	N Conv. to Producer	(Data must be collected from	the Reserve Pit)	
Commingled	Permit #		Chloride content:	ppm Fluid volum	e: bbls
Dual Completion			Dewatering method used:		
SWD			Location of fluid disposal i	if hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:				
				License #:	
Spud Date or Date Reac	ched TD	Completion Date or	QuarterSec	TwpS. R	East West
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 II III Approved by: Date:	



CORRECTION #1

Operator Name:				Lease I	Name: _			_ Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ring and shut-in press o surface test, along v	ures, whe	ther shut-in pre hart(s). Attach	essure reac extra shee	hed stat	ic level, hydrosta space is neede	tic pressures, bod.	ottom hole temp	erature, fluid re	ecovery,
Final Radioactivity Lo files must be submitte						ogs must be ema	alled to KCC-Well-	ogs@kcc.ks.go	v. Digital electi	ronic log
Drill Stem Tests Taker (Attach Additional		Ye	es No			3	on (Top), Depth a		Sampl	
Samples Sent to Geo	logical Survey	_ Ye	es 🗌 No		Nam	е		Тор	Datum	1
Cores Taken Electric Log Run		☐ Ye								
List All E. Logs Run:										
				RECORD	Ne					
						ermediate, product				
Purpose of String	Size Hole Drilled		e Casing : (In O.D.)	Weig Lbs.		Setting Depth	Type of Cement	# Sacks Used	Type and Pe Additive	
			ADDITIONAL	CEMENTI	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and	Percent Additives		
Perforate Protect Casing										
Plug Back TD Plug Off Zone										
Did you perform a hydrau	ulic fracturing treatment of	on this well?	>			Yes	No (If No, s	kip questions 2 aı	nd 3)	
Does the volume of the to			-		-			kip question 3)	(100 1)	
Was the hydraulic fractur	ing treatment information	n submitted	to the chemical of	disclosure re	gistry'?	Yes	No (If No, f	ll out Page Three	of the ACO-1)	
Shots Per Foot			D - Bridge Plug Each Interval Perf				cture, Shot, Ceme			Depth
	, ,					,		,		· · · · · ·
TUBING RECORD:	Size:	Set At:		Packer A	t:	Liner Run:				
							Yes N	0		
Date of First, Resumed	Production, SWD or EN	HR.	Producing Meth Flowing	nod:	g 🗌	Gas Lift 0	Other (Explain)			
Estimated Production Per 24 Hours	Oil	3bls.	Gas	Mcf	Wat	er B	bls.	Gas-Oil Ratio	Gra	avity
DISPOSITION	ON OF GAS:		h	METHOD OF	COMPL	=TION:		ספרו ורדונ	ON INTERVAL:	
Vented Solo			Open Hole	Perf.	Dually	Comp. Con	mmingled	THODOCIN	ZIV IIV I LETVAL.	
	bmit ACO-18.)		Other (Specify)		(Submit		mit ACO-4)			

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Marlene 8-2
Doc ID	1257535

All Electric Logs Run

ANNULAR HOLE VOLUME PLOT
ARRAY COMPENSATED TRUE RESISTIVITY LOG
ARRAY COMPENSATED TRUE RESISTIVITY LOG 1 INCH
ARRAY COMPENSATED TRUE RESISTIVITY LOG 2 INCH
BOREHOLE COMPENSATED SONIC ARRAY LOG
DUAL SPACED NEUTRON SPECTRAL DENSITY LOG
MICROLOG
QUAD COMBO LOG
REPEAT SECTION

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Marlene 8-2
Doc ID	1257535

Tops

Name	Тор	Datum
HEEBNER	3788	
TORONTO	3805	
LANSING	3843	
KANSAS CITY	4186	
MARMATON	4328	
PAWNEE	4428	
CHEROKEE	4473	
ATOKA	4595	
MORROW	4683	
ST GENEVIEVE	4765	
ST LOUIS	4819	

Form	ACO1 - Well Completion
Operator	Merit Energy Company, LLC
Well Name	Marlene 8-2
Doc ID	1257535

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	24	1760	A- CON/PRE M+	560	SEE ATTACH ED

Summary of Changes

Lease Name and Number: Marlene 8-2

API/Permit #: 15-055-22395-00-00

Doc ID: 1257535

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	07/08/2015	07/10/2015
Contractor License Number	35070	99975
Contractor Name	Saxon Drilling, LP	COMPANY SERVICING TOOLS
Kelly Bushing Elevation	2921	2920
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 56599	//kcc/detail/operatorE ditDetail.cfm?docID=12 57535



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1256599

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 🗌 East 🗌 West
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.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
☐ New Well ☐ Re-Entry ☐ Workover	Field Name:
Oil WSW SWD SIOW	Producing Formation:
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? Yes No
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)
Commingled Permit #:	Chloride content:ppm Fluid volume: bbls
Dual Completion Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
ENHR Permit #:	·
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	QuarterSecTwpS. R East West
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 Approved by: Date:

KOLAR Document ID: 1256599

Page Two

Operator Name: _				Lease Name:			Well #:	
Sec Twp.	S. R.	E	ast West	County:				
	flowing and shu	ut-in pressures, v	vhether shut-in pre	ssure reached st	atic level, hydrosta	tic pressures, bot		val tested, time tool erature, fluid recovery,
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to 0	Geological Surv	/ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geologist Report / List All E. Logs Ru	_		Yes No Yes No Yes No					
		B	CASING eport all strings set-c		New Used	ion, etc.		
Purpose of Strir		Hole illed	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD			
Purpose:		epth T Bottom	ype of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate Protect Casi Plug Back T								
Plug Off Zor								
Did you perform a Does the volume Was the hydraulic	of the total base f	fluid of the hydrauli		_	=	No (If No, sk	ip questions 2 an ip question 3) out Page Three	,
Date of first Product Injection:	tion/Injection or R	esumed Production	Producing Meth	nod:	Gas Lift 0	Other (Explain)		
Estimated Production Per 24 Hours	on	Oil Bbls.					Gas-Oil Ratio	Gravity
DISPOS	SITION OF GAS:		N	METHOD OF COMP	LETION:			DN INTERVAL: Bottom
	Sold Used	I on Lease	Open Hole			mmingled mit ACO-4)	Тор	BOROTT
,	,			B.11 B1				
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze I of Material Used)	Record
TUBING RECORD:	: Size:	Set	Δ+-	Packer At:				
TODING RECORD:	. 3126.		n.	i donei Al.				

Form	ACO1 - Well Completion		
Operator	Merit Energy Company, LLC		
Well Name	Marlene 8-2		
Doc ID	1256599		

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Well Name	Marlene 8-2			
Doc ID	1256599			

Tops

Name	Тор	Datum
HEEBNER	3788	
TORONTO	3805	
LANSING	3843	
KANSAS CITY	4186	
MARMATON	4328	
PAWNEE	4428	
CHEROKEE	4473	
ATOKA	4595	
MORROW	4683	
ST GENEVIEVE	4765	
ST LOUIS	4819	

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Well Name	Marlene 8-2		
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Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	12.25	8.625	24	1760	A- CON/PRE M+	560	SEE ATTACH ED



1700 S. Country Estates Rd. Liberal, Kansas 67905

FIELD SERVICE TICKET 1717 05702

	ENERGY		ne 620-6							
PF	RESSURE PUMP	ING & WIRELINE					DATE	TICKET NO		
DATE OF 4/8	15 0	ISTRICT 17-17			NEW WELL	OLD F	ROD INJ	□ WDW	□ CUS	TOMER DER NO.:
CUSTOMER N	lerit				LEASE M	arlev	U 4	'-Z		WELL NO.
ADDRESS	•				COUNTY F	inne	Ч	STATE	K	
CITY		STATE			SERVICE CI	REW Da	niel, Sa	Niago,	Vict	or
AUTHORIZED BY	CHINZ				JOB TYPE:	- 4	2 5	ur Sacl		
EQUIPMENT#		EQUIPMENT#	HRS	EQL	JIPMENT#	HRS	TRUCK CALL	ED 4	- PATE	AM STIME
78939	3		-	-		+	ARRIVED AT	JOB L	(-7	AR 11.00
35/17-199/9			-			1	START OPER		-8	R 12:15
30463 19566			-			-	FINISH OPER	ATION		AN 1.48
30464 377 2	4 5		 			+	RELEASED			AM 2:15
			+ +			+	MILES FROM	STATION TO	WELL	
	Moyel attends	the written consent of an of				V F-201	(WELL OWN)		-	CTOR OR AGENT)
ITEM/PRICE REF. NO.	0	ATERIAL, EQUIPMENT	AND SER	VICES US	ED	UNIT	QUANTITY	UNIT PRIC	E	\$ AMOUNT
CLIOI TI	A-Con B					5K	320			5952 00
	Premium					5K	240	<u> </u>		D547 00
<u>CC109</u>	-	Chloricle			411	16	1,355	0 9	3 1	57800
	CCIDZ iCetloflake					46	61			152500
CC 130 4C+51 CF 253 Guide Shoe & 9/8 Rea.						EA				38000
CFGII Non Rotating Float Coller						EA	1	u Traj		125000
CF912 Non Rotating Top Plug						EA	i			950 00
CF4405 Contralizers						EA	15			135000
CF3000 U	thread la	ock Rit.				FA	1			34 00
EIDI		auin mileage				mi	150			1125 00
CE240	Blowling	+ Mixing Cha	rge			SK	560			784 00

EII3	DULK DELIGHT		11/1/1/2/8		5 475	19
CE202	Dooth Charge 1001	to 2000'	4hr 1		1500	00
CE504	Plia Container		200 1		250	00
EIDD	PickUp Mileage		mi 50		725	
5003	Service Supervisor	Marine e e le 22 anie e m	EA I		175	00
		-0.1				
CH	HEMICAL / ACID DATA:	Well Marien	e 8-L	SUB TOTAL	12,719.	65
		SERVICE	& EQUIPMENT %TAX	ON \$		
		- GL 330000	%IAX	ON\$		
		Office Garden		TOTAL		
		Date 4/8/15	- '			
SERVICE REPRESENTATI	IVE MOUNTAINE	THE ABOVE MATERIAL A		28		

(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

REPRESENTATIVE(



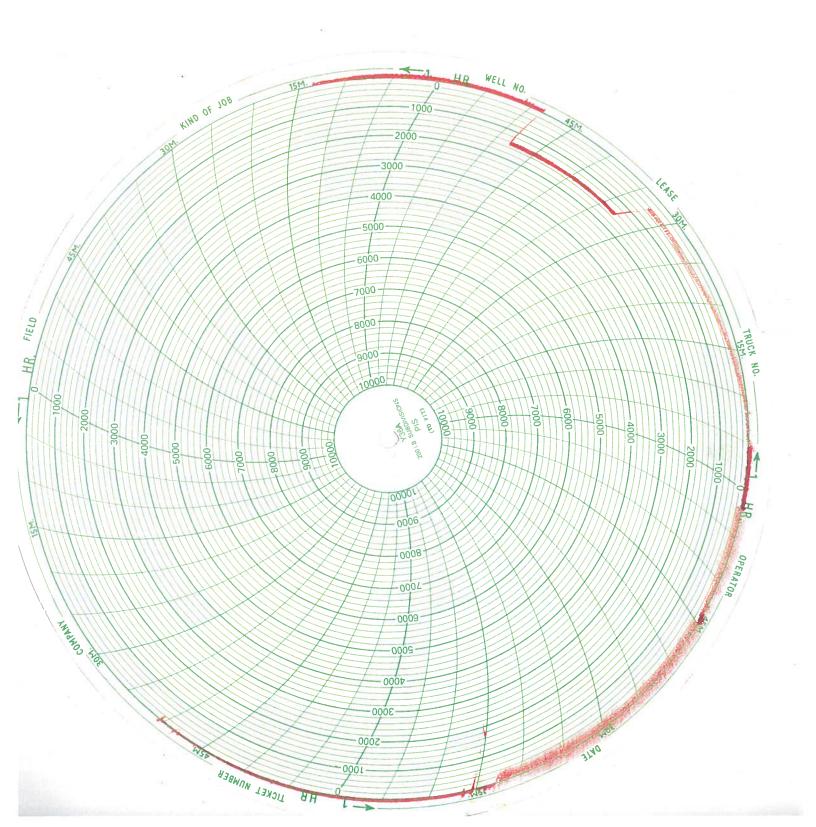
	ENERGY Liberal	SERVICES I, Kansas	3					Cement	Report
Customer Merit				Lease No.			Date 4/8/15		
Lease Mar (Inc			Well # 8-2			Service Receipt			
Casing &	5/4	Depth 17	64.07	County Fi	unoli		State L		
Job Type	120C00	1 7	Formation			Legal Description	1		
	VITAL	Pipe C	ata	1.		Perforating	Data	Cemen	t Data
Casing size	45/4		Tubing Size			Shots/	Ft	Lead o	120 SKA-COM # 2.04y USK
D4b	64.07		Depth		From	m To @/Z./			# 2.04y
11.1	09,37		Volume		From		То		
Max Press	1500		Max Press		From		То	Tail in	240 SK P.P.
Well Conne	ction P.C.		Annulus Vol.		From		То	(a)4187	240 sx P.P. # 1,344 1/sk
Plug Depth			Packer Depth		From		То	6.3399	1/3K
Time	Casing Pressure	Tubing Pressure	Bbis. Pumbed	Rate				ce Log	
23:00					onle	c. Satter	m6, 5	pot 4 R.	0,
0:15	2000				Toch	1:1105	7,		
0:16	250		0	5	Stor	+ MIXI Tail@1	ng (a)	12,1#	
0:45	200		137	5	on	Tail @ /s	4.8#		
0158	Ø		57						
01,00	Ø		0	5	Star	+ Disp	, Wasi	rup on 1	Lug
01:28	650		99	2	3low	Ruti			<u> </u>
01:33	600-1500	>	109,5		Pho	Down	Hold	P31	
01:48	1500-0				Role	ase Ps	i, Floo	at held	
					Sok	Comple	te		
	_								
	<u> </u>			 	_				
					 		·		
				-	 	· · · · · · · · · · · · · · · · · · ·			
							.		
					+				
Coming D-		Z()	24110 10010	211121	1951 1	3046437	274		
Service Un	101		3811719919 D. Beck	30463 1 V. Vasqi	7700	5. Chavez			
Driver Nam	es CHi	VZ_	IN DECK	14.0000	Ct	In Chuck			

Customer Representative

Tyce Dw/5 Station Manager

Cementer

Taylor Printing, Inc.





FIELD SERVICE TICKET 1717 05552 A

	PRESSURE PUMPING & WIRELINE		NEW MELL		DATE			
DATE OF 4/11/5 DISTRICT				OLD P	ROD INJ	□ WDW □ CU	STOMER IDER NO.:	
CUSTOMER Merit Energy			LEASE A	Marl	ene		WELL NO.S	2
ADDRESS	00 -		COUNTY	FINAL	1	STATE K	5	
CITY	STATE		SERVICE C	REW I	mmy,	Ed, Hed	for P.	
AUTHORIZED E	BY Chad HiNZ		JOB TYPE:	Z	42 4	lug 1A		1 900
EQUIPMEN.	T# HRS EQUIPMENT#	HRS EQ	UIPMENT#	HRS	TRUCK CALL	ED PATE	PM TIM	E C
86573	4'17				ARRIVED AT	JOB	AM 6:0	0
14355/198					START OPER			0
TASSAY					FINISH OPER	ATION	PM 9, 3	30
					RELEASED	STATION TO MELL	PM 101	9
					MILES FROM	STATION TO WELL	50M,	Ollu
ITEM/PRICE	MATERIAL FOLUNA	ENT AND SERVICES III	SED	UNIT	(WELL OWNE	UNIT PRICE	RACTOR OR AG	
REF. NO.		ENT AND SERVICES U	SED	10	160	UNIT PRICE		Τ
CL103	16040 102 Tement (00)			5K	776		1920	00
Elol	Heavy Eavione	nt Mileage		mi	150		1/25	00
(EZ40	Blending & Mixin	s Serve El	Margo	5 K	160		224	00
E113	Propport - BUK	Rollinery Che	arges	JM	345		862	50
EDO	Depth Chargo	1001-2008 Jange Pickup		4415	50		1.500	00
5003	Service Supervisor	0 101	Owloc.	29	1		175	
1105	Coment Data +	tog. Monite	ſ	29			950	00
	Well_Mac	ene 8-2						
	AFE 445	75						-
	GL 8300	1075						-
	Office God	Len Citx						
	Date 4/11	16						-
	HEMICAL / ACID DATA:	73				SUB TOTAL	3657	78
	ILIVIIOAL / AOID DATA.	S	ERVICE & EQU	JIPMENT	%TA>	ON \$		
		M	ATERIALS		%TA>	ON \$		
		11				TOTAL		1
SERVICE	ALLA LOS ANUELOS	FHE ABOVE MAT	ERIAL AND SE	ERVICE	1/	60		
REPRESENTAT	IVE (I)	ORDERED BY CL		RECEIVE		OF CONTRACTOR OR	AGENT)	
FIELD SERVICE	ORDER NO.			(AAELL (WINEM OFERAL	P CONTRACTOR OR	NUCKY	

FIELD SERVICE ORDER NO

(B)	BASIC *
	ENERGY SERVICES

Cement Report

		l, Kansas		Lana Al			Inche d			
Customer Wen't Energy				Lease No. Date 4 - 11 - 15						
Lease Mar One				Well # 8- 7			Service Receipt 1417-055524			
Casing Depth				FINNEY			State 6			
Job Type	PTH		Formation	•		Legal Description	on			
Pipe Data				Perforating I			g Data	Cement		
Casing size Tubing Size						Shots	/Ft	Lead /	Lead 160st 60/40	
Depth			Depth	From To			0	13,5		
Volume			Volume		From To		То	1,50	7.50	
Max Press			Max Press		From To		То	Tail in		
Well Connection Swage			Annulus Vol.		From To		То			
Plug Depth			Packer Depth		From		То			
	Casing	Tubing					Carrian	Lan		
Time	Pressure	Pressure	Bbls. Pumbed	Rate	1	1 1	Service	Log		
80:5					I 400 I	lout				
06:00						ocation	DESE	7		
06:10					Sately No WISES Employees					
06120					500+	IN / LIE	110)		
07:15					Daye	ty N/48	R/1/00	crew		
07:25	4.3		10 20 10.	2~	Kis	Up to	Daill Fig	#1)		
07:33	100		13,35BBC		Syai	-+ Comen	Hing 'C	++ 1)		
07:36	190			4.	61	11 /	///			
07:38				110	1 / /	toons/	Vashop			
07:39	10 C		21,9	4.3	154a		laudent			
07:45					Shut	down P	ollrige			
08:15					Kizi	1 /				
15:80	180		13.35 BBL	4.3	Star			رح		
85:80	100		11,47	4,1	Star	4 Displo	coment			
08:51					Shut		Il Pipe			
08:50					218	UP				
08152	180			4.5	Sta	of Comon	Hing #	3)		
08:56	100		5,58	4.T			lace ment			
08:58					Shu	+ down	Pull Ripe	Q		
09:20	"				Kis	up				
09:24	100		5.34	22	Star	up Homen	Ains #44			
09:34						+down	Mashup	topit		
					Com	ent to s	Surface	Sob Comp	lete	
Service Units 86573 ZY487				14355/14883						
Driver Name		myn.	En N.	Lector	(i)					
tarky Tycedbu's Jommy Marcelle										
	Represe	ntative	Sta	tion Manag			Cem	enter /	Taylor	

