CORRECTION #1

Kansas Corporation Commission Confidentiality Requested: OIL & GAS CONSERVATION DIVISION Yes No

1281095

Form ACO-1 November 2016 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.:
Name:		Spot Description:
Address 1:		SecTwpS. R East
Address 2:		Feet from North / South Line of Section
City: State:	Zip:+	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-Entry	Workover	Field Name:
		Producing Formation:
Gas DH EOF		Elevation: Ground: Kelly Bushing:
		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 follow		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: Origin	nal Total Depth:	
Deepening Re-perf. Conv.	to EOR Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv.	to GSW Conv. to Producer	(Data must be collected from the Reserve Pit)
		Chloride content:ppm Fluid volume:bbls
_	:	Dewatering method used:
		Location of fluid disposal if hauled offsite:
	· 	Location of fluid disposal if flauled offsite.
		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 Drill Stem Tests Received							
Geologist Report / Mud Logs Received							
UIC Distribution							
ALT I II III Approved by: Date:							

CORRECTION #1

Operator Name: Lease Name: _ Well #: _ 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). No **Drill Stem Tests Taken** Yes Loa Formation (Top), Depth and Datum Sample (Attach Additional Sheets) Name Top Datum No Samples Sent to Geological Survey Yes Yes No Cores Taken ☐ No Electric Log Run _ Yes Geolgist Report / Mud Logs Yes List All E. Logs Run: CASING RECORD New Used Report all strings set-conductor, surface, intermediate, production, etc. Size Hole Size Casing Weight Setting Type of # Sacks Type and Percent Purpose of String Drilled Set (In O.D.) Lbs. / Ft. Depth Cement Used Additives ADDITIONAL CEMENTING / SQUEEZE RECORD Purpose: Depth Type of Cement # Sacks Used Type and Percent Additives Top Bottom Perforate **Protect Casing** Plug Back TD 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? No (If No, fill out Page Three of the ACO-1) Producing Method: Date of first Production/Injection or Resumed Production/ Injection: Flowing Pumping Gas Lift Other (Explain) **Estimated Production** Water Bbls. Bbls Gas Mcf Gas-Oil Ratio Gravity Per 24 Hours DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL: **Bottom** Sold Used on Lease Open Hole Dually Comp. Commingled (Submit ACO-5) (Submit ACO-4) (If vented, Submit ACO-18.) Bridge Plug Shots Per Bridge Plug Perforation Perforation Acid, Fracture, Shot, Cementing Squeeze Record Foot Top **Bottom** Type Set At (Amount and Kind of Material Used) TUBING RECORD: Size: Set At: Packer At:

Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Alberta Marie SWD 3119 1-23
Doc ID	1281095

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Conductor	26	20	75	85	Haliburton Standard	620	see Original ACO-1
Surface	12.25	9.63	36	833	O-Tex Premium Plus	915	See Original ACO-1
Intermedia te	8.75	7	26	6106	50/50 POZ Premium	340	See Original ACO-1

Summary of Changes

Lease Name and Number: Alberta Marie SWD 3119 1-23

API/Permit #: 15-033-21653-00-01

Doc ID: 1281095

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
API	15-033-21653-00-00	15-033-21653-00-01
Approved Date	10/28/2015	01/27/2016



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1269198

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
City: State: Zip:+	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.xxxxxxx)
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 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:	Producing Formation: Kelly Bushing: Total Vertical Depth: Plug Back Total Depth: Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from: sx cmt.
Well Name: Original Comp. Date: Deepening Re-perf. Conv. to ENHR Conv. to SWD Plug Back Conv. to GSW Conv. to Producer	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Commingled Permit #:	Chloride content: ppm Fluid volume: bbls Dewatering method used: Location of fluid disposal if hauled offsite: Operator Name:
GSW Permit #:	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	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 Approved by: Date:							

KOLAR Document ID: 1269198

Page Two

Operator Name:					Lease Nam	ne:			Well #:	
Sec Tw	pS. F	R [East	West	County:					
open and closed and flow rates if	, flowing and sh gas to surface t ty Log, Final Lo	nut-in pressurest, along wit	es, whe h final c ain Geo	ther shut-in pre hart(s). Attach physical Data a	essure reached extra sheet if r and Final Electr	station more : ric Loc	level, hydrosta space is needed	tic pressures, d.	bottom hole tempe	val tested, time tool erature, fluid recovery, Digital electronic log
Drill Stem Tests Taken (Attach Additional Sheets)				Yes No			og Formatio	n (Top), Deptl	n and Datum	Sample
Samples Sent to	Geological Sur	vey	Ye	es 🗌 No		Name)		Тор	Datum
Cores Taken Electric Log Run Geologist Repor List All E. Logs F	t / Mud Logs		Y€ Y€	es No						
			Repo		RECORD [Nev	w Used rmediate, producti	on. etc.		
Purpose of St		ze Hole Orilled	Siz	e Casing (In O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
				ADDITIONAL	OF MENTING /					
Purpose:	[Depth	Typo		# Sacks Use		EEZE RECORD	Typo a	nd Percent Additives	
Perforate Protect Ca Plug Back	Top	Bottom	Type of Cement		# Gacks Oseu		, ype and rotes in reducing			
Plug Off Z										
Did you perform Does the volum Was the hydraul	e of the total base	fluid of the hyd	draulic fra	cturing treatmen		•	Yes ns? Yes	No (If No	, skip questions 2 an , skip question 3) , fill out Page Three o	,
Date of first Produ	ction/Injection or	Resumed Produ	uction/	Producing Meth			Coolift 0	thor (Fundain)		
Estimated Produc	otion	Oil Bb	le.	Flowing Pumping				ther <i>(Explain)</i> bls.	Gas-Oil Ratio	Gravity
Per 24 Hours		Oli Bb	15.	Gas	Mcf	Wate	ı Di	JIS.	Gas-Oil Hallo	Gravity
DISPO	OSITION OF GAS	S:		N	METHOD OF COMPLETION:				PRODUCTIO	N INTERVAL:
☐ Vented ☐ Sold ☐ Used on Lease ☐					Dually Comp. Commingled Submit ACO-5) (Submit ACO-4)		-	Тор	Bottom	
(If vente	ed, Submit ACO-18	.)			(5	SUDITIIL I	ACO-5) (SUDI	nit ACO-4)		
Shots Per Foot	Perforation Top	Perforation Bottom	on	Bridge Plug Type Bridge Plug Set At			Acid, Fracture, Shot, Cementing Squeeze Record (Amount and Kind of Material Used)			Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	SandRidge Exploration and Production LLC
Well Name	Alberta Marie SWD 3119 1-23
Doc ID	1269198

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Conductor	26	20	75	85	Haliburton Standard	620	see Original ACO-1
Surface	12.25	9.63	36	833	O-Tex Premium Plus	915	See Original ACO-1
Intermedia te	8.75	7	26	6106	50/50 POZ Premium		See Original ACO-1



Daily Operations ALBERTA MARIE SWD 3119 1-23

123 Robert S. Kerr Ave. Oklahoma City, OK 73102

Report Date: 9/25/2015, Report # 2, DFS: 1,173.21

l	Corporate ID		API No.			Operate	d?	Operator				Current Well Status	Working Int (%)
l	121833		15033	21653000	10	Yes		SANDRIDGE EXPLORATION AND PRODUCTION LLC			SERVICE	72.738400	
ı	Well Type		Well Co	nfig	Dual Completion	? Division		Subdivision	State	County/Parish	District	Well Sub-Status	NRI (%)
l	DEVELOP	MENT	SWD		No	MIDC	ON	DEVELOPMENT	KS	COMANCHE		SWD	.000000
l	Township	Twnshp	N/S Dir	Range	Range E/W Dir	Section	Section Suf	Field Name					
l	31		3	19	W	23		SPUR					

Daily Operations

 Report Start Date
 Report End Date

 9/24/2015 05:00
 9/25/2015 05:00

Operations at Report Time

WSI

Operations Summary

RIH & tag TOC w/ SL @ 6838' KB, FINAL REPORT

Operations Next 24 Hours

TOTP

Daily Contacts

Job Contact

Time Lo	Time Log										
Start Time	End Time	Dur (hr)	Cum Dur (hr)	ladc Code	Category	Dpth Start (ftKB)	Dpth End (ftKB)	Description			
05:00	09:00	4.00	4.00					WSI			
09:00	10:00	1.00	5.00					HSM JSA, MIRU Asher SLU, MU 1.5" SB tool, RIH & tag TOC @ 6839' KB, POOH, RDMO SLU. TOC @ 6839' KB KCC witness - Kenn Jehlnik			
10:00	05:00	19.00	24.00					TOTP			



Current

Spud Date 7/9/2012

Wellbore Schematic

Hole

12 1/4

TOC @ 3163'

 Field
 Spur

 County
 Comanche

 State
 KS

 Well
 ALBERTA MARIE SWD 3119 1-23

 SH Location
 SEC 23, TWP 31S, RNG 19W

 Elevations
 2188° KB; 2172' GL

Elevations Well Bore Data MD TVD 20" 94# H-40 Conductor Pipe 25 jts 9-5/8' 36# J-55 csg @
36# J-55: Cplg OD =10.625' ID=8.921 Drift=8.765 Collapse= 2020 Internal Yield=3520 Cmt d w/ 400 s/s O-tex.Lt @ 12.7 ppg (Yield=1.84), followed by 240 s/s $\hbox{O-tex Std} \ @ \ 14.8 \ ppg \ (Yield=1.32). \ Bump \ plug. \ Floats \ held. \ Good \ returns \ throughour \ job. \ Cmt \ to \ suface$ Length Тор KB 10' X 4-1/2" 11.6# J-55 LT&C Chrome Sub 12 10 12 22 32 4-1/2" 11.6# J-55 LT&C IPC 10' sub 144 jts 4-1/2" 11.6# J-55 LT&C IPC tbg 6051 3-1/2" X 4-1/2" Chrome XO 3-1/2" NC On/Off tool w/ 2.833" profile 6083 6084 3-1/2" X 7" 10K NC AS 1-X packer w/ carbide slips 6085 6' X 3-1/2" Nickel Coated sub 6092 2.813" Nickel Coated XN nipple w/ 2.66" No/Go 3-1/2" Nickel Coated WLEG EOT 6099 6100 Well History Operations Summary Date 8/27/2012 MIT Passed - Start Injecting water. 9/23/2015 RIH w/ CT pump 91 sks (19 bbl) class H cement 9/24/2015 RIH w/ SL tag 6839 Length 6024 154 jts -- 7" 26# J-55 BTC Csg 1 Float Collar -- 7', 26#, J-55 BTC 1 jt -- 7' 26# J-55 BTC Csg 1 jt -- 7' 26# Cr-120 BTC Csg 6024 6026 37' 2 6067 Casing Shoe--7", 26#, J-55 BTC Csg Set 6106

Csg Set 6106

26# J-55: Cplg OD =7.656* ID=6.276 Drift=6.151 Collapse= 4320 Internal Yield=4980

Cmt d w/ 150 sxs 50/50 Poz Prem mixed at 13.6 ppg (Yield=1.44), followed by 190 sxs CIH Prem @ 15.6 (Yield=1.18), Bumped plug, floats held. Full returns throughout job.

7,115

Cmt Plug 6839' - 7115' Tag Fill @ 7115' Hole Arbuckle Base

Arbuckle Top

5985

8 3/4"

Hole

TD @