CORRECTION #1

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Confidentiality Requested:

Yes No

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.xxxxx)
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	□ SIOW □ 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

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



1225561 CORRECTION #1

Sec Twp	v important tops of for g and shut-in pressu surface test, along w Final Logs run to ob in LAS version 2.0 o	ormations ires, whe ith final c	s penetrated. D ther shut-in pre hart(s). Attach physical Data a	etail all cor ssure reach	es. Rep	ort all final copi		ests giving inter	
open and closed, flowing and flow rates if gas to s Final Radioactivity Log,	g and shut-in pressu surface test, along w Final Logs run to ob in LAS version 2.0 o	ires, whe ith final c tain Geo	ther shut-in pre hart(s). Attach physical Data a	ssure reacl	ned stati				
	in LAS version 2.0 o				t if more			tioni note tempe	erature, fluid recover
			AND an image f			gs must be ema	ailed to kcc-well-lo	ogs@kcc.ks.gov	v. Digital electronic lo
Drill Stem Tests Taken (Attach Additional She	eets)	Ye	es No		_ L		on (Top), Depth a		Sample
Samples Sent to Geolog	es 🗌 No		Name	9		Тор	Datum		
Cores Taken Electric Log Run	es No								
List All E. Logs Run:									
		Repo	CASING ort all strings set-c		Ne		ion, etc.		
Purpose of String	Size Hole Drilled	Siz	re Casing t (In O.D.)	Weig Lbs./	jht	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTIN	IG / SQU	EEZE RECORD			
Purpose: Perforate	Top Bottom		of Cement	# Sacks Used Type and Percent Additives					
Protect Casing Plug Back TD Plug Off Zone									
Did you perform a hydraulic Does the volume of the tota Was the hydraulic fracturing	l base fluid of the hydra	aulic fractu	ıring treatment ex		-	Yes [Yes [Yes [No (If No, sk	ip questions 2 an ip question 3) out Page Three	,
Shots Per Foot			RD - Bridge Plugs Each Interval Perf				cture, Shot, Cemen		Depth
TUBING RECORD:	Size:	Set At:		Packer At	:	Liner Run:	Yes No		
Date of First, Resumed Pro	oduction, SWD or ENH	IR.	Producing Meth	od:	g 🗌	Gas Lift (Other (Explain)		
Estimated Production Per 24 Hours	Oil B	bls.	Gas	Mcf	Wate	er E	bls.	Gas-Oil Ratio	Gravity
DISPOSITION OF GAS: Vented Sold Used on Lease (If vented, Submit ACO-18.) Open Hole Other (Specify)				IETHOD OF		Comp. Co	mmingled mit ACO-4)	PRODUCTIO	ON INTERVAL:

Form	ACO1 - Well Completion
Operator	Honey Well, LLC
Well Name	Green 6W
Doc ID	1225561

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9	7	10	21	Portland	3	50/50 POZ
Completio n	5.6250	2.8750	8	740	Portland	103	50/50 POZ

Summary of Changes

Lease Name and Number: Green 6W API/Permit #: 15-121-30369-00-00

Doc ID: 1225561

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	09/04/2014	10/01/2014
Producing Formation	Bartlesville	Squirrel
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 18294	//kcc/detail/operatorE ditDetail.cfm?docID=12 25561



Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1218294

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.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?
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 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: 1218294

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)		Ye	Yes No		Lo	Log Formation (Top), Dep		n and Datum	Sample	
Samples Sent to	Geological Sur	vey	Ye	es 🗌 No		Name)		Тор	Datum
Cores Taken Electric Log Run Geologist Report / Mud Logs List All E. Logs Run:		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	rforate Top Bottom Type of Cernella Top Bottom		or cement	" Oddrig Osed		,,,po and research dames				
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 Gas	Pumping Mcf	Wate		ther <i>(Explain)</i> bls.	Gas-Oil Ratio	Gravity
Per 24 Hours		Oli Bb	15.	Gas	IVICI	vvale	ı Di	JIS.	Gas-Oil Hallo	Gravity
DISPO	OSITION OF GAS	S:		N	METHOD OF CO	MPLE.	TION:		PRODUCTIO	N INTERVAL:
					Oually Comp. Commingled ubmit 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,		Cementing Squeeze Kind of Material Used)	Record
TUBING RECOR	D: Size:		Set At:		Packer At:					

Form	ACO1 - Well Completion
Operator	Honey Well, LLC
Well Name	Green 6W
Doc ID	1218294

Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
2	662-676	2" DML RTG	14

Form	ACO1 - Well Completion
Operator	Honey Well, LLC
Well Name	Green 6W
Doc ID	1218294

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement		Type and Percent Additives
Surface	9	7	10	21	Portland	3	50/50 POZ
Completio n	5.6250	2.8750	8	740	Portland	103	50/50 POZ

Miami County, KS Well:Green 6W Lease Owner:HoneyWell

Town Oilfield Service, Inc. Commenced Spudding: 7/22/2014

WELL LOG

Thickness of S	trata	Formation	Total Depth
0-14		Soil-Clay	14
36		Shale	50
18		Lime	68
10		Shale	78
1		Lime	79
29		Shale	108
4		Lime	112
28		Shale	140
9		Lime	149
3		Shale	152
1		Lime	153
13		Shale	166
25		Lime	191
8		Shale	199
20		Lime	219
5		Shale	224
2		Lime	226
5		Shale	231
7		Lime	238
6		Shale	244
5		Sand	249
19		Shale	268
22		Sand and Sandy Shale	290
62		Shale	352
4		Sand	356
3		Sand	359
29		Shale	384
11		Shale	395
17		Shale	412
1		Lime	413
15		Shale	428
2		Lime	430
1		Lime	431
3		Lime	434
8		Shale	442
7		Lime	449
9		Shale	458
8		Lime	466
14		Shale	480
4		Lime	484

Miami County, KS Well:Green 6W

Town Oilfield Service, Inc. Commenced Spudding: 7/22/2014

Lease Owner:HoneyWell

9	Shale	493
3	Lime	496
17	Shale	513
2	Lime	515
24	Shale	539
5	Sand	544
14	Sandy Shale	558
30	Shale	588
12	Sandy Shale	600
4	Shale	604
13	Sandy Shale	617
13	Shale	630
1	Lime	631
9	Shale	640
5	Sandy Shale	645
1	Sand and Sandy Shale	646
4	Sandy Shale	650
2	Sandy Shale	652
3	Sandy Shale	655
1	Sand and Sandy Shale	656
2	Sand	658
2	Sandy Shale	660
1	Sand	661
6	Sand	667
3	Sand	670
6	Sand	676
1	Sand	677
83	Shale	760-TD
		, 00 , 15
	IM-	
li di		

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) + (D-d)2

* Need these to figure belt length

TO FIGURE AMPS:

WATTS = AMPS **VOLTS**

746 WATTS equal 1 HP

Log Book

Well No. 6	<u>/</u>	
Farm <u>() reer</u>)	
(State)	Mia	(County)
2	17	22
(Section)	(Township)	(Range)
For Honey	Well Owner)	

Town Oilfield Services, Inc.

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

Oreen Farm: Mami County		CA	ASING A	ND TUBING	MEAS	UREMENTS	
Elevation 912		Feet	In.	Feet	ln.	Feet	In
Commenced Spuding 07/22 2014		708	65	Battle		27/8	
Finished Drilling 07/33 2014 Driller's Name Grey Perry	20	740	49	Total			
Driller's Name	œ						
Driller's Name		-	-				
Tool Dresser's Name Kerry Cunn Tool Dresser's Name Daketa Oliver							
Tool Dresser's Name		D====					
Contractor's Name TOS							
17 22							
(Section) (Township) (Range)	0	-					
Distance from line, ft. Distance from line, 330 ft.					$-\parallel$		
3 bag of cement							
7						-	
					-		
CACING AND TURNING							
CASING AND TUBING							
RECORD							
10" 8.1	1						
10" Set 10" Pulled							
8" Set 8" Pulled 6%" Pulled	67				_		
					_		_
4" Set 4" Pulled	-						
2" Set 2" Pulled				-1-			

Thickness Strata	s of Formation	Total Depth	
0-14	Soil-Clay	14	Remarks
36	Shale	50	
18	Line	68	
10	Shale	78	
_1	line	79	
29	Shale	108	
4	Lime	113	
23	Shale	140	
9	Lime	149	
3	Shahe	152	
_ /	Lime	153	
13	Shale	166	
ás	Lime	191	
-8	Shale	199	
20	1-ime	219	
	1) have	224	
à	Lime	276	
5	Shale	23/	
	Lime	279	Hertha
6	Shale	244	PERMA
5	Sand	249	NoOil
19	Shale	268	110011
227	Sand& Sandy Shale	290	
62	Sheil 2	352	
4	Sand	396	
3	Sandy	359	
25	Shelle	384	
	-2-		-3-

Thickness of		384	
Strata	Formation	Total Depth	
11	Shale SLime	395	Remarks
17	Shale	412	_
1		413	
15	Lime	- 1 1 /	
5	Shale	429	
0	Lime	430	
5	Lime	431	Oder Char
/	Lime	434	- Joseph Goor
8	Sha(e	442	
	lime	449	
7 (Shale	458	
S. 1	rime	466	
4 (Shale	180	
4 1	-ime	484	
9 0	shale	493	
3 1	lime		
7 6		496	
5 1	Shale	513	
16 6	ine	515	
	theate.	379	
7 7	Panel	544	No Oil
	randy Shake	598	70 011
	hale	588	
) S	andy Shale.	600	
5	hate	604	
90	and & Shale	617	A
5	hale	630	
1	ine	631	No.
	hale	640	

-5-

		640	
Thickness of Strata	Formation	Total Depth	Remarks
_5	Sandy Shale	649	
_1	Sandy Sandy Chide	646	Boroken - 10%
4	Gandy Shale	650	No Oil
<u>d</u>	5 and & Shale	652	Slight Show
3	Sandy Shale	699	No Oil
1	Sand Bauly Shale	656	Broken-10%
0	Sand	698	Broken-50% - Good Soburction
est.	Sandy Shale	660	No Oil
-	Sand	661	Broken-Good Saturation- 75%
3	Sand	667	Solid - Good Saturation
6	Sand	670	Broken-Good Saturation - 50%
i	Sand	676	50 id - Good Scoturation
83	Shale	677	Broken-Good Suturation = 75%
07		760	TD
		11916	
		1	
	G		
	-6-		-7-



269828

ticket NUMBER 47473 LOCATION D+tawq FOREMAN Alan Maden

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

7-23-14 CUSTOMER	9999	Green				TOWNSHIP	RANGE	COUNTY
CUSTOMER		7	6·W	NE	2	17	2)	M:
N ./ 14 14/	WELLET !	,						4
H DNE	s Prij			7 30	K#	DRIVER	TRUCK#	DRIVER
120 0	shore liv	re Dr	L ₂	31.8	·	Manage	Suret	Med
CITY	S		ZIP CODE	675	- 1	Vai Del	<u> </u>	-
houisby	2	15	61053	503		Mile Fore		
JOB TYPE DU	& STring HO	OLE SIZE	55/8 HOLE DEP	TH 760	>	CASING SIZE &)	VEIGHT 2	7/8
CASING DEPTH_	770 DF	RILL PIPE	TUBING	0.40			OTHER 70	4.6
SLURRY WEIGHT	SL SL	URRY VOL	WATER ga	l/sk		CEMENT LEFT, in		145
DISPLACEMENT_	412 DI	SPLACEMENT	PSI MIX PSI	200		RATE 416		
REMARKS: He	dd mex	exlus.	Established	2 vat	6	Mixed'	LAUM	red
1007	sel follo	ow Ed	by 103	K 50	165	ceme	at pl	15 2%
gel C	ir Cylast		ment.	lusha	D.	pump.	Pismi	sed
plus	to batt	le u	ell held	800	15	I for	30 m	inuto
MIL	<u>3e</u> †	J100	9T					
700	C 000							
/05	Greg			·		****	1	
						nA.	ader	
					40,	m M		
ACCOUNT				/	-			
CODE	QUANITY or	UNITS	DESCRIPTION	of SERVICES	or PRC	DUCT	UNIT PRICE	TOTAL
5401		1F	PUMP CHARGE			318		108500
5406	25		MILEAGE			368		10500
5402	740	>′	C45:45 700	1950		368		+
3407	Min		tran mily	<u> </u>		503		36800
5502C	2_		80 vac	·/		675		20000
			· <u>*</u>					
1124	103		50150 ce	neut		le le	118450	V.
11186	273	77-	901			ń.	60.06	V
			Ma	hess	5	46	1244.52	
				he55	3	0% -	373.67	/
				N	101	erial t	otal	870.89
4402			2/2019			30		29.50
						10	28-1-1-1-1-1-202	
	-11/							
				arth.				
	- 4			PAR		lad	.7	
	- NO 1911 NO - 5110		· ·		714	Vall	3129,53	87
vin 3737	D Desta	Done	eo	ne We	A		SALES TAX	68.88
200020000000	J:M	0000					ESTIMATED TOTAL	2727.27
UTHORIZTION	Vin	UGOL	TITLE				DATE	24

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