



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
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- 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

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total 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

- Letter of Confidentiality Received
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 and base 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. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> 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
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

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
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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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Midco Exploration, Inc.
Well Name	Theis 5-19
Doc ID	1048182

All Electric Logs Run

Cement Bond Log
Borehole Compensated Sonic Log
Microresistivity Log
Dual Induction Log
Dual Compensated Porosity Log
Tracer Survey

Form	ACO1 - Well Completion
Operator	Midco Exploration, Inc.
Well Name	Theis 5-19
Doc ID	1048182

Tops

Name	Top	Datum
Heebner	4215	-2112
Toronto	4232	-2129
Douglas	4269	-2166
Lansing	4387	-2284
B/KC	4969	-2866
Marmaton	4988	-2885
Cherokee	5158	-3055
Chester	5400	-3297
St Gen	5703	-3600
Viola	6870	-4767
Arbuckle	7180	-5077



*Mark Parkinson, Governor
Thomas E. Wright, Chairman
Joseph F. Harkins, Commissioner
Ward Loyd, Commissioner*

December 15, 2010

Earl J. Joyce, Jr.
Midco Exploration, Inc.
414 PLAZA DR STE 204
WESTMONT, IL 60559-1265

Re: ACO1
API 15-025-21514-00-00
Theis 5-19
NE/4 Sec.19-33S-25W
Clark County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for the maximum time allowed as provided for in Rule 82-3-107.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Earl J. Joyce, Jr.

ALLIED CEMENTING CO., LLC. 035451

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Ca Kleyks

DATE <i>9/4/10</i>	SEC <i>19</i>	TWP. <i>25</i>	RANGE <i>33</i>	CALLED OUT	ON LOCATION	JOB START COUNTY <i>Clark</i>	JOB FINISH STATE <i>Ks</i>
LEASEE <i>Theis</i>	WELL # <i>5-19</i>	LOCATION <i>Englewood N70 Rd 4</i>					
OLD OR NEW (Circle one) <i>NEW</i>	(Circle one)	<i>b-2 w 500 Finto</i>					

CONTRACTOR *Titan* OWNER *Same*

TYPE OF JOB *8518 Surface*

HOLE SIZE *12 1/4* T.D. *88ft*

CASING SIZE *8 5/8* DEPTH *88ft*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX DEPTH

MEAS. LINE MINIMUM

CEMENT LEFT IN CSG. *0* SHOE JOINT

PERFS.

DISPLACEMENT

CEMENT AMOUNT ORDERED *300 SKs 65/35 390cc*

670 gels 150 SKs 60m 390cc 27 gels

180 SKs 3070cc

COMMON *345* @ *15 45* *5330 25*

POZMIX *105* @ *8 00* *840 00*

GEL *19* @ *20 00* *385 20*

CHLORIDE *15* @ *52 00* *873 00*

ASC

EQUIPMENT

PUMP TRUCK CEMENTER *Alan*

43 HELPER *Kelly*

BULK TRUCK DRIVER *Jerry*

388

BULK TRUCK DRIVER *Gravisor*

391

Flo Seal 25lb @ *2 00* *187 00*

HANDLING *487 SKs* @ *2 40* *1168 80*

MILEAGE *104 SK/mile* @ *2 40* *2435 20*

TOTAL *11229 25*

REMARKS:
Run 8 5/8 Cen Circulate Mix 300 SK
65/35 670 gels 390cc 7 gels w/ 150 SK
Cen 390cc 270 gels Displace Plug 70
Insert w/ 56' w/ 150 SK 150' w/ 500 PIP
LIFT- Bump Plug @ 200 PSI

Cement Did Circulate
Found Gas Below
Gravisor Jerry

SERVICE

DEPTH OF JOB *8*

PUMP TRUCK CHARGE *1018 00*

EXTRA FOOTAGE *582* @ *1 55* *494 70*

MILEAGE *50* @ *7 00* *350 00*

MANIFOLD

TOTAL *1862 20*

CHARGE TO: *Mico Exploration*

STREET CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

AF4 Invert *152 00*

BBaskets -2 @ *221* *442 00*

Centralizer 1 -3 @ *60 00* *180 00*

wooden Plug 1 @ *68 00*

TOTAL *854 00*

To Allied Cementing Co., 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 *David A Mayfield*

SIGNATURE *David A Mayfield*

SALES TAX (if Any)

TOTAL CHARGES

DISCOUNT

IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 035459

Federal Tax I.D.# 20-5975804

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

Medicine Lodge, *[Signature]*

SEC. 19	TWP. 33	RANGE 25	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
WELL # 5-19	LOCATION 100-283 Hys 5 TO A04			COUNTY Clark	STATE KS	
D OR NEW (circle one)	6 1/2 W S. E. 170					

CONTRACTOR Titan OWNER Same

TYPE OF JOB	CEMENT
HOLE SIZE 17 7/8	AMOUNT ORDERED 390 5Kl Class H "ASC"
CASING SIZE 5 1/2	1070 Selt 5# Wilson Tr. 1/2-190 FL 160
TUBING SIZE	1/4" 70 Gas Block - Debeamer
DRILL PIPE	Class H 390sx @ 16.75 6532.50
TOOL	COMMON @
PRES. MAX	POZMIX @
MEAS. LINE	GEL @
CEMENT LEFT IN CSG. 40.14	CHLORIDE @
PERFS.	CBpro 19gal @ 31.25 593.75
DISPLACEMENT	Gyp Seal 37sx @ 29.20 1080.40
PUMP TRUCK CEMENTER Alan	Salt 42sx @ 12.00 504.00
HELPER Matt	Kolseal 1950# @ 1.89 1735.50
BULK TRUCK DRIVER Jason	FL-760 18330 @ 13.30 2437.89
#356-252	Gas Block 91.65 @ 11.10 1017.31
BULK TRUCK DRIVER	Debeamer 54.6 @ 8.50 464.10
#	Med Clean 500gal @ 1.27 635.00
	HANDLING 390 @ 2.40 936.00
	MILEAGE 24 5/8 mile 1950.00
	Med Fluid 3 #head 3 behind TOTAL 17886.45

REMARKS: - mix 10 00L SAND
 Run 5 1/2" Casing Circulate Mix 15 min 1466
 255Kls Well Hole, Mix 390 5Kl Class H ASC
 Down 5 1/2" Displace Plug to Latch Down
 w/ 18 1/2" 00L Ch pro to 1400 FT LIFT
 Latch Plug @ 2500 FT Plug did
 hold. 5 shut in per Cdt.

Frankie
 Alan, Matt,

CHARGE TO: Midco Exploration

STREET _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

5 1/2" Guide Shoe - 1 @	101.00
Latch from Assembly - 1 @	164.00
Centralizers - 25 @	35.00
Turbines - 10 @	42.00
TOTAL	3629.00

To Allied Cementing Co., 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 David H. Mansfield

SIGNATURE *David H. Mansfield*

SALES TAX (if Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 042225

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Liberel Ho.

DATE <u>9-25-10</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>8:30 A.M.</u>	JOB START <u>9:00 A.M.</u>	JOB FINISH <u>12:00 P.M.</u>
LEASE <u>Ther's</u>	WELL # <u>5-16</u>	LOCATION <u>1600 #283, 15, Co. 24, S/w in</u>			COUNTY <u>Clark</u>	STATE <u>KS.</u>	
OLDOR NEW (Circle one)							

CONTRACTOR Superior OWNER Middle Exploration

TYPE OF JOB Squeeze

HOLE SIZE T.D.

CASING SIZE 5 1/2 DEPTH

TUBING SIZE 2 7/8 DEPTH 6835'

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 2500 MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 39 1/4 B.B.S. Fresh

CEMENT

AMOUNT ORDERED 1000x A Neat
50 Sx AT S Pct.

COMMON 150 @ 13.45 2317.50

POZMIX @

GEL @

CHLORIDE 2 @ 58.20 116.40

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER m. Coley

572 HELPER Ceaser P

BULK TRUCK

457-251 DRIVER TWS

BULK TRUCK

DRIVER

HANDLING 152 @ 2.40 364.80

MILEAGE 152 / 50 / 1.10 760.00

TOTAL 3558.70

REMARKS:

See Job log.

SERVICE

DEPTH OF JOB 6835'

PUMP TRUCK CHARGE 2884.00

EXTRA FOOTAGE @

MILEAGE 50 @ 7.00 350.00

MANIFOLD @

CHARGE TO: Middle Expl.

STREET _____

TOTAL 3234.00

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@

@

@ None

@

@

TOTAL _____

To Allied Cementing Co., 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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____

PRINTED NAME x David H. MacArdel

SIGNATURE David H. MacArdel

IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 037071

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Medicine Lodge KS

DATE <u>10-2-10</u>	SEC <u>19</u>	TWP <u>33s</u>	RANGE <u>25w</u>	CALLED OUT <u>4:00 AM</u>	ON LOCATION <u>8:00 AM</u>	JOB START <u>10:30 AM</u>	JOB FINISH <u>11:30 AM</u>
LEASE <u>Ther's</u>	WELL # <u>S-19</u>	LOCATION <u>Englewood Det, 1 South</u>		COUNTY <u>Clyde</u>	STATE <u>KS</u>		
<input checked="" type="checkbox"/> OLD OR NEW (Circle one)							

CONTRACTOR Superior Services Inc. OWNER Mid Co Exploration

TYPE OF JOB Square

HOLE SIZE 7 7/8 T.D.

CASING SIZE 5 1/2 DEPTH 760'

TUBING SIZE 2 7/8 DEPTH 6845'

DRILL PIPE DEPTH

TOOL Retainer DEPTH 6845'

PRES. MAX 2500 psi MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS. 8872' to 77'

DISPLACEMENT 38 1/2 bbls of freshwater

EQUIPMENT

PUMP TRUCK CEMENTER Dorn F

471-302 HELPER Ron G

BULK TRUCK

364 DRIVER Jason T

BULK TRUCK

DRIVER

REMARKS:

Lease back side to 500 psi; Tyler Engineering
Rate at 6 bpm at 1200 psi; mix 75%
Class B next mix 50% Class A + 2% acc
wash pump lines, Displace 38 1/2 bbls
fresh water, wait 15 min, pressure up
to 2000 psi; Reverse out with 45 bbls
plus down

CEMENT

AMOUNT ORDERED 755x Class B next

50% class A + 2% acc

COMMON A 125 sx @ 15.45 1931.25

POZMIX @

GEL @

CHLORIDE 2 sx @ 58.20 116.40

ASC @

HANDLING 127 @ 2.40 304.80

MILEAGE 127.10 / 50 @ 635.00

TOTAL 2987.45

SERVICE

DEPTH OF JOB 6845'

PUMP TRUCK CHARGE 2295.00

EXTRA FOOTAGE @

MILEAGE 50 @ 7.00 350.00

MANIFOLD @

Service man. fee @

@

TOTAL 2645.00

CHARGE TO: Mid Co Exploration

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@
@
@
@
@
None

To Allied Cementing Co., 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.

TOTAL _____

SALES TAX (If Any) ~~_____~~

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~

IF PAID IN 30 DAYS

PRINTED NAME x David H Mayfield

SIGNATURE x David H Mayfield

Thank you!!!

ALLIED CEMENTING CO., LLC. 042234

Federal Tax I.D.# 20-5975804

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Medicine Lake, KS

DATE <u>10-11-2010</u>	SEC. <u>19</u>	TWP. <u>33s</u>	RANGE <u>2SW</u>	CALLED OUT <u>2:00 pm</u>	ON LOCATION <u>4:00 pm</u>	JOB START <u>6:00 pm</u>	JOB FINISH <u>7:00 pm</u>
LEASE <u>Theis</u>		WELL # <u>S-19</u>		LOCATION <u>Englewood Per, 1 south</u>		COUNTY <u>Clay Co</u>	STATE <u>KS</u>
OWNER <u>Mid Co Exploration</u>				CEMENT			

CONTRACTOR Superior Servicing Inc. OWNER Mid Co Exploration

TYPE OF JOB Retainer Squeeze

HOLE SIZE 7 7/8 T.D.

CASING SIZE 5 1/2 DEPTH

TUBING SIZE 2 7/8 DEPTH 6843'

DRILL PIPE DEPTH

TOOL Regriner DEPTH 6843'

PRES. MAX DEPTH MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 39 1/2 bbls of fresh water

EQUIPMENT

PUMP TRUCK CEMENTER Darin F

414-302 HELPER Ron G

BULK TRUCK

364 DRIVER Jason T

BULK TRUCK

DRIVER

REMARKS:

Loss hockside to 750psi with 50 bbls
Tgr injection Rate at 4 1/2 bpm at 1400
Psi, mix 50% class A neat, mix 50% class
A + 20% cc, wash pump & lines, Start
displacement, Pump 39 1/2 bbls pressure up
to 2500 psi, shut down wait 8 minutes
pressure up to 2500 psi release, Help, Reverse
out with 43 bbls wash up & pig down

CHARGE TO: Mid Co Exploration

STREET

CITY STATE ZIP

TOTAL 2416.20

DEPTH OF JOB 6843'

PUMP TRUCK CHARGE 2275.00

EXTRA FOOTAGE

MILEAGE 50 @ 7.00 350.00

MANIFOLD SQUEEZE MANSFIELD @

TOTAL 2645.00

PLUG & FLOAT EQUIPMENT

NONE

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT

IF PAID IN 30 DAYS

PRINTED NAME x David Moxfield

SIGNATURE x David Moxfield

Thank you!!!

Theis #5-19 - ACO-1 attachment

Squeeze, Perforation & Treatment Detail

- 10/14/10 Drill out; perforate 6872-74' - 3 shots per foot ; set cast iron bridge plug @ 6880' ; treat with 750 gallons 7.5% INS - Double FE HCL HF
- 10/11/10 Knock cast iron bridge plug loose; push to 7535' ; squeeze 100 sacks (50 A Neat; 50 A)
- 10/05/10 Drill out cement retainer; perforate 6872-77' - 4 shots per foot ; set cast iron bridge plug @ 6880' ; treat with 250 gallons 15% INS Double FE
- 10/02/10 Knock cast iron bridge plug to 7500' ; set cement retainer @ 6,845' ; squeeze 125 sacks (75 A Neat; 50 A)
- 09/28/10 Perforate 6872-77' - 4 shots per foot ; set cast iron bridge plug @ 6881' ; treat with 1500 gallons 15% NE-Double FE
- 09/25/10 Set cement retainer @ 6835' ; squeeze 150 sacks (100 A Neat; 50 A)
- 09/22/10 Perforate 6886-93' - 4 shots per foot ; treat with 1500 gallons NE Double FE