



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

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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 11, 2011

Mark Cory
Kenneth W. Cory, Ltd.
6750 W. LOOP SOUTH, STE 1050
BELLAIRE, TX 77401-4198

Re: ACO1
API 15-081-21940-00-00
CSS Farms 1
NW/4 Sec.24-30S-31W
Haskell 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 a period of two years.

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

Respectfully,
Mark Cory

LETTER OF CONFIDENTIALITY

Kansas Corporation Commission
Conservation Division
130 S. Market -- Room 2078
Wichita, Kansas 67202

Re: API: 15-081-21940-00-00
NW NW NW
Sec 24-30S-31W
Haskell County, Kansas

Kenneth W. Cory, Ltd. hereby requests that completions information and logs listed below be held confidential for a period of twelve (12) months:

Microresistivity Log
Array Induction/Shallow Focussed/Electric Log
Compact Photo Density/Compensated Neutron/Microresistivity Log



Pat Chesnut

8/10/11
Date

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 33649
Name: KENNETH W. CORY, LTD.
Address 1: 6750 West Loop South, Suite 1050
Address 2:
City: Bellaire State: Texas Zip: 77401, 4198
Contact Person: Pat Chesnut
Phone: (713) 661-5911 Fax: (713) 661-2679
Email Address: pat.chesnut@coryltd.com

Well Location:
 NW 24 NW 30 Sec. 24 Twp. 30 S. R. 31 East West
County: Haskell
Lease Name: CSS FARMS Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Mary Ann Palmer
Address 1: 620 West Renee Drive
Address 2:
City: Andover State: KS Zip: 67002

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 8/10/11 Signature of Operator or Agent: Pat Chesnut Title: Land Manager

Koda Services, Inc.

INVOICE

Conductor and Rat Hole Drilling, Landfill Gas Drilling and Well Construction Nationwide

Date	6/27/2011
INVOICE #	9152

Bill To	Kenneth W Cory Ltd 6750 W Loop South, Ste 1050 Bellaire TX 77401-4198
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Ordered By	Terms	Field Tkt	Legal Description	Lease Name	Drill Rig
Mark	Net 30	6554		CSS Farms	Duke #6
Item	Quantity		Description		
Conductor	70		Drilled 70' of 32" hole for conductor		
20" Pipe	70		Furnished 70' of 20" conductor pipe		
Ream Hole			Ream Hole		
60" X 5'	1		Furnished 5' X 5' tinhorn		
Dirt Removal	1		Provided Labor and Equipment for dirt removal and cleanup		
15"X 30'	1		Furnished 30' Shuck		
15"X 20'	1		Furnished 20' Shuck		
Placement			Equipment and Labor to place shucks in rat & mouse hole		
Mud/Water			Freight/Trucking charge for mud/water		
Welder			Welder		
Grout			Furnished grout		
Deliver Grout			Deliver grout to location		
Mouse			Drilled rat & mouse hole		
Cover Plate			Cover Plate		
Permits			Permits		

201 → 150006 - 2401
RECEIVED JUL - 8 2011

Dr

Subtotal	\$13,275.00
Sales Tax (7.3%)	\$352.23

Thank you for your business.

Mark Horn

Total	\$13,627.23
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P.O. Box 66 • Woodward, OK 73802-0066 • Phone: (580) 254-5019 • Fax: (580) 254-5908

KOD 0001
187281



CEMENTING LOG

STAGE NO.

Date 6-21-2011 District Mt Ticket No. 40224
 Company KW Carey Rig Duke #10
 Lease CSS Farms Well No. 1
 County Sewick State Ks
 Location McC Plains, Ks Field 24-30-314

CASING DATA: PTA Squeeze Liner
 Surface Intermediate Production
 Size 8 5/8 Type 24 Weight 24 Collar _____

Casing Depths: Top 1514 Bottom 1509'

Drill Pipe: Size _____ Weight _____ Collars _____
 Open Hole: Size 12 1/4 T.D. 1514 ft. P.B. to _____ ft.

CAPACITY FACTORS:
 Casing: Bbls/Lin. ft. 10682 Lin. ft./Bbl. 15.70
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. 10735 Lin. ft./Bbl. 13.60
 Annulus: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

CEMENT DATA: Spacer Type: 3 bbls fresh water
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

LEAD: Pump Time _____ hrs. Type _____ Excess _____
3/1000 + 1/1000

Amt. 625 Sks Yield 1.98 ft³/sk Density 128 PPG
 TAIL: Pump Time _____ hrs. Type _____ Excess _____
200 gal

Amt. 150 Sks Yield 1.34 ft³/sk Density 15.2 PPG
 WATER: Lead 1 gals/sk Tail _____ gals/sk Total _____ Bbls.

Pump Trucks Used 471-302-Kong.
 Bulk Equip. 363-290-Dustin E.
356-250-Bono

Floater Equip: Manufacturer Waterport Depth 1509'
 Shoe: Type Guide Shoe Depth 1465'
 Floater Type AFU Insert
 Centralizers: Quantity 5 Plugs Top 1 Btm. _____
 Stage Collars _____
 Special Equip. 3-Baskets
 Disp. Fluid Type Freshwater Amt. 93 Bbls. Weight 8.34 PPG
 Mud Type _____ Weight _____

CEMENTER Darin Franklin

TIME	PRESSURES PSI		FLUID PUMPED DATA		REMARKS
	DRILL-PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
	<u>200</u>				<u>Pipe on bottom break circulation</u>
<u>11:45</u>	<u>200</u>			<u>3</u>	<u>Pump 3 bbls of fresh water check</u>
	<u>200</u>			<u>220</u>	<u>mix 625sr of test cement</u>
	<u>200</u>			<u>36</u>	<u>mix 150sr of test cement</u>
					<u>Shot down</u>
					<u>Release plug</u>
	<u>200</u>			<u>6</u>	<u>Start displacement</u>
	<u>500</u>			<u>80</u>	<u>Slow rate to 3 bpm x 80 bbls</u>
<u>12:45</u>	<u>1000</u>			<u>93</u>	<u>Bump plug @ 93 bbls 500-1000 PSI</u>
					<u>Floater not held</u>
					<u>Cement in circulation</u>

FINAL DISP. PRESS: 500 PSI BUMP PLUG TO 1000 PSI BLEEDBACK _____ BELLS _____

THANK YOU

ALLIED CEMENTING CO., LLC. 042103

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: Appanetoch, Ks

DATE <u>7-26-11</u>	SEC <u>29</u>	TWP. <u>30S</u>	RANGE <u>31W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>SS Farms</u>	WELL # <u>H-1</u>	LOCATION <u>Plains, KS 2w, 10w, 4w, N, E/S</u>				COUNTY <u>Sevier</u>	STATE <u>KS</u>
OLD OR NEW (Circle one) <u>1.41</u>							

CONTRACTOR Duke #0 OWNER KW Conroy

TYPE OF JOB Saturated Plug

HOLE SIZE 7 7/8 T.D. 5000

CASING SIZE 8 5/8 DEPTH 1500

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 1537

TOOL DEPTH

PRES. MAX 2500 MINIMUM

MEAS. LINE SHOE JOINT N/A

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT Frash H₂O

EQUIPMENT

PUMP TRUCK CEMENTER D. Felso

360-205 HELPER M. Thimmesch

BULK TRUCK

363-290 DRIVER D. Elorn

BULK TRUCK

DRIVER

REMARKS:

Drill Pipe at 1537', load Hole Pump Spacing
4x 5000', Discard 18 Bbls, Drill Pipe at
630', Road Hole 1 Pump Spacing Mix 40SK
Drill pipe 6 1/2 Bbls, Drill Pipe 60 Surface
Pump Spacing at 1537' Case, Plug Cat 4
Appanetoch, KS 5000'

CHARGE TO: KW Conroy

STREET _____ CITY _____ STATE _____ ZIP _____

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 _____

SIGNATURE [Signature]

CEMENT

AMOUNT ORDERED Heavy bottom 1/4"

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

_____ @

_____ @

_____ @

_____ @

_____ @

_____ @

_____ @

_____ @

HANDLING _____

MILEAGE _____

TOTAL _____

SERVICE

DEPTH OF JOB 1537

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD N/A @

Light Vehicle @

_____ @

_____ @

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @

_____ @

_____ @

_____ @

_____ @

_____ @

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS