



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: _____



1052720

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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ALLIED CEMENTING CO., LLC. 034061

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: Russell

DATE <u>1-4-11</u>	SEC. <u>11</u>	TWP. <u>11</u>	RANGE <u>14</u>	CALLED OUT	ON LOCATION	JOB START COUNTY <u>Russell</u>	JOB FINISH STATE <u>KS</u>
LEASE <u>Shlessig Dr</u>				LOCATION <u>281 + Hwy 18 1/2 S</u>			
WELL # <u>1-11</u>				OWNER			
OLD OR NEW (Circle one) <u>NEW</u>				CEMENT			
CONTRACTOR <u>Royal Drilling Rig #1</u>				AMOUNT ORDERED <u>400 Com 39 cc 22 Gal</u>			

TYPE OF JOB Sec face job

HOLE SIZE 10 7/8 TD. 934

CASING SIZE 8 5/8 DEPTH 931

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 43.35

CEMENT LEFT IN CSG. 43.35

PERFS. _____

DISPLACEMENT 56, 53.661

EQUIPMENT

PUMP TRUCK CEMENTER Shane

417 HELPER Ken

BULK TRUCK _____

423 DRIVER Woody

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

Beville A/c Fe 88765

Ran 22 hrs + loading St.

Ext Circulation.

Mixed 400 sts

Cement Circulated!

CHARGE TO: SO. Drilling

STREET _____

CITY _____ STATE _____ ZIP _____

Thanks!

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 Doug Budig

SIGNATURE Doug Budig

COMMON 400 @ 13.50 5400.00

POZMIX @ _____

GEL @ 20.25 162.00

CHLORIDE 14 @ 51.00 714.00

ASC @ _____

HANDLING 400 @ 2.25 900.00

MILEAGE 54/2/10 @ _____ 600.00

TOTAL 7783.00

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ @ 99%

EXTRA FOOTAGE _____ @ _____

MILEAGE 15 @ 7.50 105.00

MANIFOLD @ _____

TOTAL 1096.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ 67.20

_____ @ _____

TOTAL 67.20

SALES TAX (If Any) _____

TOTAL CHARGES 8673.00

DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 034068

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Russell

DATE <u>1-8-14</u>	SEC. <u>11</u>	TWP. <u>11S</u>	RANGE <u>14W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
Schlossiger LEASE to the Inc. WELL # <u>1-11</u>				LOCATION <u>Aug 201 / 18th Feb 1/2 S</u>	COUNTY <u>Russell</u>	STATE <u>Ks.</u>	
OLD OR NEW (Circle one) <u>NEW</u>							

CONTRACTOR Royal Drilling Rj #1

OWNER

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 3340'

CASING SIZE _____ DEPTH _____

TUBING SIZE 4 1/2 DEPTH _____

DRILL PIPE 4 1/2 DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT

AMOUNT ORDERED 195 69% 436.1 / 449%.

COMMON 117 @ 13.50 1579.50

POZMIX 78 @ 7.55 588.90

GEL 7 @ 20.25 141.75

CHLORIDE _____ @ _____

ASC _____ @ _____

Flo Seal 49 lbs @ 2.45 120.05

HANDLING 195 @ 2.25 438.75

MILEAGE SK/mj.10 @ _____ 292.50

TOTAL 3161.45

EQUIPMENT

PUMP TRUCK CEMENTER Shane

417 HELPER G-town

BULK TRUCK 440 DRIVER Woody

BULK TRUCK DRIVER _____

REMARKS:

950' 40 sks

550' 100 sks

40' 10 sks

Red Hole 30 sks

Moose Hole 15 sks

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 991.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 15 @ 7.00 105.00

MANIFOLD _____ @ _____

TOTAL 1096.00

CHARGE TO: C.O. Drilling

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 40.00

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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

PRINTED NAME Doug Budig

DISCOUNT 0 IF PAID IN 30 DAYS

SIGNATURE Doug Budig

GENERAL INFORMATION

Client Information:

Company: L D DRILLING INC

Contact: L D DAVIS

Phone: Fax: e-mail:

Site Information:

Contact: KIM SHOEMAKER

Phone: Fax: e-mail:

Well Information:

Name: SCHLESSENGER CATTLE CO. 1-11

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S11/11S/14W

Test Information:

Company: DIAMOND TESING

Representative: JOHN RIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D887

Test Unit:

Start Date: 2011/01/07 Start Time: 01:00:00

End Date: 2011/01/07 End Time: 07:00:00

Report Date: 2011/01/07 Prepared By: JOHN RIEDL

Remarks: Qualified By: KIM SHOEMAKER

RECOVERY: 5' FREE OIL, 85' VERY SLIGHTLY OIL CUT MUDDY WATER



DIAMOND TESTING

P.O. Box 157

HOISINGTON, KANSAS 67544

(620) 653-7550 • (800) 542-7313

DRILL-STEM TEST TICKET

Company _____ Lease & Well No. _____

Contractor _____ Charge to _____

Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____

Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State _____

Test Approved By _____ Diamond Representative **JOHN C. RIEDL**

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.

Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.

Packer Depth _____ ft. Size _____ in. Packer Depth _____ ft. Size _____ in.

Depth of Selective Zone Set _____

Top Recorder Depth (Inside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Bottom Recorder Depth (Outside) _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Below Straddle Recorder Depth _____ ft. Recorder Number _____ Cap. _____ P.S.I.

Mud Type _____ Viscosity _____ Drill Collar Length _____ ft. I.D. 2 1/4 in.

Weight _____ Water Loss _____ cc. Weight Pipe Length _____ ft. I.D. 2 7/8 in.

Chlorides _____ P.P.M. Drill Pipe Length _____ ft. I.D. 3 1/2 in.

Jars: Make BOWEN Serial Number _____ Test Tool Length _____ ft. Tool Size 3 1/2-IF in.

Did Well Flow? _____ Reversed Out _____ Anchor Length _____ ft. Size 4 1/2-FH in.

Main Hole Size 7 7/8 Tool Joint Size 4 1/2 in. Surface Choke Size 1 in. Bottom Choke Size 5/8 in.

Blow: 1st Open: _____

2nd Open: _____

Recovered _____ ft. of _____

Recovered _____ ft. of _____

Recovered _____ ft. of _____

Recovered _____ ft. of _____

Recovered _____ ft. of _____

Remarks: _____

Price Job
Other Charges
Insurance
Total

Time Set Packer(s) _____ A.M. P.M. Time Started Off Bottom _____ A.M. P.M. Maximum Temperature _____

Initial Hydrostatic Pressure (A) _____ P.S.I.

Initial Flow Period Minutes (B) _____ P.S.I. to (C) _____ P.S.I.

Initial Closed In Period Minutes (D) _____ P.S.I.

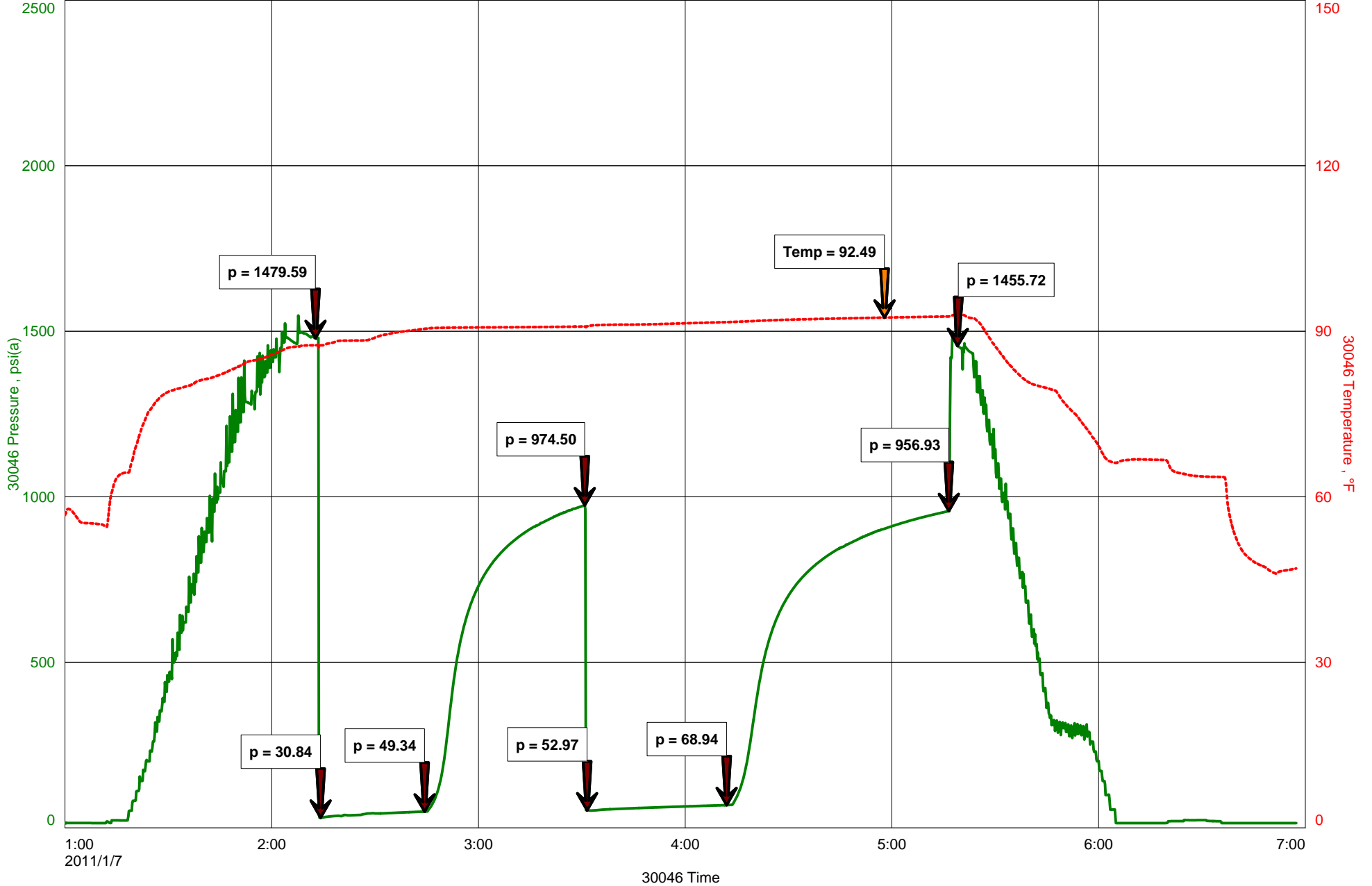
Final Flow Period Minutes (E) _____ P.S.I. to (F) _____ P.S.I.

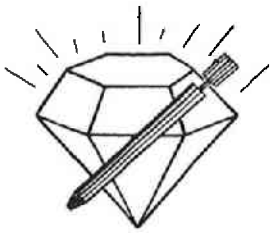
Final Closed In Period Minutes (G) _____ P.S.I.

Final Hydrostatic Pressure (H) _____ P.S.I.

Diamond Testing shall not be liable for damages of any kind to the property or personnel of the one for whom a test is made or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statement or opinion concerning the result of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

SCHLESSENGER CATTLE CO. 1-11





DIAMOND TESTING
 P.O. Box 157
HOISINGTON, KANSAS 67544
 (620) 653-7550 • (800) 542-7313
 STC 30046.D888

Company L. D. Drilling, Inc. Lease & Well No. Schlessiger Cattle, Inc. #1-11
 Elevation 1790 KB Formation Lansing "C" - "D" Effective Pay -- Ft. Ticket No. J2683
 Date 1-7-11 Sec. 11 Twp. 11S Range 14W County Russell State Kansas
 Test Approved By Kim B. Shoemaker Diamond Representative John C. Riedl

Formation Test No. 2 Interval Tested from 3,077 ft. to 3,105 ft. Total Depth 3,105 ft.
 Packer Depth 3,072 ft. Size 6 3/4 in. Packer Depth -- ft. Size -- in.
 Packer Depth 3,077 ft. Size 6 3/4 in. Packer Depth -- ft. Size -- in.
 Depth of Selective Zone Set ft.

Top Recorder Depth (Inside) 3,080 ft. Recorder Number 30046 Cap. 6,000 psi
 Bottom Recorder Depth (Outside) 3,102 ft. Recorder Number 11073 Cap. 4,000 psi
 Below Straddle Recorder Depth ft. Recorder Number Cap. psi

Drilling Contractor Royal Drilling, Inc. - Rig 1 Drill Collar Length -- ft. ID. -- in.
 Mud Type Chemical Viscosity 52 Weight Pipe Length -- ft. ID. -- in.
 Weight 8.8 Water Loss 8.0 cc. Drill Pipe Length 3,055 ft. ID. 3 1/2 in.
 Chlorides 2,000 P.P.M. Test Tool Length 22 ft. Tool Size 3 1/2 - IF in.
 Jars: Make Sterling Serial Number Not Run Anchor Length 28 ft. Size 4 1/2 - FH in.
 Did Well Flow? No Reversed Out No Surface Choke Size 1 in. Bottom Choke Size 5/8 in.
 Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2 - XH in.

Blow: 1st Open: Weak, 1/2 in., blow throughout. No blow back during shut-in.
 2nd Open: Very weak, 1/8 in., blow. No blow back during shut-in.

Recovered 2 ft. of free oil = .028460 bbls.
 Recovered 20 ft. of very slightly oil cut muddy water = .284600 bbls. (Grind out: 1%-oil; 35%-mud; 64%-water)
 Recovered 22 ft. of TOTAL FLUID = .313060 bbls. Chlorides: 60,000 Ppm
 Recovered ft. of
 Recovered ft. of
 Remarks

Time Set Packer(s) 1:20 ^{AM.} P.M. Time Started Off Bottom 3:20 ^{AM.} P.M. Maximum Temperature 91°
 Initial Hydrostatic Pressure (A) 1487 P.S.I.
 Initial Flow Period Minutes 30 (B) 28 P.S.I. to (C) 33 P.S.I.
 Initial Closed In Period Minutes 30 (D) 1133 P.S.I.
 Final Flow Period Minutes 30 (E) 36 P.S.I. to (F) 38 P.S.I.
 Final Closed In Period Minutes 30 (G) 1098 P.S.I.
 Final Hydrostatic Pressure (H) 1464 P.S.I.

GENERAL INFORMATION

Client Information:

Company: L D DRILLING INC

Contact: L D DAVIS

Phone: Fax: e-mail:

Site Information:

Contact: KIM SHOEMAKER

Phone: Fax: e-mail:

Well Information:

Name: SCHLESSIGER CATTLE, INC. #1-11

Operator: L D DRILLING INC

Location-Downhole:

Location-Surface: S11/11S/14W

Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: KIM SHOEMAKER

Test Type: CONVENTIONAL Job Number: D888

Test Unit:

Start Date: 2011/01/07 Start Time: 11:50:00

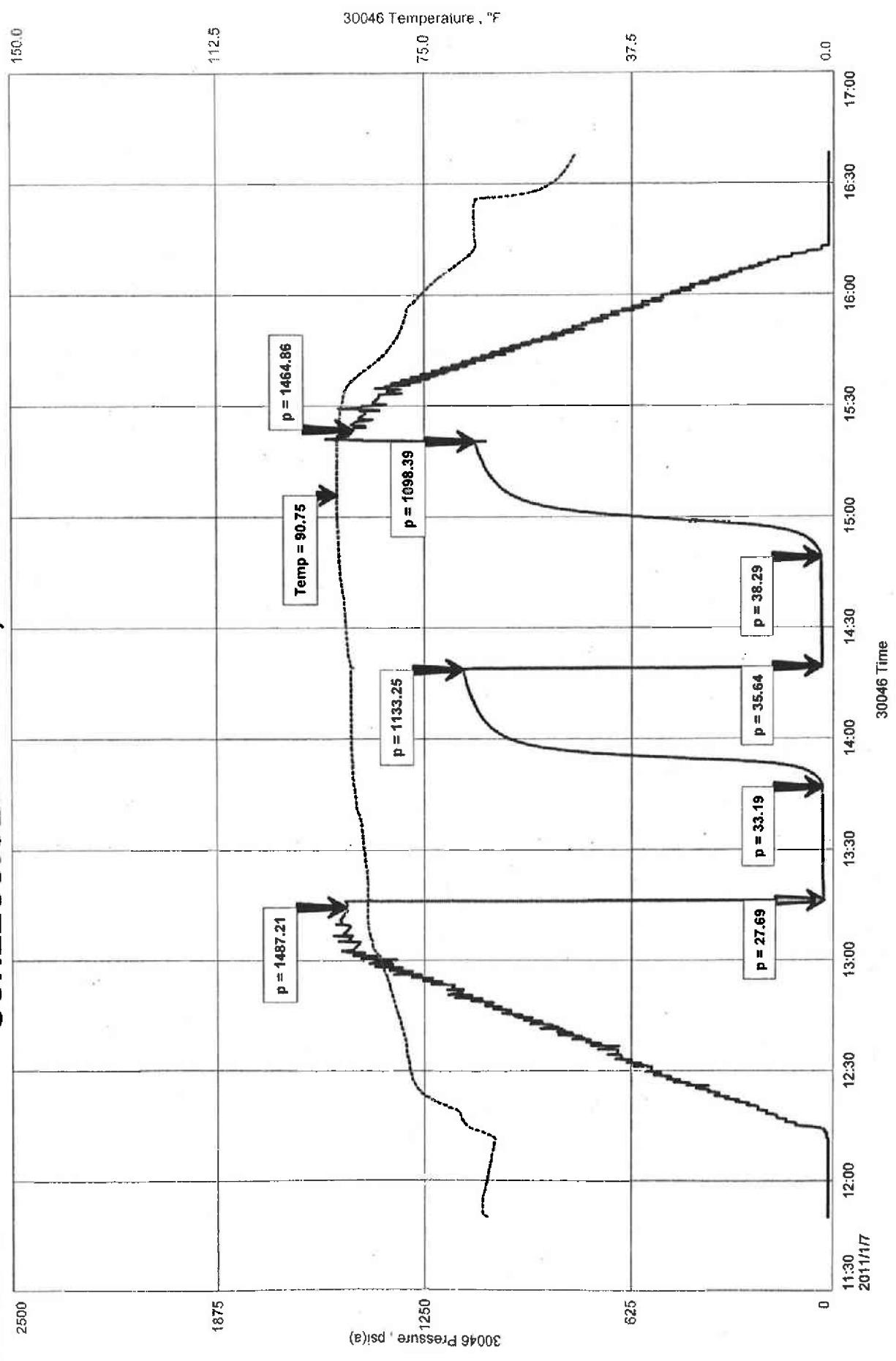
End Date: 2011/01/07 End Time: 16:40:00

Report Date: 2011/01/07 Prepared By: JOHN RIEDL

Remarks: Qualified By: KIM SHOEMAKER

RECOVERY: 2' FREE OIL, 22' VERY SLIGHTLY OIL CUT MUDDY WATER

SCHLESSIGER CATTLE, INC. #1-11



900

950

2500

2600



2700

2800

2900

Samples are tagged

Sb. 114, 115, 116

TOPEKA 2733-913

15. 7. Sb. Pass. w/ Dry Pass

15. 114 Sb. Pass.

Sb. 114

15. 7. VSI: Chly.

Sb. 114 Silty

15. Top of Sb. Pass. Silty Chly.

15. 114. Dr.

V6: 51

WT: 88

WL: 80

200: 2000

15. 114. Sb. Pass. Pass

4.00g

Sb. 114

15. 114. Sb. Pass. Chly.

Sb. 114

15. w/ Sb. Pass. Silty

15. 7. Sb. Silty Pass.

Sb. 114 Soft

15. 114. Dr.

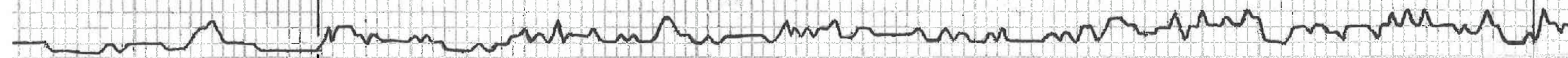
Sb. 114. Silty

15. w/ Sb. Pass. Silty Chly.

15. w/ Sb. Pass. w/ Dry Pass

Sb. 114 Silty

15. Top of Sb. Pass. Silty



15. wet. Sil. Foss. vol. Sil. Δ

16. clay. T. Dm.

HEEBNER 2987-1197

Sh. Sil. Carb. (3000)
Cl. T. VSB Foss.

Sh. H. Blue. G. Soil. "Memory"

Sh. Yellow. Silt. "Memory"

Cl. wt. VSB Foss. Sil. Chalky

Sh. G. G.

Sh. Pt. Ltg.

LANSING 3039-1299

Cl. T. G. VSB Foss. Sil. Δ

Cl. Ltg. T. VSB Foss.

Sh. Ltg. Ltg. Sil. Foss. Sil. Δ VSB Chalky
Pt. Ltg. Ltg. Sil. Foss. Sil. Δ VSB Chalky
No. 0100 (3010)

Sh. Ltg. G.

Cl. T. wt. Sil. Carb. Foss. Pt. VSB. Cl. Ltg. Sil. Δ
VSB Foss. Dull Floor. VSB Chalky
(3080, 301)

Cl. T. wt. Ltg. 100 G. Sil. Carb. F. Carb.

Ltg. Sil. Sil. 1.55 SD T. Gls. Dull Floor.
VSB Chalky (3105)

Cl. wt. Ltg. 100 G. Sil. Carb. Chalky

V/S: 54

W/T: 92

W/L: 8.8

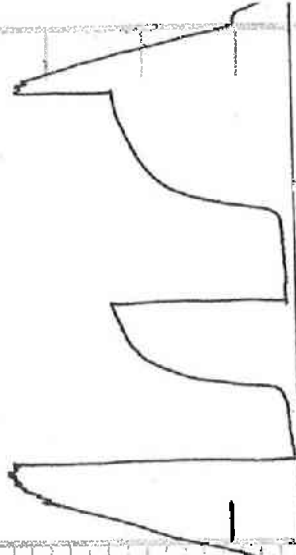
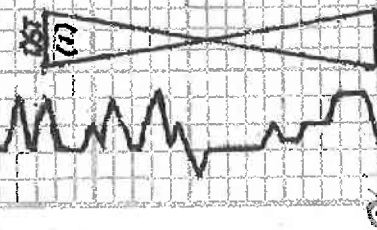
CHI: 1000

3100

3000

TORONTO

DUNDAS



DST (17) 3015-3080

150000: Blow balls to 7"
240000: " " " 8"

30. 45-45-60

Rec. 5' CO

85' VSB CHALK (2100, 301, 301, 301, 301, 301)

TR: 90'

CHK: 90,000

FP: 3149 53-69*

SIP: 975-957* Temp 92°F

DST (22) 3077-3105

150000: 1/2" Blow

240000: 1/8" "

30. 30. 30. 30. 30

Rec. 2' CO

20' VSB CHALK (1100, 35', 1100, 35', 1100, 35')

TR 22'

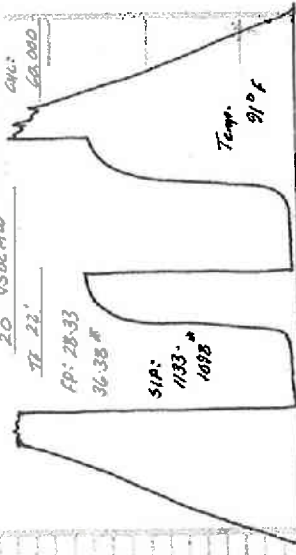
FP: 28-33

36-38"

SIP: 1133*

1098*

Temp 91°F



MUNCIE CREEK 3187

-1397

Sh. Dk G.

Sh. G.

Cl. wt. VSB Foss. Sil. Chalky

Cl. wt. Chalky

Sh. G.

Cl. wt. dull. Sil. Δ

Cl. wt. Sil. Foss. Sil. Δ

Cl. wt. dull. Sil. Chalky

3200

45 To SH-A

STARK 3249-1459

Sh. 64g. (3270)

Sh. 64g

ES. G. 1551 Pass. Clortho.

ES. To G. Dr. VSH-A
A 04g 511 Pass.

Sh. 64g. (3300)
ES 1521 G. St. Pass.

Sh. 64g

ES. 41g. 311 Pass. SH-A

ES. G. Dr.

SH-KC 3321-1531

Sh. 64g

ES. To 44g. 1556 Fall. SH-A

Sh. 64g. 41

HUGHPUCKNEY 3289
- 1499

RTD 3340-1550

3500

©