



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: _____

1053681



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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
(If no, Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
Name Top Datum

CASING RECORD New 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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<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> _____	<input type="checkbox"/> Commingled <input type="checkbox"/> Other <i>(Submit ACO-4)</i>



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare
202 W. Main St
Salen Il
62881
ATTN: Tim Priest

Ottley 8-15
15-14-32/Logan
Job Ticket: 41788 **DST#: 1**
Test Start: 2011.03.01 @ 09:53:13

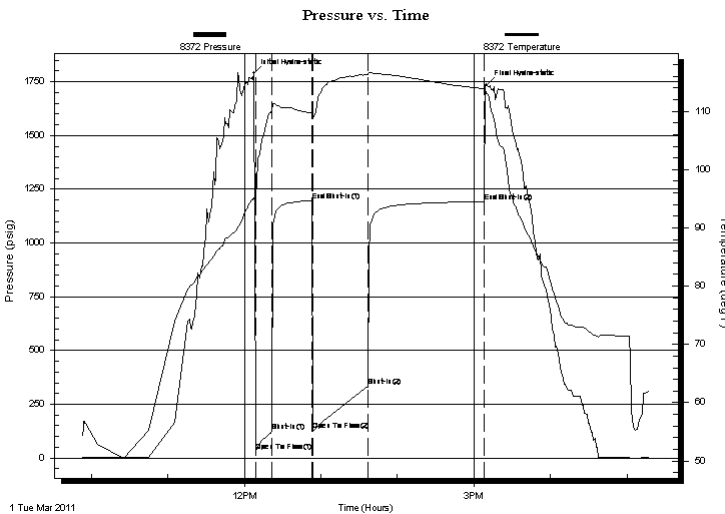
GENERAL INFORMATION:

Formation: **LKC "A"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 12:09:12
 Time Test Ended: 17:17:42
 Interval: **3761.00 ft (KB) To 3790.00 ft (KB) (TVD)**
 Total Depth: 3790.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition:
 Test Type: Conventional Bottom Hole
 Tester: Brian Fairbank
 Unit No: 41
 Reference Elevations: 2777.00 ft (KB)
 2767.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 8372 Inside
 Press @ Run Depth: 333.41 psig @ 3762.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.03.01 End Date: 2011.03.01 Last Calib.: 2011.03.01
 Start Time: 09:53:13 End Time: 17:17:42 Time On Btm: 2011.03.01 @ 12:07:42
 Time Off Btm: 2011.03.01 @ 15:10:12

TEST COMMENT: IFP - BOB 7 min
 ISI - no blow back
 FFP - BOB 7 min
 FSI - no blow back

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1788.89	95.13	Initial Hydro-static
2	33.57	95.61	Open To Flow (1)
14	122.24	110.11	Shut-In(1)
45	1197.34	109.79	End Shut-In(1)
46	126.94	109.33	Open To Flow (2)
90	333.41	116.35	Shut-In(2)
180	1193.10	113.86	End Shut-In(2)
183	1734.84	112.94	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	MUD 100%	0.05
555.00	MW 90%W, 10%M	6.77
145.00	GO & WCM 5%G, 10%O, 35%W, 50%M	2.03
10.00	MCO 60%O, 40%M	0.14

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare

Ottley 8-15

202 W. Main St
Salen II
62881

15-14-32/Logan

Job Ticket: 41788

DST#: 1

ATTN: Tim Priest

Test Start: 2011.03.01 @ 09:53:13

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

70000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.98 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 1500.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
10.00	MUD 100%	0.049
555.00	MW 90%W, 10%M	6.774
145.00	GO & WCM 5%G, 10%O, 35%W, 50%M	2.034
10.00	MCO 60%O, 40%M	0.140

Total Length: 720.00 ft

Total Volume: 8.997 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

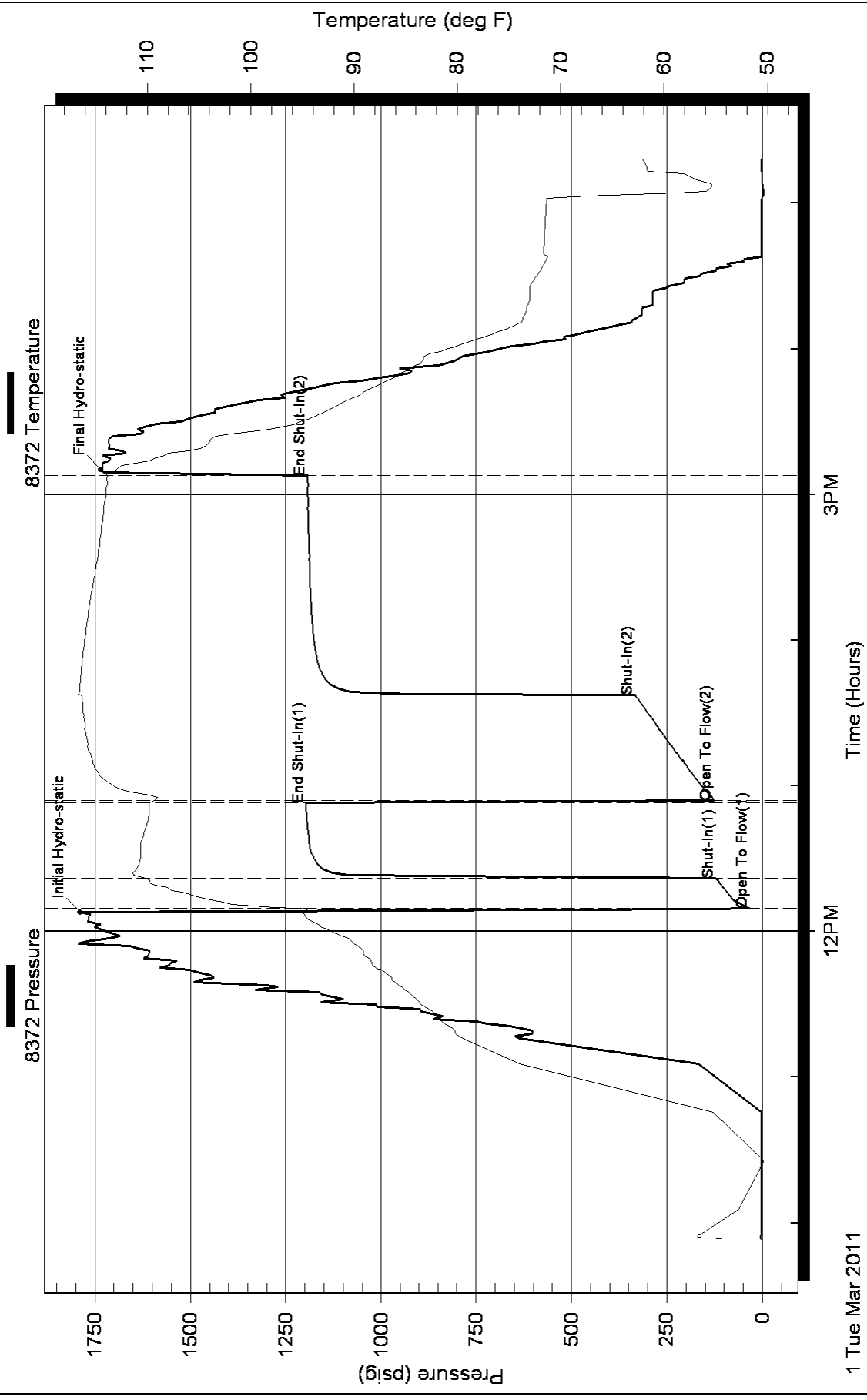
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare
202 W. Main St
Salen II
62881
ATTN: Tim Priest

Ottley 8-15
15-14-32/Logan
Job Ticket: 41789 **DST#: 2**
Test Start: 2011.03.02 @ 03:25:58

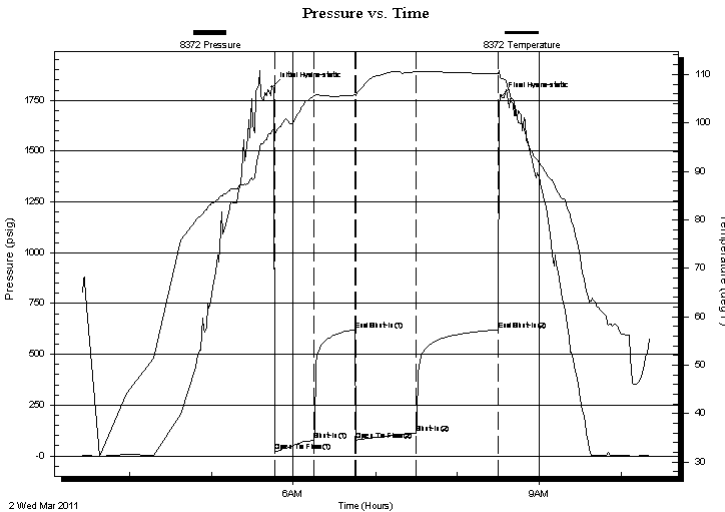
GENERAL INFORMATION:

Formation: **LKC "B"**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 05:46:27
Time Test Ended: 10:20:27
Interval: **3794.00 ft (KB) To 3817.00 ft (KB) (TVD)**
Total Depth: 3817.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2777.00 ft (KB)
2767.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 8372 Inside
Press @ Run Depth: 113.21 psig @ 3799.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.03.02 End Date: 2011.03.02 Last Calib.: 2011.03.02
Start Time: 03:25:58 End Time: 10:20:27 Time On Btm: 2011.03.02 @ 05:44:57
Time Off Btm: 2011.03.02 @ 08:31:57

TEST COMMENT: IFP - weak to good blow 1/4" - 7"
ISI - no blow back
FFP - weak to good blow sur - 7 1/2"
FSI - sur blow back - died 17 min

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1816.55	98.57	Initial Hydro-static
2	20.71	97.93	Open To Flow (1)
30	75.53	105.61	Shut-In(1)
60	621.12	105.75	End Shut-In(1)
61	78.90	105.53	Open To Flow (2)
105	113.21	110.63	Shut-In(2)
165	620.90	110.17	End Shut-In(2)
167	1770.62	109.24	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
218.00	MW 90%W, 10%M	1.96
2.00	FREE OIL 95%O, 5%M	0.03

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare

Ottley 8-15

202 W. Main St
Salen II
62881

15-14-32/Logan

Job Ticket: 41789

DST#: 2

ATTN: Tim Priest

Test Start: 2011.03.02 @ 03:25:58

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

34 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

60000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.96 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 1500.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
218.00	MW 90%W, 10%M	1.956
2.00	FREE OIL 95%O, 5%M	0.028

Total Length: 220.00 ft

Total Volume: 1.984 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

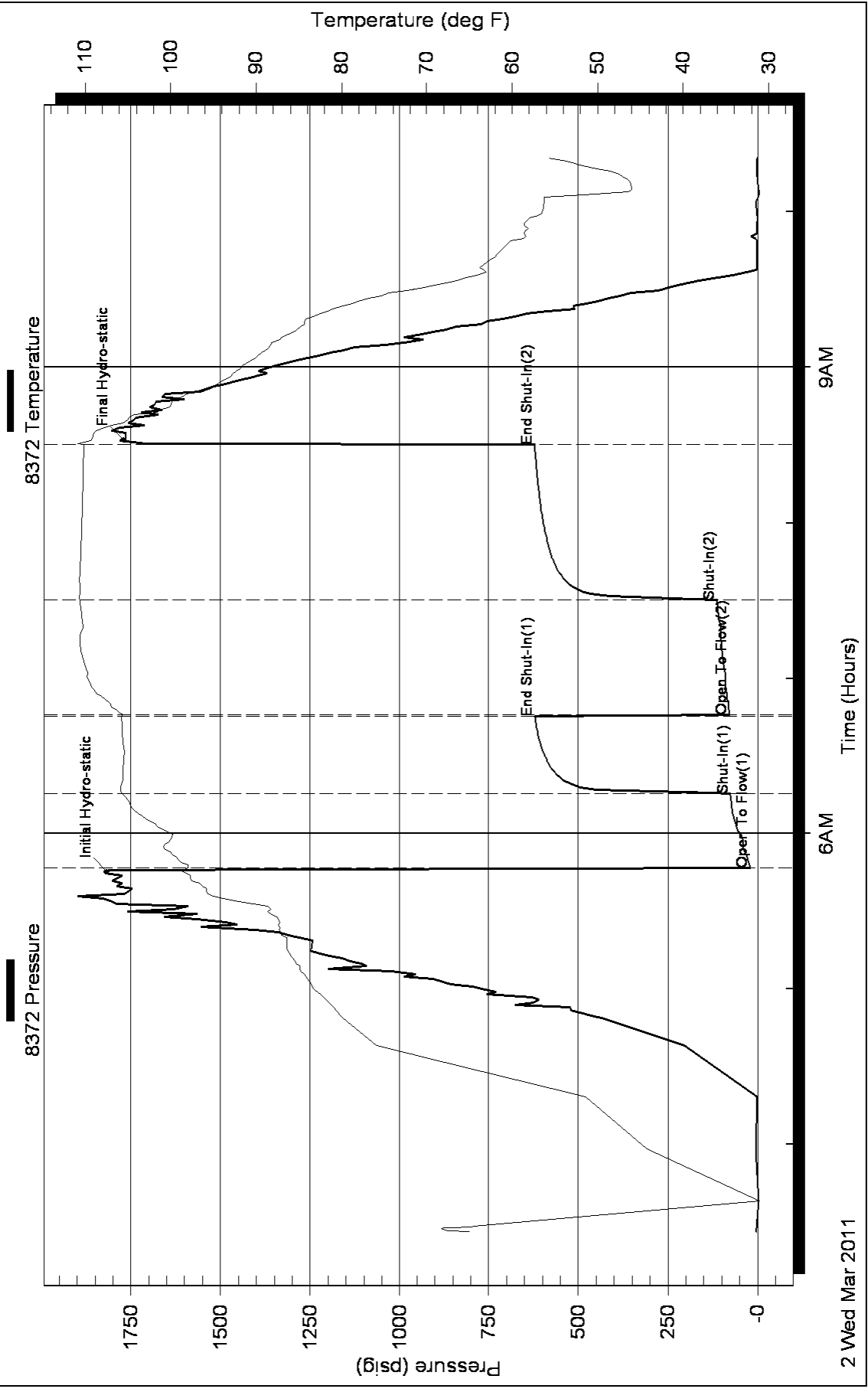
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare
202 W. Main St
Salen Il
62881
ATTN: Tim Priest

Ottley 8-15
15-14-32/Logan
Job Ticket: 41790 **DST#: 3**
Test Start: 2011.03.02 @ 19:57:12

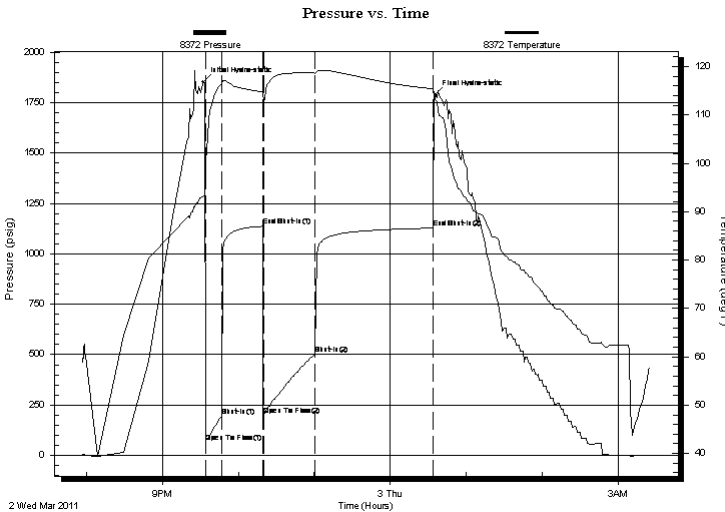
GENERAL INFORMATION:

Formation: **LKC "D"**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 21:34:11
Time Test Ended: 03:25:11
Interval: **3841.00 ft (KB) To 3860.00 ft (KB) (TVD)**
Total Depth: 3860.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2777.00 ft (KB)
2767.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 8372 Inside
Press @ Run Depth: 504.61 psig @ 3842.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.03.02 End Date: 2011.03.03 Last Calib.: 2011.03.03
Start Time: 19:57:12 End Time: 03:25:11 Time On Btm: 2011.03.02 @ 21:32:41
Time Off Btm: 2011.03.03 @ 00:35:41

TEST COMMENT: IFP - BOB 2 min
ISI - BOB 8 min
FFP - BOB 2 min
FSI - BOB 13 min - died 47 min

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1851.97	93.31	Initial Hydro-static
2	65.11	96.65	Open To Flow (1)
14	193.23	116.37	Shut-In(1)
47	1136.14	114.72	End Shut-In(1)
48	201.12	113.34	Open To Flow (2)
88	504.61	118.64	Shut-In(2)
181	1127.07	115.39	End Shut-In(2)
183	1788.14	113.24	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
160.00	GW & OCM 25%G, 5%O, 5%W, 65%M	1.14
100.00	GW & MCO 50%G, 40%O, 5%W, 5%M	1.40
1115.00	FREE OIL 95%O, 5%M	15.64
0.00	825' GIP	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare

Ottley 8-15

202 W. Main St
Salen II
62881

15-14-32/Logan

Job Ticket: 41790

DST#: 3

ATTN: Tim Priest

Test Start: 2011.03.02 @ 19:57:12

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

38 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

43000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.19 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
160.00	GW & OCM 25%G, 5%O, 5%W, 65%M	1.142
100.00	GW & MCO 50%G, 40%O, 5%W, 5%M	1.403
1115.00	FREE OIL 95%O, 5%M	15.641
0.00	825' GIP	0.000

Total Length: 1375.00 ft

Total Volume: 18.186 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

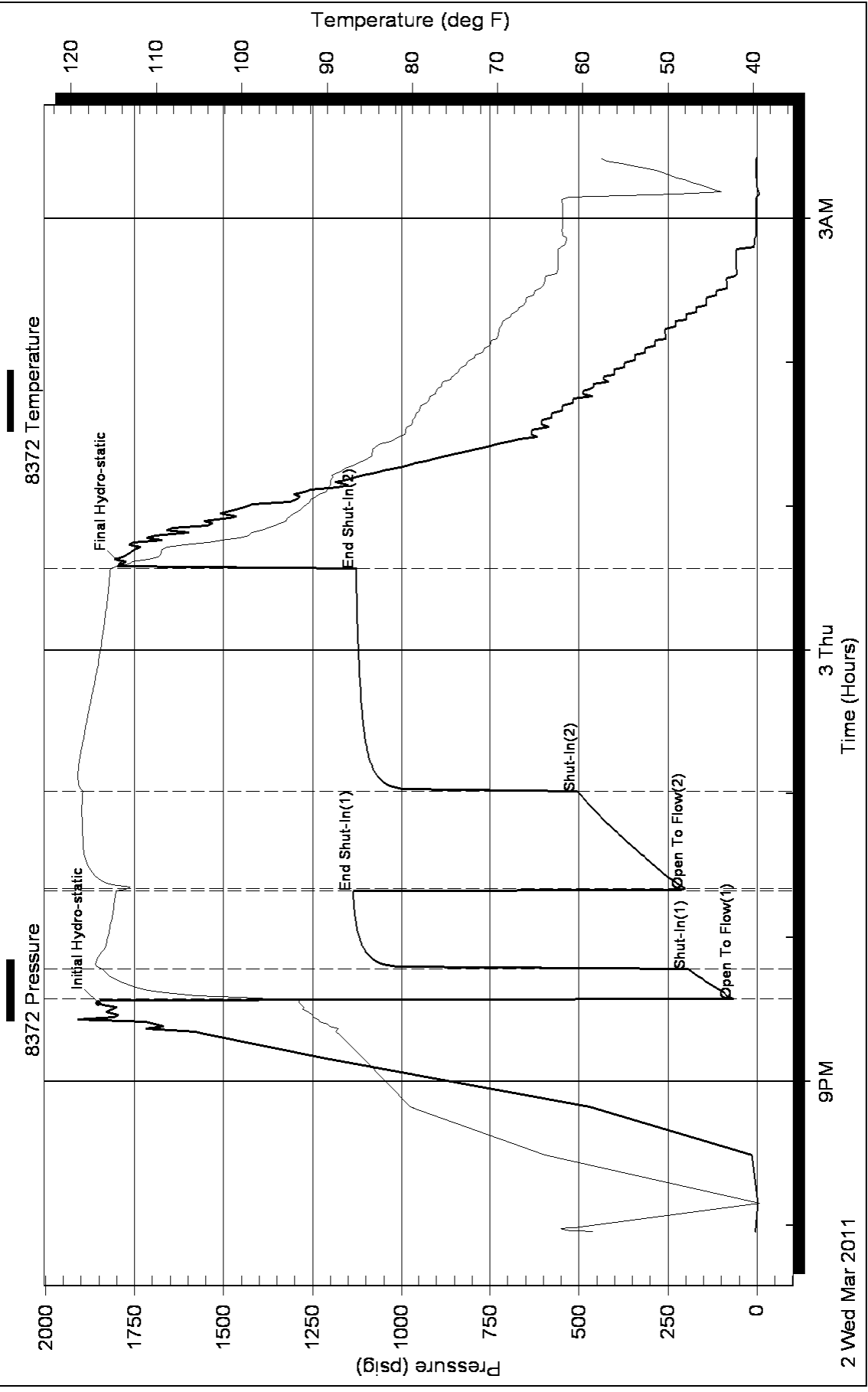
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare
202 W. Main St
Salen II
62881
ATTN: Tim Priest

Ottley 8-15
15-14-32/Logan
Job Ticket: 41791 **DST#: 4**
Test Start: 2011.03.03 @ 20:30:40

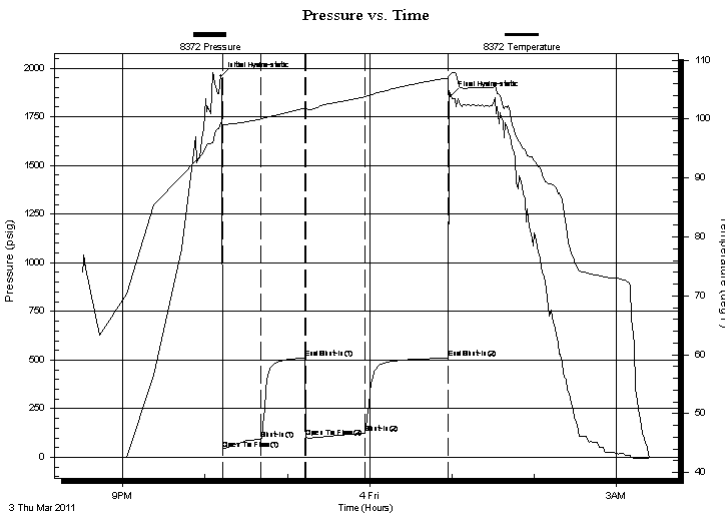
GENERAL INFORMATION:

Formation: **LKC "H-I"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 22:12:39
 Time Test Ended: 03:24:09
 Interval: **3927.00 ft (KB) To 3992.00 ft (KB) (TVD)**
 Total Depth: 3992.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition:
 Test Type: Conventional Bottom Hole
 Tester: Brian Fairbank
 Unit No: 41
 Reference Elevations: 2777.00 ft (KB)
 2767.00 ft (CF)
 KB to GR/CF: 10.00 ft

Serial #: 8372 Inside
 Press @ Run Depth: 124.74 psig @ 3932.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.03.03 End Date: 2011.03.04 Last Calib.: 2011.03.04
 Start Time: 20:30:40 End Time: 03:24:09 Time On Btm: 2011.03.03 @ 22:11:39
 Time Off Btm: 2011.03.04 @ 00:59:09

TEST COMMENT: IFP - BOB 27 min
 ISI - sur blow back - died 19 min
 FFP - BOB 24 min
 FSI - 1" blow back throughout

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1957.99	99.44	Initial Hydro-static
1	41.93	98.72	Open To Flow (1)
29	93.42	99.99	Shut-In(1)
61	510.55	101.84	End Shut-In(1)
62	100.82	101.73	Open To Flow (2)
105	124.74	103.77	Shut-In(2)
166	509.58	106.98	End Shut-In(2)
168	1858.06	107.76	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	SGO & WCM 15%G, 10%O, 15%W, 60%M	10.59
75.00	GOCM 5%G, 20%O, 75%M	1.04
20.00	FREE OIL 95%O, 5%M	0.28
0.00	120' GIP	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare

Ottley 8-15

202 W. Main St
Salen II
62881

15-14-32/Logan

Job Ticket: 41791

DST#: 4

ATTN: Tim Priest

Test Start: 2011.03.03 @ 20:30:40

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

38 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

48000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbf

Water Loss: 7.98 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2700.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
120.00	SGO & WCM 15%G, 10%O, 15%W, 60%M	0.590
75.00	GOCM 5%G, 20%O, 75%M	1.043
20.00	FREE OIL 95%O, 5%M	0.281
0.00	120' GIP	0.000

Total Length: 215.00 ft

Total Volume: 1.914 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

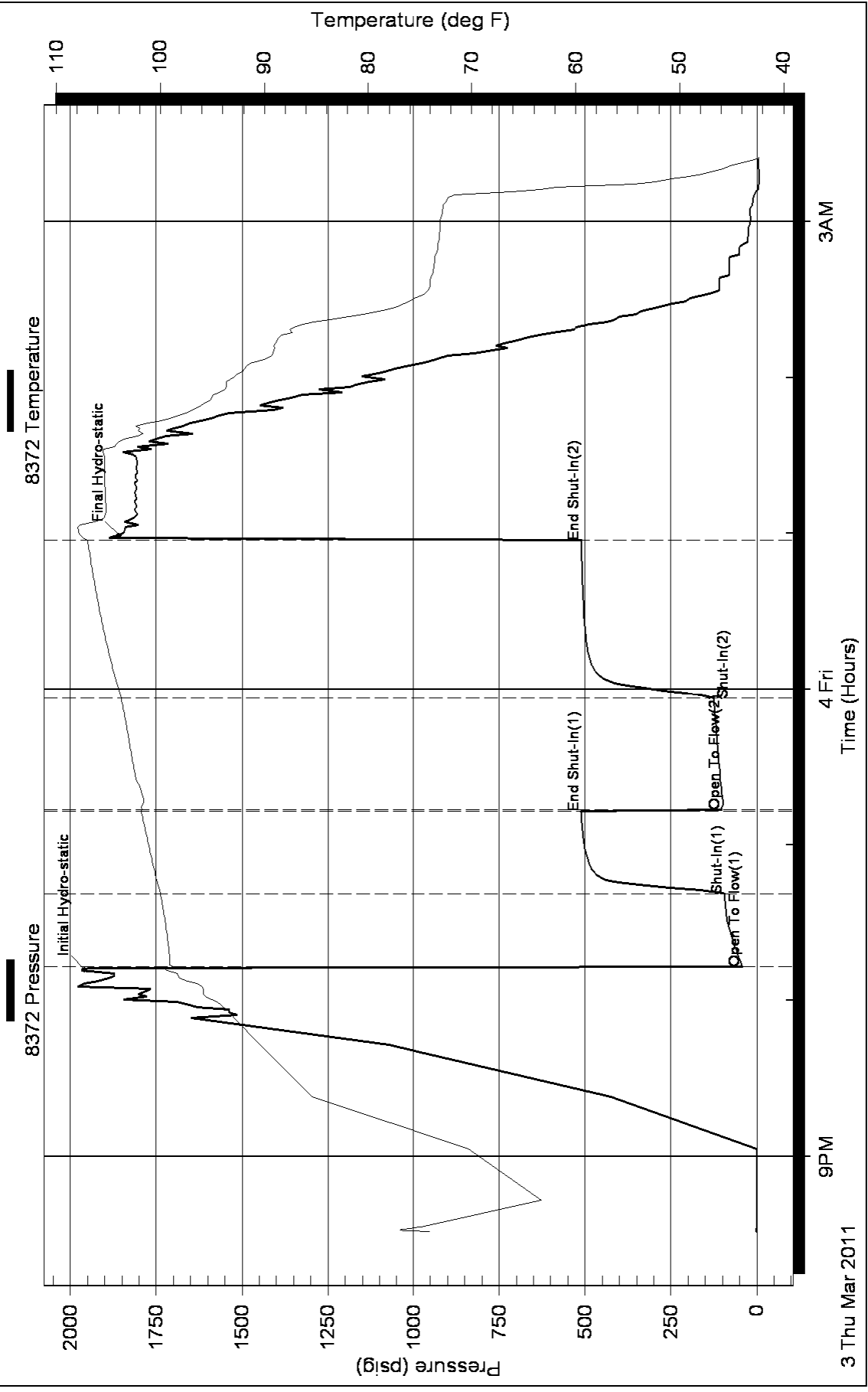
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

Shakespeare
202 W. Main St
Salen II
62881
ATTN: Tim Priest

Ottley 8-15
15-14-32/Logan
Job Ticket: 41792 **DST#: 5**
Test Start: 2011.03.04 @ 11:09:41

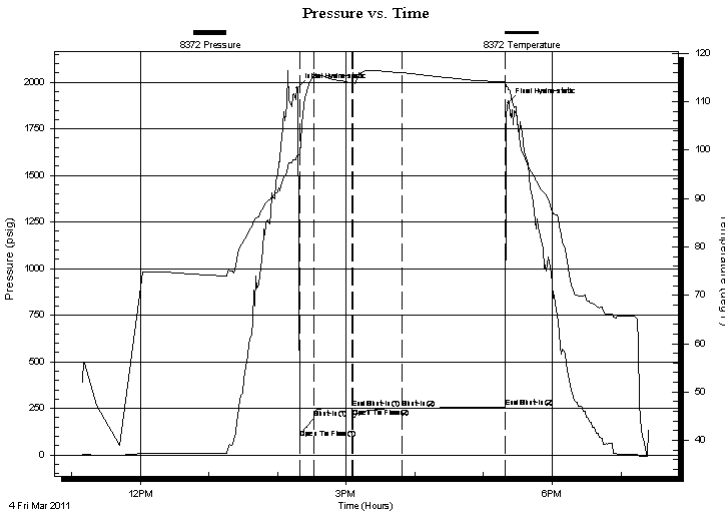
GENERAL INFORMATION:

Formation: **LKC "J"**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 14:19:10
Time Test Ended: 19:25:40
Interval: **3991.00 ft (KB) To 4020.00 ft (KB) (TVD)**
Total Depth: 4020.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches Hole Condition:
Test Type: Conventional Bottom Hole
Tester: Brian Fairbank
Unit No: 41
Reference Elevations: 2777.00 ft (KB)
2767.00 ft (CF)
KB to GR/CF: 10.00 ft

Serial #: 8372 Inside
Press @ Run Depth: 252.66 psig @ 3992.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.03.04 End Date: 2011.03.04 Last Calib.: 2011.03.04
Start Time: 11:09:41 End Time: 19:25:40 Time On Btm: 2011.03.04 @ 14:17:40
Time Off Btm: 2011.03.04 @ 17:21:40

TEST COMMENT: IFP - BOB 1 1/2 min
ISI - BOB 6 min
FFP - BOB 4 min
FSI - BOB 37 min

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1970.28	98.94	Initial Hydro-static
2	92.06	98.74	Open To Flow (1)
15	196.06	115.31	Shut-In(1)
48	252.45	113.92	End Shut-In(1)
48	204.38	113.87	Open To Flow (2)
91	252.66	116.03	Shut-In(2)
182	254.95	114.09	End Shut-In(2)
184	1890.60	112.62	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
125.00	GOCM 75%G, 15%O, 10%M	0.65
215.00	GMCO 10%G, 75%O, 15%M	3.02
325.00	FREE OIL 95%O, 5%M	4.56
0.00	975' GIP	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Shakespeare

Ottley 8-15

202 W. Main St
Salen II
62881

15-14-32/Logan

Job Ticket: 41792

DST#: 5

ATTN: Tim Priest

Test Start: 2011.03.04 @ 11:09:41

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

38 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

ppm

Viscosity: 62.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.58 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
125.00	GOCM 75%G, 15%O, 10%M	0.651
215.00	GMCO 10%G, 75%O, 15%M	3.016
325.00	FREE OIL 95%O, 5%M	4.559
0.00	975' GIP	0.000

Total Length: 665.00 ft

Total Volume: 8.226 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

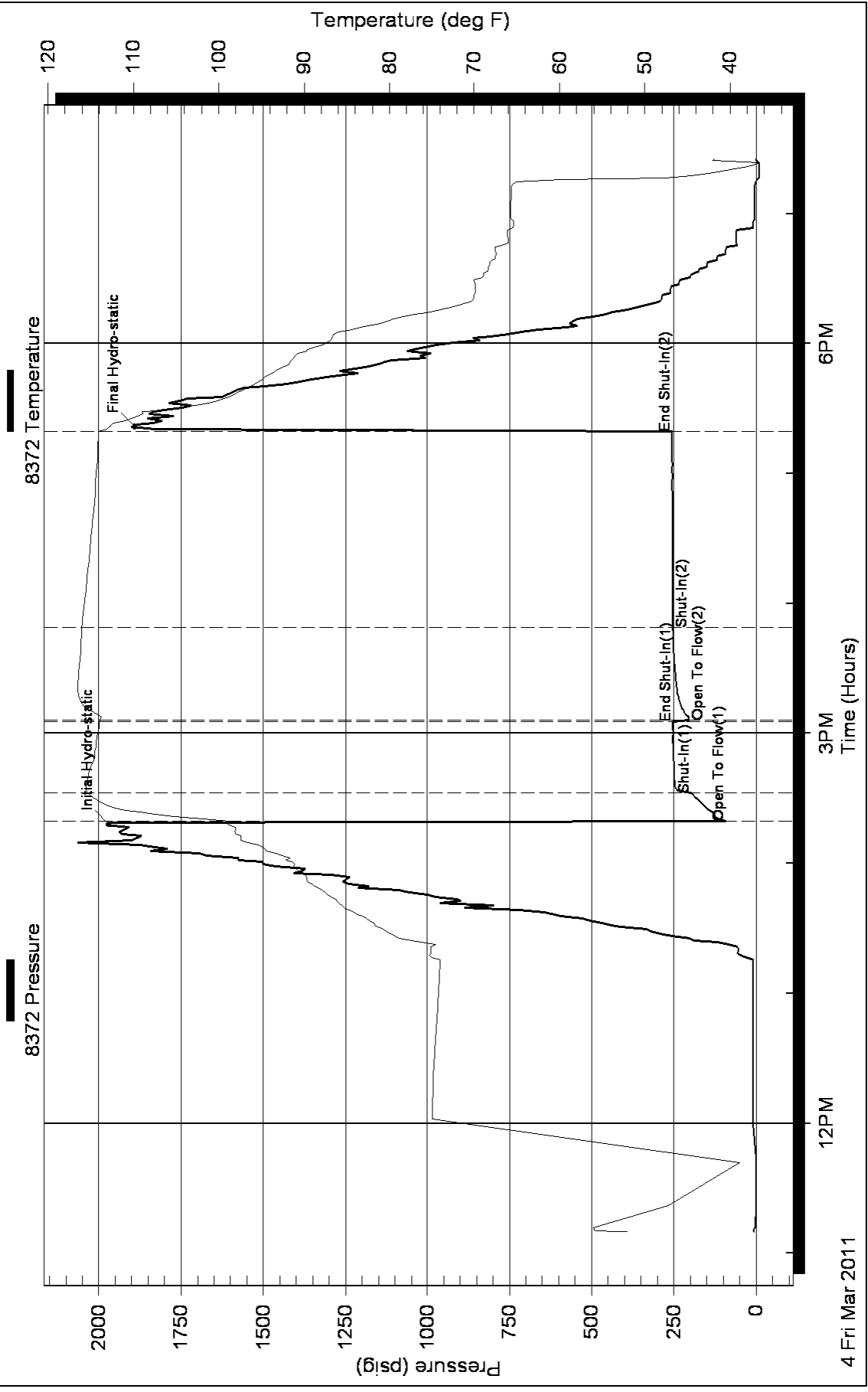
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

Pressure vs. Time





24 S. Lincoln Street
P.O. Box 31
Russell, KS 67665-2906

Voice: (785) 483-3887
Fax: (785) 483-5566

INVOICE

Invoice Number: 126483
Invoice Date: Mar 11, 2011
Page: 1

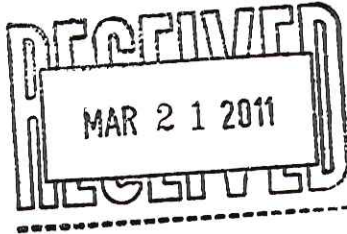
Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

Federal Tax I.D.#: 20-5975804

file copy

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Shak	Ottley #8-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-04	Oakley	Mar 11, 2011	4/10/11

Quantity	Item	Description	Unit Price	Amount
221.00	MAT	Class A Common	15.45	3,414.45
119.00	MAT	Pozmix	8.00	952.00
24.00	MAT	Gel	20.80	499.20
85.00	MAT	Flo Seal	2.50	212.50
468.00	SER	Handling	2.40	1,123.20
20.00	SER	Mileage 468 sx @ .10 per sk per mi	46.80	936.00
1.00	SER	Port Collar	1,185.00	1,185.00
20.00	SER	Pump Truck Mileage	7.00	140.00



Subtotal	8,462.35
Sales Tax	370.70
Total Invoice Amount	8,833.05
Payment/Credit Applied	
TOTAL	8,833.05

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 1692.47

ONLY IF PAID ON OR BEFORE
Apr 5, 2011



24 S. Lincoln Street
P.O. Box 31
Russell, KS 67665-2906

Voice: (785) 483-3887
Fax: (785) 483-5566

INVOICE

Invoice Number: 126482
Invoice Date: Mar 7, 2011
Page: 1

Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

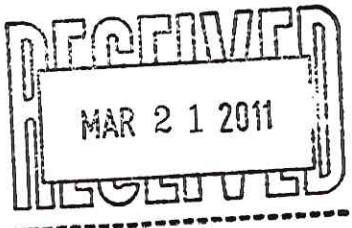
Federal Tax I.D.#: 20-5975804

file

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Shak	Ottley #8-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Mar 7, 2011	4/6/11

Quantity	Item	Description	Unit Price	Amount
4.00	MAT	Gel	20.80	83.20
225.00	MAT	ASC Class A	18.60	4,185.00
1,125.00	MAT	Gilsonite	0.89	1,001.25
56.00	MAT	Flo Seal	2.50	140.00
158.00	MAT	CD-31	9.35	1,477.30
500.00	MAT	WFR-2	1.27	635.00
258.00	SER	Handling	2.40	619.20
20.00	SER	Mileage 258 sx @ .10 per sk per mi	25.80	516.00
1.00	SER	Production Casing	2,185.00	2,185.00
20.00	SER	Pump Truck Mileage	7.00	140.00

INT



ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 2196.39

ONLY IF PAID ON OR BEFORE
Apr 1, 2011

Subtotal	10,981.95
Sales Tax	549.09
Total Invoice Amount	11,531.04
Payment/Credit Applied	
TOTAL	11,531.04

DW

ALLIED CEMENTING CO., LLC. 041015

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Oakley

DATE <u>3-2-11</u>	SEC. <u>15</u>	TWP. <u>14</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION	JOB START <u>8:00am</u>	JOB FINISH <u>8:30am</u>
LEASE <u>Oakley</u>	WELL # <u>8-15</u>	LOCATION <u>Oakley 185 Winto</u>			COUNTY <u>Logan</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR H D Drilling Rig 2
 TYPE OF JOB Production
 HOLE SIZE 2 7/8 T.D. 4500
 CASING SIZE 5 1/2 DEPTH 4500.24
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL Port collar DEPTH 2241'
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 42.45
 CEMENT LEFT IN CSG. 42.45
 PERFS.
 DISPLACEMENT 106.10

OWNER same
 CEMENT
 AMOUNT ORDERED 225 sks ASC
5# Gilsonite 20gal 4# Flo-seal
30# 1/2 CD-31 500gal WFR-2
 COMMON @
 POZMIX @
 GEL 4 sks @ 20.80 83.20
 CHLORIDE @
 ASC 225 sks @ 18.60 4185.00
 @
Gilsonite 1125# @ .89 1001.25
 @
Flo-seal 30# @ 2.50 140.00
 @
CD-31 158# @ 9.35 1477.30
 @
WFR-2 500gal @ 1.27 635.00
 HANDLING 258 sks @ 2.40 619.20
 MILEAGE 10# sk/mile 516.00
 TOTAL 8656.95

EQUIPMENT

PUMP TRUCK CEMENTER Andrew Danny
 # 431 HELPER Darrin
 BULK TRUCK
 # 404 DRIVER Earl
 BULK TRUCK
 # DRIVER

REMARKS:

Pump 500gal water 500gal WFR-2
15 BBC water. mix 30 sks R H
start mixing asc down 5 1/2 casing
wash pump and lines clean
Release plug displace plug
800# E.F.T. land plug
1500# plug landed float
held.
 thank you

SERVICE

DEPTH OF JOB 4500.24
 PUMP TRUCK CHARGE 218.00
 EXTRA FOOTAGE @
 MILEAGE 20 miles @ 7.00 140.00
 MANIFOLD @
 @
 @
 TOTAL 2325.00

CHARGE TO: Shakespeare
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

@ _____
 @ _____
 @ _____
 @ _____
 @ _____
 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 _____ IF PAID IN 30 DAYS

PRINTED NAME Doug Roberts
 SIGNATURE Doug Roberts



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 126310
 Invoice Date: Feb 24, 2011
 Page: 1

Voice: (785) 483-3887
 Fax: (785) 483-5566

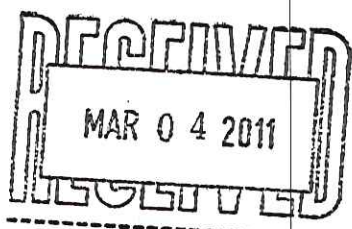
Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

Federal Tax I.D.#: 20-5975804

file INT

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Shak	Ottley #8-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Feb 24, 2011	3/26/11

Quantity	Item	Description	Unit Price	Amount
175.00	MAT	Class A Common	15.45	2,703.75
3.00	MAT	Gel	20.80	62.40
6.00	MAT	Chloride	58.20	349.20
184.00	SER	Handling	2.40	441.60
20.00	SER	Mileage 184 sx @.10 per sk per mi	18.40	368.00
1.00	SER	Surface	1,018.00	1,018.00
20.00	SER	Pump Truck Mileage	7.00	140.00



Subtotal	5,082.95
Sales Tax	227.42
Total Invoice Amount	5,310.37
Payment/Credit Applied	
TOTAL	5,310.37

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 1016 59

ONLY IF PAID ON OR BEFORE
Mar 21, 2011

DW

ALLIED CEMENTING CO., LLC. 041008

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:

Oakley
2-25-11

DATE <i>2-24-11</i>	SEC. <i>15</i>	TWP. <i>14</i>	RANGE <i>32</i>	CALLED OUT	ON LOCATION	JOB START <i>2:00 AM</i>	JOB FINISH <i>2:30 AM</i>
LEASE <i>Ottley</i>		WELL # <i>8-15</i>	LOCATION <i>Oakley 18.5 winto</i>		COUNTY <i>Logan</i>	STATE <i>KS</i>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR *HD Drilling Rig 2*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *228'*

CASING SIZE *8 3/8* DEPTH *228'*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. *15*

PERFS.

DISPLACEMENT *13.56 BBL*

OWNER *same*

CEMENT

AMOUNT ORDERED *175 sks com*
3% gel 2% gel

COMMON <i>175 sks</i>	@	<i>15.45</i>	<i>2703.75</i>
POZMIX	@		
GEL <i>3 sks</i>	@	<i>20.80</i>	<i>62.40</i>
CHLORIDE <i>6 sks</i>	@	<i>58.20</i>	<i>349.20</i>
ASC	@		
	@		
	@		
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING <i>184 sks</i>	@	<i>2.40</i>	<i>441.60</i>
MILEAGE <i>104.56/mile</i>			<i>368.00</i>
			TOTAL <i>3924.95</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Andrew*

423-281 HELPER *Larene*

BULK TRUCK

404 DRIVER *Darrin*

BULK TRUCK

DRIVER

REMARKS:

Cement did circulate

Thank you

CHARGE TO: *Shakespeare*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB *228'*

PUMP TRUCK CHARGE *1018.00*

EXTRA FOOTAGE @

MILEAGE *20 miles* @ *7.00* *140.00*

MANIFOLD @

TOTAL *1158.00*

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
			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 _____ IF PAID IN 30 DAYS

PRINTED NAME *Day Roberts*

SIGNATURE *Day Robert*

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/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

April 11, 2011

Donald R. Williams
Shakespeare Oil Co., Inc.
202 W MAIN ST
SALEM, IL 62881-1519

Re: ACO1
API 15-109-20979-00-00
Ottley 8-15
NW/4 Sec.15-14S-32W
Logan 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,
Donald R. Williams