



KANSAS CORPORATION COMMISSION 1061677
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: _____



1061677

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
<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
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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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Form	ACO1 - Well Completion
Operator	Mull Drilling Company, Inc.
Well Name	Cletus 1-1
Doc ID	1061677

Tops

Name	Top	Datum
Anhydrite	1694	+ 684
B/Anhydrite	1728	+ 650
Heebner Shale	3776	- 1398
Lansing	3816	- 1438
B/KC	4080	- 1702
Pawnee	4200	- 1822
Ft. Scott	4291	- 1913
Cherokee Shale	4312	- 1934
Cherokee Sand	4316	- 1938
Mississippian	4420	- 2042

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 17, 2011

Mark Shreve
Mull Drilling Company, Inc.
1700 N WATERFRONT PKWY
BLDG 1200
WICHITA, KS 67206

Re: ACO1
API 15-135-25230-00-00
Cletus 1-1
SW/4 Sec.01-17S-23W
Ness 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 Shreve

ALLIED CEMENTING CO., LLC.

Federal Tax I.D.# 20-5975804 038746

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

SERVICE POINT:

Coast Road #25

DATE <u>5-12-11</u>	SEC <u>1</u>	TWP. <u>17S</u>	RANGE <u>23E5</u>	LOCATED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <u>Clertus</u>	WELL # <u>1-1</u>	LOCATION <u>Ransom ks 4 + 283 East 3 south</u>				<u>615 pm</u>	<u>645 pm</u>
OLD OR NEW (Circle one)		<u>to 2302 4th East Northgate</u>				COUNTY <u>Neos</u>	STATE <u>KS</u>

OWNER Mall drilling

CONTRACTOR WYS Drilling #10
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 TD. 225
 CASING SIZE 8 5/8 TWT 225 DEPTH 225
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 225
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15 feet
 PERFS. _____
 DISPLACEMENT Feedwater 13,576 lbs
 EQUIPMENT _____

PUMP TRUCK CEMENTER Bobbi Collier
 # 224 HELPER Andy Ellis
 BULK TRUCK # 344-170 DRIVER Thrust H / Lengsi
 BULK TRUCK # _____ DRIVER _____

REMARKS:

Break circulation with cgs mud
Ran 5 bbls feedwater ahead min. losses
Class # 370 cc 280 gal. at 24.8 vts under
cement and circulation
Displace with 13,576 lbs water
slump M

CHARGE TO: WVU Drilling
 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 A. M. Miller
 SIGNATURE [Signature]

COMMON <u>160</u>	@ <u>16.25</u>	<u>2600.00</u>
POZMIX _____	@ _____	_____
GEL <u>3</u>	@ <u>21.25</u>	<u>63.75</u>
CHLORIDE <u>G</u>	@ <u>54.20</u>	<u>319.20</u>
ASC _____	@ _____	_____
HANDLING <u>169</u>	@ <u>2.25</u>	<u>380.25</u>
MILEAGE <u>169 x 10 x .M</u>	@ _____	<u>185.00</u>
TOTAL		<u>3579.00</u>

DEPTH OF JOB <u>225</u>	@ _____	_____
PUMP TRUCK CHARGE _____	@ _____	<u>1125.00</u>
EXTRA FOOTAGE _____	@ _____	_____
MILEAGE <u>20</u>	@ <u>7.00</u>	<u>140.00</u>
MANIFOLD _____	@ _____	_____
<u>High T-ray 20</u>	@ <u>4.00</u>	<u>80.00</u>
TOTAL		<u>1345.00</u>

PLUG & FLOAT EQUIPMENT

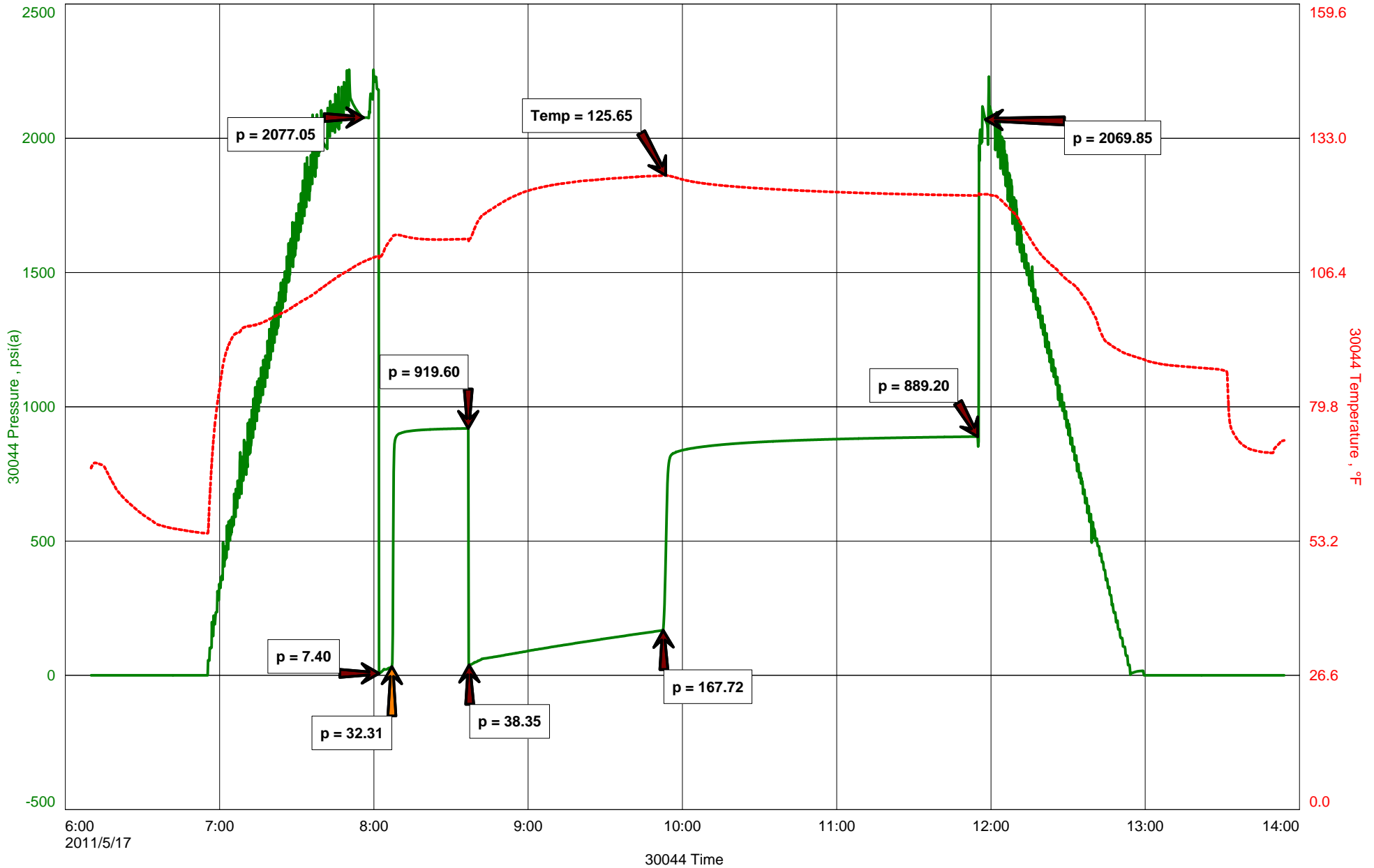
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
TOTAL		_____

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

MULL DRLG CO. INC.
DST#1 4319-4330 CHER 'A' SAND
Start Test Date: 2011/04/17
Final Test Date: 2011/04/17

CLETUS #1-1 DST#1
Formation: DST#1 4319-4330 CHER 'A' SAND
Pool: WILDCAT
Job Number: M161

CLETUS #1-1 DST#1



DIAMOND TESTING

Pressure Survey Report

General Information

Company Name	MULL DRLG CO. INC.	Job Number	M161
Well Name	CLETUS #1-1 DST#1	Representative	MIKE COCHRAN
Unique Well ID	DST#1 4319-4330 CHER 'A' SAND	Well Operator	MULL DRLG CO. INC.
Surface Location	SEC.1-17S-23W NESS CO. KS.	Report Date	2011/04/17
Field	WILDCAT	Prepared By	MIKE COCHRAN
Well Type	Vertical	Qualified By	MAC ARMSTRONG
		Test Unit	NO. 1

Test Information

Test Type	CONVENTIONAL		
Formation	DST#1 4319-4330 CHER 'A' SAND		
Test Purpose (AEUB)	Initial Test		
Start Test Date	2011/04/17	Start Test Time	06:10:00
Final Test Date	2011/04/17	Final Test Time	13:55:00
		Well Fluid Type	01 Oil
Gauge Name	30044		
Gauge Serial Number			

Test Results

Remarks

RECOVERED:
527' MW, 93% WTR, 7% MUD
123' GMW 2% GAS, 91% WTR, 7% MUD
650' TOTAL FLUID

CHLOR: 44,000 PPM
PH:7.0
RW: .18 @ 76 DEG

TOOL SAMPLE: 100% WTR



DIAMOND TESTING
P.O. Box 157
HOISINGTON, KANSAS 67544
(800) 542-7313
DRILL-STEM TEST TICKET
FILE: _____

TIME ON: _____
TIME OFF: _____

Company _____ Lease & Well No. _____
Contractor _____ Charge to _____
Elevation _____ Formation _____ Effective Pay _____ Ft. Ticket No. _____
Date _____ Sec. _____ Twp. _____ S Range _____ W County _____ State **KANSAS**
Test Approved By _____ Diamond Representative _____

Formation Test No. _____ Interval Tested from _____ ft. to _____ ft. Total Depth _____ ft.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 in.
Packer Depth _____ ft. Size 6 3/4 in. Packer depth _____ ft. Size 6 3/4 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 STERLING 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 _____	Price Job Other Charges Insurance Total
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Recovered _____ ft. of _____	
Remarks: _____	

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.

BLACKLINE ARMRSTRONG

Geologist

316-440-8888 Cell
316-285-1879 Office

COMPANY MULL DRILLING COMPANY
WELL CLETUS NO. 1-1
FIELD WILDGAT
COUNTY NESS STATE KANSAS

LOCATION: 1479 FSL and 1826 FWL
TWP 17S RNG 23W
CORNER 4 S 1/4 S 1/4
SEC 1
RECORDED: KB 2873
DF
CL 2378

Drilling Time 3600-70
Daily Penetration Rate 47.79 ft/day
5-12-11 MRA 590
5-14-11 2580 DRILLING
5-15-11 3444 DRILLING
5-16-11 4080 DRILLING
5-17-11 4330 DST NO. 1
5-18-11 4500
5-19-11 4500 P & A

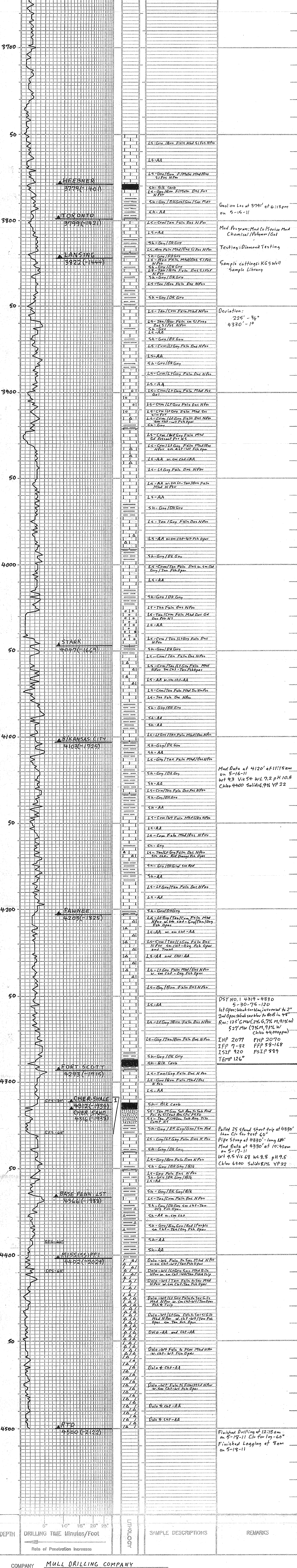
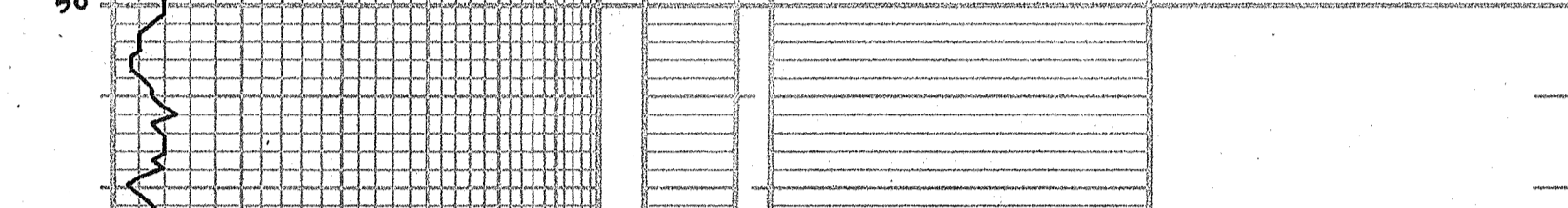
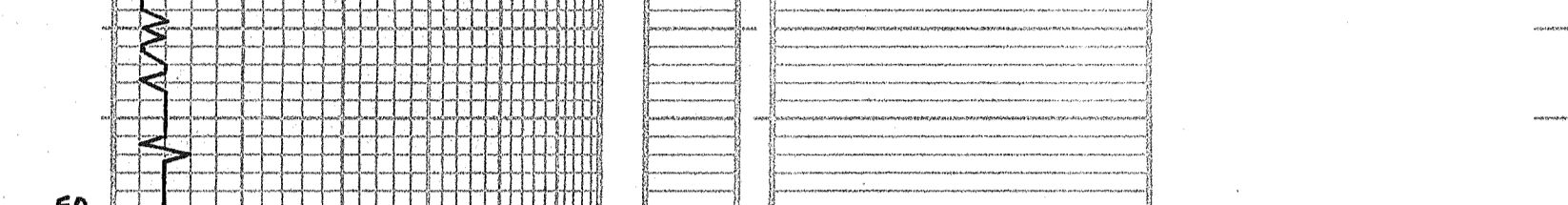
Formation	Sample	Log	Datum	Formation	Sample	Log	Datum
ANHYDRITE	1697	1695	+633				
G/ANHYDRITE	1732	1728	+650				
HEEBNER	3779	3776	-1398				
TORONTO	3799	3797	-1419				
LANSING	3822	3821	-1443				
STARK	4047	4049	-1670				
B/KANSAS CITY	4103	4103	-1725				
PAWNEE	4203	4201	-1823				
FORT SCOTT	4293	4292	-1914				
CHEAQUEE SHALE	4312	4312	-1934				
CHEAQUEE SAND	4316	4314	-1936				
BASE PENN LST	4366	4366	-1988				
MISSISSIPPI	4402	4401	-2023				
TOTAL DEPTH	4500	4502	-2124				

Remarks	Make & Type	Serial No.	Masses	Depth In	Depth Out	Hours
REMARKS DUE TO THE LOW STRUCTURAL POSITION, THE DRILL STEM TEST RESULTS, AND THE E-LOG CALCULATION IT WAS DECIDED TO PLUG THIS TEST WELL.	7/4" SMITH RR	PG7259	14-14-15	0	220	5
	7/4" SMITH F27	F59311	14-14-15	220	4500	92 3/4

Respectfully submitted, Madeline M. Armstrong

Formation	Sample	Log	Datum	Formation	Sample	Log	Datum
ANHYDRITE	1697	1695	+633				
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MISSISSIPPI	4402	4401	-2023				
TOTAL DEPTH	4500	4502	-2124				

Structural Position to: CHARTER PRODUCTION COMPANY
KISSINGER A NO. 1 C N 2 NW SW SEC 1 T 17 S R 23 W



DEPTH	DRILLING TIME Minutes/Foot	LITHOLOGY	SAMPLE DESCRIPTIONS	REMARKS
3600				
3700				
3800				
3900				
4000				
4100				
4200				
4300				
4400				
4500				

COMPANY MULL DRILLING COMPANY
LEASE CLETUS NO. 1-1
LOCATION 1479 FSL & 1826 FWL SEC 1 TWP 17S RNG 23W
COUNTY NESS STATE KANSAS
ELEVATION: 2378 KB