



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: _____



1064396

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> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Suzie 5
Doc ID	1064396

All Electric Logs Run

DUAL INDUCTION
NEUTRON DENSITY W/ PE
SONIC
MICRO

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Suzie 5
Doc ID	1064396

Tops

Name	Top	Datum
Heebner	3753	-2358
KC	4297	-2902
BKC	4527	-3132
Cher Sh	4666	-3271
Miss	4716	-3321
Viola	5083	-3688
Simp sh	5181	-3786
Arb	5370	-3975
LTD	5396	-4001



PO BOX 31 Russell, KS 67665

RECEIVED

JUL 02 2011

INVOICE

Invoice Number: 127650

Invoice Date: Jun 22, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:

Lotus Operating Co., LLC
Lotus Exploration Co.
100 S. Main, STE 420
Wichita, KS 67202

Federal Tax I.D.#: 20-597880

RECEIVED
RECEIVED
JUL 02 2011
JUL 02 2011

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Suzie #5	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Jun 22, 2011	7/22/11

Quantity	Item	Description	Unit Price	Amount
135.00	MAT	Class A Common	16.25	2,193.75
90.00	MAT	Pozmix	8.50	765.00
4.00	MAT	Gel	21.25	85.00
8.00	MAT	Chloride	58.20	465.60
237.00	SER	Handling	2.25	533.25
15.00	SER	Mileage	26.07	391.05
1.00	SER	Surface	1,125.00	1,125.00
30.00	SER	Heavy Vehicle Mileage	7.00	210.00
30.00	SER	Light Vehicle Mileage	4.00	120.00
1.00	EQUIP OPER	Matt Thimesch		
1.00	EQUIP OPER	Jason Thimesch		
1.00	OPER ASSIST	Kevin Weighous		

ENTERED
JUL 06 2011

GL# 9208
DESC. CEMENT SURF CO
25
WELL # Suzie

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

\$ 1177.73

ONLY IF PAID ON OR BEFORE
Jul 17, 2011

Subtotal	5,888.65
Sales Tax	256.18
Total Invoice Amount	6,144.83
Payment/Credit Applied	
TOTAL	6,144.83

- 1,177.73
4,967.10

ALLIED CEMENTING CO., LLC. 040732

Federal Tax I.D.# 20-5975804

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

SERVICE POINT: North Lathrop

DATE <u>6-22-11</u>	SEC. <u>30</u>	TWP. <u>34S</u>	RANGE <u>11W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00am</u>	JOB FINISH <u>7:30am</u>
LEASE <u>Surf</u>		WELL # <u>5</u>		LOCATION <u>Rothensalbe Rd 1/2 mi. E, Minto</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)							

CONTRACTOR <u>Muerrich #106</u>	OWNER <u>Lotus Operating</u>
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>14 3/4"</u>	T.D. <u>266'</u>
CASING SIZE <u>10 3/4"</u>	DEPTH <u>256'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <u>300 psi</u>	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>20'</u>	
PERFS.	
DISPLACEMENT <u>24 bbls H₂O</u>	

CEMENT			
AMOUNT ORDERED <u>225 SK 60:40:2% gel + 3% cc</u>			
COMMON	<u>A</u>	<u>135 SK @ 16.25</u>	<u>2193.75</u>
POZMIX		<u>90 SK @ 8.50</u>	<u>765.00</u>
GEL		<u>4 SK @ 21.25</u>	<u>85.00</u>
CHLORIDE		<u>8 SK @ 58.20</u>	<u>465.60</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>237</u>	@ <u>2.25</u>	<u>533.25</u>
MILEAGE	<u>237/11/15</u>		<u>391.05</u>
			TOTAL <u>4433.65</u>

EQUIPMENT

PUMP TRUCK # <u>369265</u>	CEMENTER <u>Matt Thresh</u>
	HELPER <u>Jason Thresh</u>
BULK TRUCK # <u>364</u>	DRIVER <u>Wynn W (G.B.)</u>
BULK TRUCK #	DRIVER

REMARKS:
Bitum A/R mix 20.5% cement
esp 24 bbl H₂O surf
cemented 24 bbls

CHARGE TO: Lotus Operating

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 Bevil Farmer

SIGNATURE Bevil E. Farmer

SERVICE

DEPTH OF JOB <u>256'</u>	
PUMP TRUCK CHARGE <u>1125.00</u>	
EXTRA FOOTAGE @	
MILEAGE <u>30 @ 7.00</u>	<u>210.00</u>
MANIFOLD @	
<u>Repair Vehicle 30 @ 4.00</u>	<u>120.00</u>
	@
TOTAL <u>1455.00</u>	

PLUG & FLOAT EQUIPMENT

	@
<u>X</u>	@
	@
	@
	@
TOTAL _____	

SALES TAX (If Any) _____

TOTAL CHARGES 5888.65

DISCOUNT 20% IF PAID IN 30 DAYS

NET 4710.92



PO BOX 31 Russell, KS 67665

RECEIVED

JUL 14 2011

INVOICE

Invoice Number: 127767

Invoice Date: Jul 2, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:

Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Suzie #5	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Jul 2, 2011	8/1/11

Quantity	Item	Description	Unit Price	Amount
30.00	MAT	Class A Common	16.25	487.50
20.00	MAT	Pozmix	8.50	170.00
2.00	MAT	Gel	21.25	42.50
175.00	MAT	Class A Special Blend	19.00	3,325.00
875.00	MAT	Kolseal	0.89	778.75
82.00	MAT	FL-160	17.20	1,410.40
44.00	MAT	Flo Seal	2.70	118.80
281.00	SER	Handling	2.25	632.25
15.00	SER	Mileage	30.91	463.65
1.00	SER	Production	2,695.00	2,695.00
30.00	SER	Heavy Vehicle Mileage	7.00	210.00
1.00	SER	Manifold Head Rental	200.00	200.00
30.00	SER	Light Vehicle Mileage	4.00	120.00
1.00	EQP	5 1/2 Guide Shoe	240.00	240.00
1.00	EQP	5 1/2 AFU Insert	286.00	286.00
5.00	EQP	5 1/2 Centralizers	49.00	245.00
1.00	EQP	5 1/2 Basket	337.00	337.00
1.00	EQP	5 1/2 Rubber Plug	73.00	73.00
1.00	EQUIP OPER	Matt Thimesch		
1.00	EQUIP OPER	Ron Gilley		
1.00	OPER ASSIST	Dustin Elam		

ENTERED

JUL 18 2011

GL# 9308

DESC. cement prod

CSG, #5

WELL # SUSIE

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

\$ 2,366.97

ONLY IF PAID ON OR BEFORE

Jul 27, 2011

Subtotal	11,834.85
Sales Tax	548.52
Total Invoice Amount	12,383.37
Payment/Credit Applied	
TOTAL	12,383.37

- 2,366.97

10,016.40

ALLIED CEMENTING CO., LLC. 040739

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Med. Lab #1
07-03

DATE <u>7-2-11</u>	SEC <u>30</u>	TWP. <u>34s</u>	RANGE <u>16w</u>	CALLED OUT	ON LOCATION	JOB START <u>3:50am</u>	JOB FINISH <u>4:50am</u>
LEASE <u>Suzie</u>		WELL# <u>5</u>		LOCATION <u>281 + Rattlesnake Rd 1/2 E, Ninto</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Maverick Rd #106
 TYPE OF JOB Production
 HOLE SIZE 7 1/8 T.D.
 CASING SIZE 5 1/2 DEPTH 5386'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1500 psi MINIMUM
 MEAS. LINE SHOE JOINT 30'
 CEMENT LEFT IN CSG. 30'
 PERFS.
 DISPLACEMENT 132 bbls drzp

OWNER Lotus Operating
 CEMENT
 AMOUNT ORDERED 50sx 60:40:40 gel
175sx class A ASC + 5# Kalseal + 5# FL-160
+ 1/4# Floseal

COMMON <u>class A</u>	<u>30sx @ 16.25</u>	<u>487.50</u>
POZMIX	<u>20sx @ 8.50</u>	<u>170.00</u>
GEL	<u>2sx @ 21.25</u>	<u>42.50</u>
CHLORIDE	@	
ASC <u>class A</u>	<u>175sx @ 19.00</u>	<u>3325.00</u>
	@	
<u>Kalseal</u>	<u>875# @ .09</u>	<u>778.75</u>
<u>FL-160</u>	<u>82# @ 17.20</u>	<u>1410.40</u>
<u>Floseal</u>	<u>44# @ 2.70</u>	<u>118.80</u>
	@	
	@	
	@	
	@	
HANDLING <u>201</u>	@ <u>2.25</u>	<u>632.25</u>
MILEAGE <u>281 x 15 x .11</u>		<u>463.65</u>
TOTAL		<u>7420.85</u>

EQUIPMENT

PUMP TRUCK CEMENTER not Thinesch
 # 471/302 HELPER Ron Gley
 BULK TRUCK
 # 421/252 DRIVER Dustin Elm
 BULK TRUCK
 # DRIVER

REMARKS:

Brk circulation with R13 pump all through
mix 30sx for Rat hole mix 20sx for mouse hole
mix 175sx cement shutdown wash pump + lines
Release plug drzp. 132 bbls H2O.
Bump plug 1000psi + 1500psi
plug held

CHARGE TO: Lotus Operating
 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 Robin
 SIGNATURE

SERVICE

DEPTH OF JOB 5386'
 PUMP TRUCK CHARGE 2695.00
 EXTRA FOOTAGE @
 MILEAGE 30 @ 7.00 210.00
 MANIFOLD Head Rental @ 200.00
Light Vehicle 30 @ 4.00 120.00
 @
 TOTAL 3225.00

5 1/2 PLUG & FLOAT EQUIPMENT

1- Guide shoe 240.00
1- AFU insert @ 206.00
5- centralizers @ 49.00 245.00
1- Basket @ 337.00
1- rubber plug @ 73.00
 @
 TOTAL 1181.00

SALES TAX (If Any) _____
 TOTAL CHARGES 11834.85
 DISCOUNT _____ IF PAID IN 30 DAYS
9467.88

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

October 09, 2011

Tim Hellman
Lotus Operating Company, L.L.C.
100 S MAIN STE 420
WICHITA, KS 67202-3737

Re: ACO1
API 15-007-23721-00-00
Suzie 5
SE/4 Sec.30-34S-11W
Barber 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,
Tim Hellman