



KANSAS CORPORATION COMMISSION 1067246
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: _____



1067246

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) _____

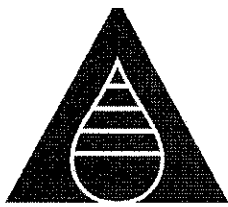
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD 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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Form	ACO1 - Well Completion
Operator	American Energies Corporation
Well Name	Blackwelder 1-19
Doc ID	1067246

Tops

Name	Top	Datum
Onaga Shale	2725	-851
Wabaunsee	2818	-944
Stotler Lime	2947	-1083
Howard	3178	-1304
Topeka	3327	-1453
Kanwauka Shale	3500	-1626
Elgin	3472	-1498
Heebner Shale	3696	-1822
Lower Douglas Sand	3842	-1968
Brown Lime	3864	-1988
Stark Shale	4165	-2291
Hush Shale	4198	-2324
Cherokee Shale	4278	-2404
Mississippian	4350	-2476
Viola	4499	-2625
Base Viola	4590	-2716
Simpson Sand	4609	-2735
Arbuckle	4696	-2822



American Energies
Corporation

155 N. Market, Suite 710, Wichita, KS 67202
316-263-5785, 316-263-1851 fax

DRILLING REPORT
Blackwelder 1-19

AEC'S LEASE#: 10761159

LOCATION: S/2 NW SW Sec. 19-T29S-R11W **SURFACE CASING:** 8 5/8" 20# set @ 330'

COUNTY: Pratt

PRODUCTION CASING:

API: 15-151-22382-0000

PROJECTED RTD: 4700'

CONTRACTOR: Pickrell Drilling, Inc.

G.L.: 1864 **K.B.:** 1874

GEOLOGIST: David Barker - 259-4294

SPUD DATE: 10/17/11

NOTIFY:

COMPLETION DATE:

American Energies Corp.

REFERENCE WELL:

Alan L. DeGood Family Trust

Dianne Y. DeGood Family Trust

Geoffrey Charles and Beth Ann Shafer

AEC's Murphy 1-25

Hyde Resources, Inc.

S/2 SW NE SE Section 25-T29S-R12W, Pratt Co.

Debbie Schmidt, LLC

Carl Dudrey Production, Fax Report to: 620-549-6221

Buffalo Creek Oil and Gas, LLC

FORMATION:	SAMPLE LOG:	COMPARISON:	ELECTRIC LOG TOPS:	COMPARISON:
		Murphy 1-25		Murphy 1-25
Onaga Shale	2780	-906	-6	2725 -851 +9
Wabaunsee	2820	-946	Flat	2818 -944 +8
Stotler Lm	2964	-1090	Flat	2947 -1083 +6
Howard	3177	-1303	+12	3178 -1304 +11
Topeka	3322	-1448	+15	3327 -1453 +10
Kanwauka Sh	3502	-1628	+6	3500 -1626 +8
Elgin	3472	-1498	+8	3472 -1498 +8
Heebner Sh	3697	-1823	+3	3696 -1822 +3
Lower Douglas Sd	3839	-1964	+2	3842 -1968 -1
Brown Lm	3864	-1990	+6	3864 -1988 +8
Stark Shale	4168	-2294	+14	4165 -2291 +17
Hush shale	4200	-2326	+14	4198 -2324 +16
Cherokee Shale	4280	-2406	+14	4278 -2404 +16
Mississippian	4350	-2476	+14	4350 -2476 +14
Viola	4504	-2630	+12	4499 -2625 +17
Base Viola	4580	-2706	-1	4590 -2716 -11
Simpson Sand				4609 -2735 -9
Arbuckle				4696 -2822 -15
RTD	4720			
LTD	4722			

10/17/11 Pickrell Drilling, Rig #1, MIRT, RURT, Spud at 9:45 p.m. Drilled 12 1/4" surface hole to 335' KB.

SHT @ 335' = 3/4 degree. Ran in 7 jts New 8 5/8" 20# surface casing set @ 330' (tally was 318'), cemented w/255 sx of 60/40 poz, 2% gel, 3% CC. PD 4:00 a.m. 10/18/11. CDC. Allied#037745.

10/18/11 At 330' and WOC.

10/19/11 At 1255' and drilling ahead. SHT @ 845 = 3/4 degree.

10/20/11 At 2222' and drilling ahead. Made bit trip @ 1817'. SHT @ 1817' = 1/2 degree.

10/21/11 Drlg. ahead @ 2980'. SHT @ 2897' = 1/4'.

10/22/11 At 3524' and testing.

Results DST #1: 3472 to 3524' Elgin Sand, Times: 30, 60, 30, 60

IF: strong blow BOB 1 min,

ISIP: no blow back,

FFP: strong blow BOB 30 sec,

FSI: weak blow back

REC: 1736 GIP, 60' watery mud (5% water and 95% mud), 120' muddy water (85% water 15% mud)

Chlorides 50,000 ppm, BHT: 112°

IHP: 1604 to 1502#

IFP: 31 to 92# & 69 to 82#

BHP: 1076# to 997#

10/23/11 At 3862' and drilling ahead.

10/24/11 At 4335' and drilling ahead.

10/25/11 At 4628' and drilling ahead.

10/26/11 At 4720' and evaluating electric logs. RTD: 4720', LTD: 4722'. Wellsite Geologist – circulated top 12' of Simpson Sand @ 4622' – no show, no gas increase from this interval.

We will be running a Straddle Drillstem Test over the Lower Douglas Sandstone from 3842 – 3850'.

We had a 200 unit gas kick on the Hot Wire, however, there were no shows in the sample gas bubbles, or odor. The zone calculates 40% SW on the logs, with mudcake.

10/27/11 Ran Straddle test DST #2 3842 – 3850' (Lower Douglas Sandstone). Times: 45-60-45-90. Recovered 80' GCM (40% Gas, 60% Mud), IHP: 1852, IFP: 45-33, ISIP: 1128, FFP: 45-52, FSIP: 1241, FHP: 1817.

Plugging information as follows: 50 sx @ 4694', 50 sx @ 660', 50 sx @ 360', 20 sx @ 60', 30 sx in RH, 20 sx in MH of 60/40 Poz, 4% gel, w ¼# Floseal/sx. Allied Ticket # 037823. Plugging completed at 2:00 p.m. on 10/27/11. Plugging permission granted from Mike Maier on 10/24/11 at 9:15 a.m.



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

American Energies Corporation
 155 N Market
 Ste 710
 Wichita KS 67202
 ATTN: Karen Houseberg/ Dav

19-29s-11w
Blackwelder # 1-19
 Job Ticket: 44069 **DST#: 1**
 Test Start: 2011.10.22 @ 10:19:50

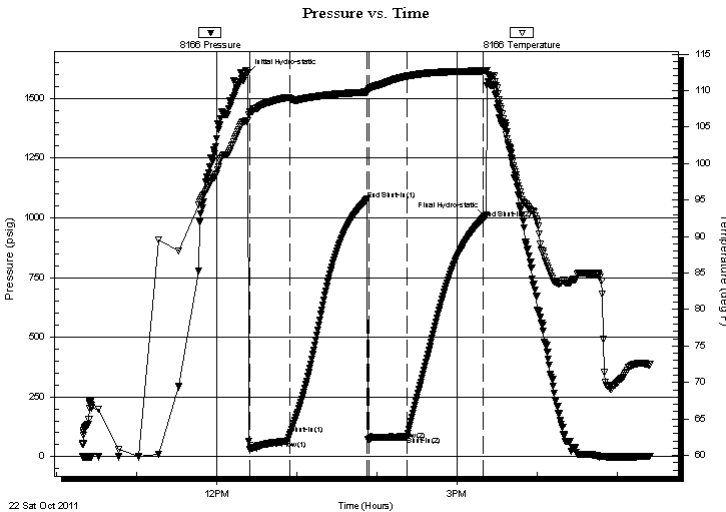
GENERAL INFORMATION:

Formation: **ELGIN**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Initial)
 Time Tool Opened: 12:25:05
 Tester: Chris Staats
 Time Test Ended: 17:24:20
 Unit No: 34
 Interval: **3472.00 ft (KB) To 3524.00 ft (KB) (TVD)**
 Reference Elevations: 1875.00 ft (KB)
 Total Depth: 3542.00 ft (KB) (TVD)
 1865.00 ft (CF)
 Hole Diameter: 7.88 inches
 Hole Condition: Fair
 KB to GR/CF: 10.00 ft

Serial #: 8166 Outside
 Press @ Run Depth: 82.82 psig @ 3473.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.10.22 End Date: 2011.10.22 Last Calib.: 2011.10.22
 Start Time: 10:19:55 End Time: 17:24:19 Time On Btm: 2011.10.22 @ 12:23:20
 Time Off Btm: 2011.10.22 @ 15:20:50

TEST COMMENT: IF: Strong blow BOB 1 min
 IS: No blow back
 FF: Strong blow BOB 30 sec
 FS: Weak blow 3/4"

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1604.80	105.84	Initial Hydro-static
2	31.76	107.09	Open To Flow (1)
32	92.03	108.94	Shut-In(1)
90	1076.08	109.79	End Shut-In(1)
91	69.62	110.19	Open To Flow (2)
120	82.82	111.98	Shut-In(2)
177	997.44	112.70	End Shut-In(2)
178	1002.97	112.71	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
0.00	1736' GIP	0.00
60.00	Watery Mudd 5% w ater 95% mud	0.30
120.00	Muddy Water 15% mudd 85% w ater	1.12

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Energies Corporation

19-29s-11w

155 N Market
Ste 710
Wichita KS 67202

Blackwelder # 1-19

Job Ticket: 44069

DST#: 1

ATTN: Karen Houseberg/ Dav

Test Start: 2011.10.22 @ 10:19:50

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:

50000 ppm

Viscosity: 46.00 sec/qt

Cushion Volume:

bbf

Water Loss: 9.59 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 4500.00 ppm

Filter Cake: 0.02 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
0.00	1736' GIP	0.000
60.00	Watery Mudd 5% w ater 95% mud	0.295
120.00	Muddy Water 15% mudd 85% w ater	1.118

Total Length: 180.00 ft

Total Volume: 1.413 bbl

Num Fluid Samples: 0

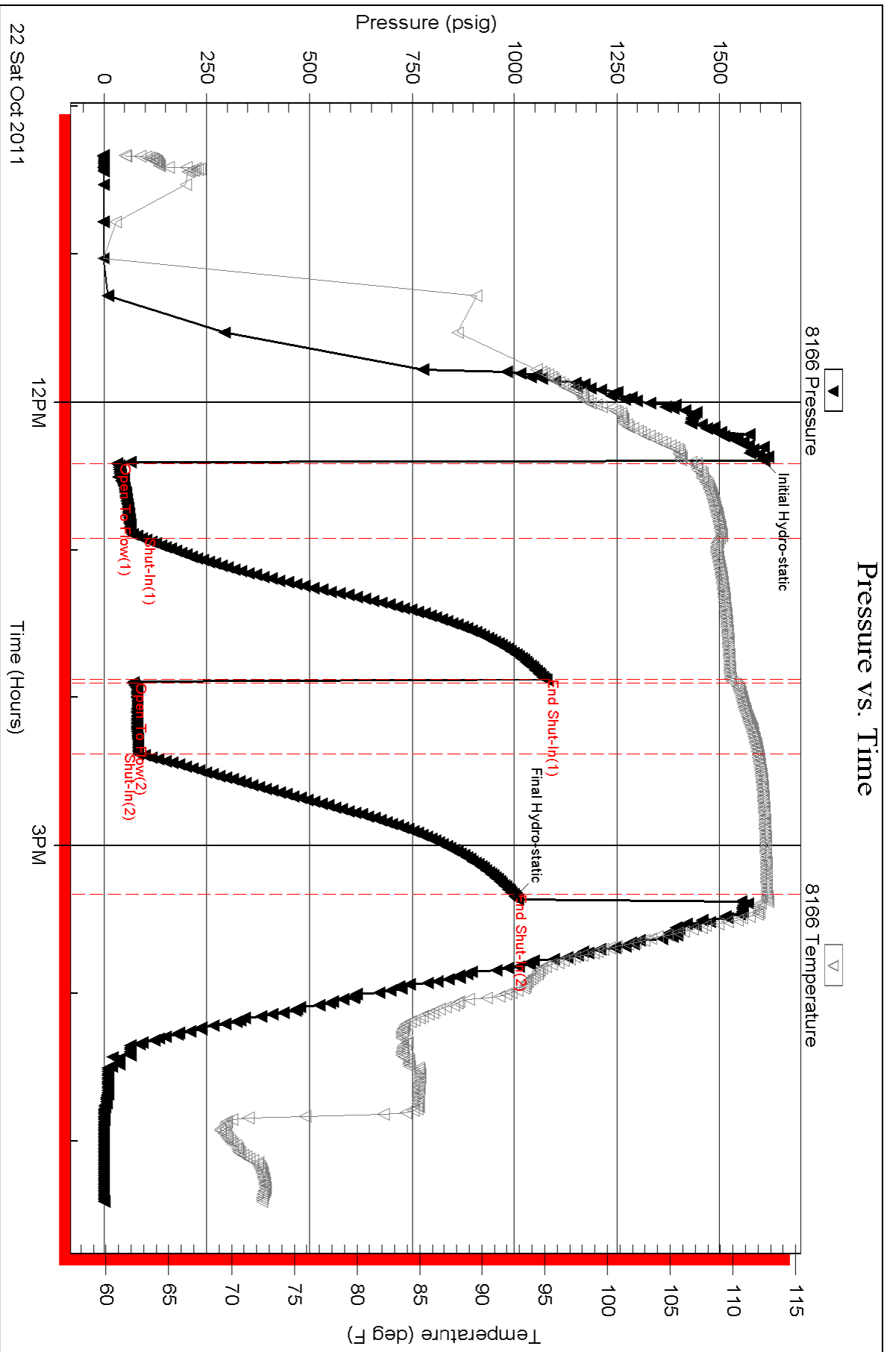
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



GENERAL INFORMATION

Client Information:

Company: AMERICAN ENERGIES

Contact: ALAN DeGOOD

Phone: Fax: e-mail:

Site Information:

Contact: DAVE BARKER

Phone: Fax: e-mail:

Well Information:

Name: BLACKWELD 1-19

Operator: AMERICAN ENERGIES

Location-Downhole:

Location-Surface: S19/29S/11W

Test Information:

Company: DIAMOND TESTING

Representative: JOHN RIEDL

Supervisor: DAVE BARKER

Test Type: CONVENTIONAL Job Number: D1046

Test Unit:

Start Date: 2011/10/26 Start Time: 16:00:00

End Date: 2011/10/27 End Time:

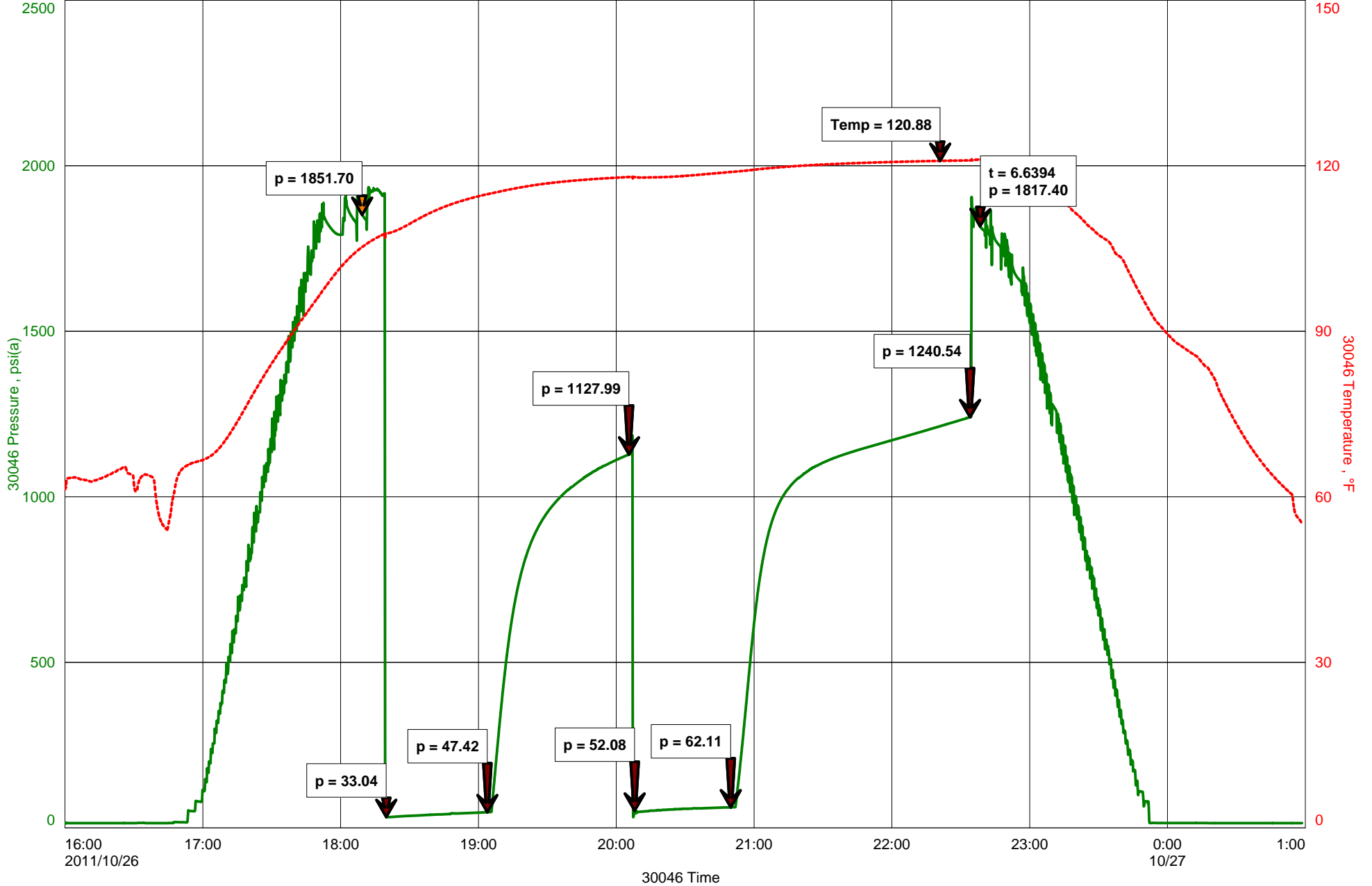
Report Date: 2011/10/27 Prepared By: JOHN RIEDL

Qualified By: DAVE BARKER

Remarks:

RECOVERY: 80' GAS CUT MUD

BLACKWELD 1-19





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.