

1079190

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

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 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				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

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: <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> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Wetz B 6
Doc ID	1079190

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	Wetz B 6
Doc ID	1079190

Tops

Name	Top	Datum
KC	4322	-2911
BKC	4559	-3069
Cher Sh	4695	-3284
Miss	4745	-3334
Kind Sh	4991	-3580
Viola	5143	-3732
Simp Sh.	5235	-3824
Arb	5450	-4039
LTD	5520	-4109



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

RECEIVED

MAR 16 2012

INVOICE

Invoice Number: 130410
Invoice Date: Mar 8, 2012
Page: 1

Bill To:

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

Federal Tax I.D.#: 20-8651475

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Wetz #B-6	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Mar 8, 2012	4/7/12

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
7.00	MAT	Chloride	58.20	407.40
236.00	SER	Handling	2.25	531.00
15.00	SER	Mileage	25.96	389.40
1.00	SER	Surface	1,125.00	1,125.00
15.00	SER	Heavy Vehicle Mileage	7.00	105.00
15.00	SER	Light Vehicle Mileage	4.00	60.00
1.00	CEMENTER	Ron Gilley		
1.00	EQUIP OPER	Adam Miller		
1.00	OPER ASSIST	Derek Gibbons		

ENTERED
MAR 19 2012

GL# 9208
DESC. mixed surf csg #6
WELL # Weteb

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

\$1132.31

ONLY IF PAID ON OR BEFORE

Apr 2, 2012

Subtotal	5,661.55
Sales Tax	251.93
Total Invoice Amount	5,913.48
Payment/Credit Applied	
TOTAL	5,913.48

- 1132.31
4781.17



RECEIVED

MAR 26 2012

INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 130554
Invoice Date: Mar 13, 2012
Page: 1

Voice: (817) 546-7282
Fax: (817) 246-3361



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

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Wetz B #6	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Mar 13, 2012	4/12/12

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	ASC	19.00	3,325.00
82.00	MAT	FL-160	17.20	1,410.40
875.00	MAT	KolSeal	0.89	778.75
44.00	MAT	FloSeal	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
15.00	SER	Heavy Vehicle Mileage	7.00	105.00
15.00	SER	Light Vehicle Mileage	4.00	60.00
1.00	EQP	5 1/2 Reg Guide Shoe	240.00	240.00
1.00	EQP	5 1/2 AFU Insert	277.00	277.00
5.00	EQP	5 1/2 Centralizers	49.00	245.00
1.00	EQP	5 1/2 Rubber Plug	73.00	73.00
1.00	EQP	5 1/2 Basket	337.00	337.00
1.00	SER	Rig Time	1,540.00	-1,540.00

GL# 4308
DESC. cement prod csg
#4
WELL # Wetz B

ENTERED
MAR 27 2012

Subtotal	9,920.85
Sales Tax	547.86
Total Invoice Amount	10,468.71
Payment/Credit Applied	
TOTAL	10,468.71

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

\$ 2292.18

ONLY IF PAID ON OR BEFORE
Apr 7, 2012

- 2,292.18
6176.53

ALLIED OIL & GAS SERVICES, LLC 054060

Federal Tax I.D.# 20-5975804

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

SERVICE POINT:
Medicine Lodge

DATE <u>3-13-12</u>	SEC <u>36</u>	TWP. <u>34s</u>	RANGE <u>12W</u>	CALLED OUT <u>2:30</u>	ON LOCATION <u>3:00</u>	JOB START	JOB FINISH <u>7:00</u>
LEASE <u>Wetz B</u>	WELL # <u>6</u>	LOCATION <u>S Medicine Lodge to Rattlesnake Rd, 1/2 W, 1/2 S</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke #7
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 5520
 CASING SIZE 5 1/2 DEPTH 5010.52
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 32'
 PERFS.
 DISPLACEMENT 121 1/2

OWNER Lotus Operating
 CEMENT
 AMOUNT ORDERED 50s x 60:40:40 gel
175s x class A ASC + 5 # Kalseal + 50% FL-160
+ 1/4 # flo seal

COMMON	<u>.70 SK A</u>	@	<u>16.25</u>	<u>487.50</u>
POZMIX	<u>20 SK</u>	@	<u>8.50</u>	<u>170.00</u>
GEL	<u>2 SV</u>	@	<u>21.25</u>	<u>42.50</u>
CHLORIDE		@		
ASC	<u>A 175</u>	@	<u>19.00</u>	<u>3325.00</u>
	<u>Kalseal 875^W</u>	@	<u>.89</u>	<u>778.75</u>
	<u>PL-160 82⁺</u>	@	<u>17.20</u>	<u>1410.40</u>
	<u>Flo seal 44⁺</u>	@	<u>2.70</u>	<u>118.80</u>
		@		
		@		
		@		
HANDLING	<u>25'</u>	@	<u>2.25</u>	<u>632.25</u>
MILEAGE	<u>25' x 15 x .11</u>			<u>463.65</u>

TOTAL 7428.85

PUMP TRUCK CEMENTER Don Gilley / Matt
 # 771-302 HELPER Eddie P
 BULK TRUCK
 # 381-250 DRIVER Brett G.
 BULK TRUCK
 # 421-292 DRIVER Brett G.

REMARKS:

Pipe on Bottom Break Circulation
Drop Ball Circulate stop plug RHT
MH, Mix 175s x Cement, stop, wash
pump & lines, stop Release plug, start
Displacement with 20' fresh H2O pump
plug at 500' Oper, plug did hold
Finished Displacing with 100 Bks.

SERVICE

DEPTH OF JOB	<u>5520'</u>		
PUMP TRUCK CHARGE	<u>2695.00</u>		
EXTRA FOOTAGE	@		
MILEAGE	<u>15</u>	@	<u>7.00</u> <u>105.00</u>
MANIFOLD	@		
<u>Light/Veh.</u>	<u>15</u>	@	<u>4.00</u> <u>60.00</u>
		@	

TOTAL 2860.00

CHARGE TO: Lotus operating
 STREET _____
 CITY _____ STATE _____ ZIP _____

5 1/2 PLUG & FLOAT EQUIPMENT

1- Reg Guide Shoe	@	<u>240.00</u>
1- AEU Insect	@	<u>277.00</u>
5- Centralizers	@	<u>49.00</u> <u>245.00</u>
1- Rubber plug	@	<u>73.00</u>
1- Basket	@	<u>337.00</u>

TOTAL 1172.00

To: Allied Oil & Gas Services, 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 Brown

SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES 11,460.85
 DISCOUNT 20% IF PAID IN 30 DAYS
 NET 9168.68
- 1540.00 Rig time
7628.68

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

June 15, 2012

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

Re: ACO1
API 15-007-23847-00-00
Wetz B 6
NW/4 Sec.36-34S-12W
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