

1087996

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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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> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 251067

Invoice Date: 07/11/2012 Terms: 10/10/30,n/30

Page 1

VAL ENERGY
200 WEST DOUGLAS SUITE 520
WICHITA KS 67202
() -

NORTH TRUST 1-29

36987

29-16-21

07-06-2012

KS

RECEIVED

JUL 14 2012

9233

Sub FEE
Cement

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	165.00	17.6500	2912.25
1102	CALCIUM CHLORIDE (50#)	465.00	.8900	413.85
1118B	PREMIUM GEL / BENTONITE	310.00	.2500	77.50

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-340.36
9995-130	CEMENT EQUIPMENT DISCOUNT	-180.34

Description	Hours	Unit Price	Total
460 TON MILEAGE DELIVERY	1.00	518.40	518.40
463 CEMENT PUMP (SURFACE)	1.00	1085.00	1085.00
463 EQUIPMENT MILEAGE (ONE WAY)	40.00	5.00	200.00

Amount Due 5421.42 if paid after 08/10/2012

Parts:	3403.60	Freight:	.00	Tax:	192.98	AR	4879.28
Labor:	.00	Misc:	.00	Total:	4879.28		
Sublt:	-520.70	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

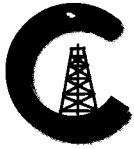
PONCA CITY, OK
580/762-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
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Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 251255

Invoice Date: 07/16/2012 Terms: 10/10/30,n/30

Page 1

VAL ENERGY
200 WEST DOUGLAS SUITE 520
WICHITA KS 67202
() -

NORTH TRUST #1-29
~~37004~~

29-16-21
07-14-2012
KS

RECEIVED

JUL 19 2012

Plug Cement

9233-1

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	260.00	15.1000	3926.00
1118B	PREMIUM GEL / BENTONITE	894.00	.2500	223.50
1107	FLO-SEAL (25#)	65.00	2.8200	183.30

Sublet Performed	Description	Total
9996-130	CEMENT MATERIAL DISCOUNT	-433.28
9995-130	CEMENT EQUIPMENT DISCOUNT	-203.51

Description	Hours	Unit Price	Total
399 P & A NEW WELL	1.00	1325.00	1325.00
399 EQUIPMENT MILEAGE (ONE WAY)	30.00	5.00	150.00
566 MIN. BULK DELIVERY	1.00	560.10	560.10

Amount Due 6640.87 if paid after 08/15/2012

Parts:	4332.80	Freight:	.00	Tax:	245.67	AR	5976.78
Labor:	.00	Misc:	.00	Total:	5976.78		
Sublt:	-636.79	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 37004

LOCATION Oakley KS

FOREMAN Miles Shaw

FIELD TICKET & TREATMENT REPORT

CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-14-12	P576	North Trust # 1-29	29	16S	21W	Ness
CUSTOMER <u>Val Energy</u>						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
TRUCK #	DRIVER	TRUCK #	DRIVER			
399	Damon M					
526	Bobby S					

JOB TYPE PTA HOLE SIZE 7 7/8 HOLE DEPTH 4300 CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.2 SLURRY VOL 1.40 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting & Rig up on Val Energy Rig #3 Plus as ordered
50 Sks @ 1560'
80 Sks @ 870'
50 Sks @ 450' 240 Sks 60/40 mix 4 gal 1/4" flo seal
40 Sks @ 240'
TOP 20 Sks
RH 20 Sks
MH 20 Sks
Thanks Miles & Crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1325.00	1325.00
5406	30	MILEAGE	5.00	150.00
5407	11.18	Pen m. trase delivery	1167	560.10
1131	260 Sks	60/40 Por Cement mix	15.10	2926.00
1118B	894	Bentonite Gel	.25	223.50
1107	65	Flo seal	2.82	183.30
			Subtotal	6367.90
			less 108 chs count	636.79
			Subtotal	5731.11
			SALES TAX	245.67
			ESTIMATED TOTAL	5976.78

Ravin 3737

AUTHORIZATION Michael Brand TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

251255

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
Thomas E. Wright, Commissioner

Sam Brownback, Governor

July 30, 2012

TODD ALLAM
Val Energy, Inc.
200 W DOUGLAS AVE STE 520
WICHITA, KS 67202-3005

Re: ACO1
API 15-135-25432-00-00
NORTH TRUST 1-29
SE/4 Sec.29-16S-21W
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,
TODD ALLAM