



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: _____



1090628

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Liberty Oper & Compl, Inc
Well Name	Ganoung B 1
Doc ID	1090628

All Electric Logs Run

CDL/CNL
PE MEL
D/L
Sonic

Form	ACO1 - Well Completion
Operator	Liberty Oper & Compl, Inc
Well Name	Ganoung B 1
Doc ID	1090628

Tops

Name	Top	Datum
Anhydrite	1354	+743
Topeka	3073	-976
Heebner	3298	-1206
Toronto	3317	-1220
l/KC A	3338	-1241
Stark Shale	3532	-1435
b/KC	3589	-1492
Conglomerate	3628	-1531
Arbuckle	3718	-1621

ALLIED CEMENTING CO., LLC. 038341

Federal Tax I.D.# 20-5975804

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

SERVICE POINTS
Page 11

DATE <i>10/16/11</i>	SEC <i>08A</i>	TWP <i>10</i>	RANGE <i>17W</i>	CALLED OUT	ON LOCATION	JOB START 11:00 AM	JOB FINISH 12:00 PM
LEASE <i>Feathers</i>	WELL# <i>D 71</i>	LOCATION <i>Plainsville 35 SE 15</i>		COUNTY <i>Franklin</i>	STATE <i>KS</i>		
OLD OR NEW (Circle one)				<i>NEW</i>			

CONTRACTOR *Torquada Drilling Co. #1* OWNER

TYPE OF JOB *Production String Drilling*
 HOLE SIZE *7 7/8* TD *3225*
 CASING SIZE *5 1/2* WT & DEPTH *3282*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT *3282*
 CEMENT LEFT IN CSG. *3282*
 PERFS.
 DISPLACEMENT *9148661* EQUIPMENT

CEMENT
 AMOUNT ORDERED *150 Cu. Yds*
2 bags 500 lb 14.25 = 2850
1 bag 1000 lb 14.25 = 14250

COMMON	<i>150</i>	@	<i>16.25</i>	<i>2437.50</i>
POZMIX		@		
GEL	<i>3</i>	@	<i>21.25</i>	<i>63.75</i>
CHLORIDE		@		
ASC		@		
<i>SOL</i>	<i>13</i>	@	<i>23.95</i>	<i>311.35</i>
<i>WTR-2</i>	<i>500.61</i>	@	<i>1.10</i>	<i>550.67</i>
TOTAL				

PUMP TRUCK CEMENTER *USHans*
 # *412* HELPER *Tony*
 BULK TRUCK DRIVER *Mike*
 BULK TRUCK # *344* DRIVER *Tony G.P.*

HANDLING	<i>166</i>	@	<i>2.25</i>	<i>373.50</i>
MILEAGE	<i>1446.61</i>	@		<i>620.84</i>
TOTAL				

REMARKS:
Rate 1/12 Tank
Invent 3789.13
Missed 500 Gals approx 2 miles NW of
Cached 24 Gals @ 2000 ps.
Rec'd 100 Gals @ 2000 ps.
Operated 24 hrs @ 400 psi
Worked 24 hours @ 2000 ps
24 hrs @ 1800 ps. 2000 Gals

DEPTH OF JOB				
PUMP TRUCK CHARGE		@		<i>282.50</i>
EXTRA FOOTAGE		@		
MILEAGE	<i>34</i>	@	<i>7.00</i>	<i>238.00</i>
MANIFOLD		@		
<i>Cur</i>	<i>34</i>	@	<i>4.00</i>	<i>136.00</i>
TOTAL				

CHARGE TO: *Cibola Operations*
 STREET _____ STATE _____ ZIP _____

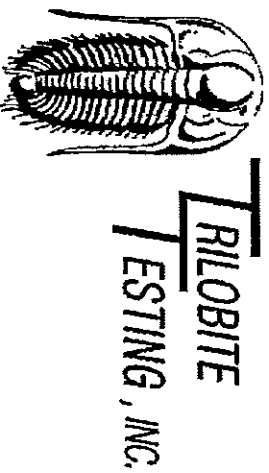
PLUG & FLOAT EQUIPMENT

<i>Dr 1 bag</i>	@	<i>260.500</i>
<i>Accu-Pilot 1 bag</i>	@	<i>345.00</i>
<i>S-Cementator</i>	@	<i>120.00</i>
<i>1-bag 1/2</i>	@	<i>236.00</i>
<i>Card down</i>	@	<i>N/A</i>
TOTAL		

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cement and helper(s) to assist owner or contractor to do work as 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 *Tony Richards* SALES TAX (if Any) _____
 TOTAL CHARGES *19,211.94*

SIGNATURE *Tony Richards*
 DISCOUNT *20%* IF PAID IN 30 DAYS



DRILL STEM TEST REPORT

Prepared For: **Liberty Oper & Comp, Inc**

308 w Mill
Plainville KS 67663

ATTN: Roger L Comeau

Ganoung B #1

2-10s-17w Rooks,KS

Start Date: 2011.10.14 @ 01:25:30

End Date: 2011.10.14 @ 11:17:00

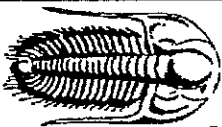
Job Ticket #: 44852 DST #: 1

Trilobite Testing, Inc

PO Box 362 Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620

Printed: 2011.10.27 @ 08:04:26



TRIOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Liberty Oper & Comp, Inc
308 W Mill
Fairville KS 67663
ATTN: Roger L Comeau

2-10s-17w Rooks, KS
Ganoung B #1
Job Ticket: 44852 DST#: 1
Test Start: 2011.10.14 @ 01:25:30

GENERAL INFORMATION:

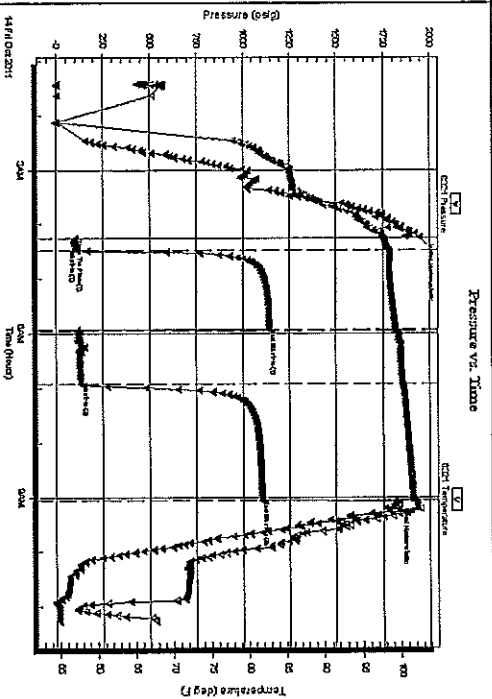
Formation: Conglomerate
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 04:15:30
Time Test Ended: 11:17:00
Interval: 3575.00 ft (KB) To 3698.00 ft (KB) (TVD)
Total Depth: 3698.00 ft (KB) (TVD)
Hole Diameter: 7.88 inches-Hole Condition: Good

Test Type: Conventional Bottom Hole (Initial)
Tester: Jeff Brown
Unit No: 44
Reference Elevations: 2097.00 ft (KB)
2089.00 ft (CF)
KB to GRCF: 8.00 ft

Serial #: 8321 Inside
Press @Run Depth: 133.20 psig @ 3675.00 ft (KB)
Start Date: 2011.10.14 End Date: 2011.10.14
Start Time: 01:25:31 End Time: 11:17:00

Capacity: 8000.00 psig
Last Callb.: 2011.10.14
Time On Btm: 2011.10.14 @ 04:15:00
Time Off Btm: 2011.10.14 @ 09:04:00

TEST COMMENT: IFP-Fair blow built to 4 1/4 in
ISH-Dead no blow back
FFP-Good blow built to 10 1/2 in
FSH-Dead no blow back



PRESSURE SUMMARY

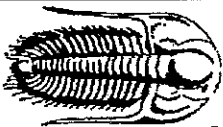
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1948.73	97.50	Initial Hydro-static
1	100.15	97.44	Open To Flow (1)
14	104.73	98.34	Shut-In(1)
101	1137.53	99.27	End Shut-In(1)
101	111.56	99.09	Open To Flow(2)
161	133.20	100.22	Shut-In(2)
289	1100.04	101.59	End Shut-In(2)
289	1812.81	101.74	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
52.00	SOCM 5% O95% M	0.73
72.00	MOC 40% M80% O	1.01
16.00	Free Oil	0.22

Gas Rates

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



TRILLOBITE
TESTING, INC

DRILL STEM TEST REPORT

TOOL DIAGRAM

Liberty Oper & Comp, Inc
308 W Mill
Plainville KS 67663
ATTN: Roger L Comeau

2-10s-17w Rooks,KS
Ganoung B #1
Job Ticket: 44852 DST#: 1
Test Start: 2011.10.14 @ 01:25:30

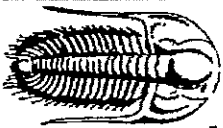
Tool Information

Drill Pipe:	Length: 3577.00 ft	Diameter:	3.80 inches	Volume:	50.18 bbl	Tool Weight:	2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter:	2.70 inches	Volume:	0.00 bbl	Weight set on Packer:	20000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter:	2.25 inches	Volume:	0.00 bbl	Weight to Pull Loose:	32000.00 lb
				Total Volume:	50.18 bbl	Tool Chased	0.00 ft
Drill Pipe Above KB:	22.00 ft					String Weight: Initial	25000.00 lb
Depth to Top Packer:	3575.00 ft					Final	27000.00 lb
Depth to Bottom Packer:	ft						
Interval betw een Packers:	123.00 ft						
Tool Length:	143.00 ft						
Number of Packers:	2	Diameter:	6.75 inches				

Tool Comments:

Tool Description Length (ft) Serial No. Position Depth (ft) Accum. Lengths

Change Over Sub	1.00			3556.00	
Shut In Tool	5.00			3561.00	
Hydraulic tool	5.00			3566.00	
Packer	4.00			3570.00	20.00 Bottom Of Top Packer
Packer	5.00			3575.00	
Stub	1.00			3576.00	
Perforations	4.00			3580.00	
Change Over Sub	1.00			3581.00	
Drill Pipe	93.00			3674.00	
Change Over Sub	1.00			3675.00	
Recorder	0.00	8321	Inside	3675.00	
Recorder	0.00	8737	Outside	3675.00	
Perforations	20.00			3695.00	
Bullnose	3.00			3698.00	123.00 Bottom Packers & Anchor
Total Tool Length:		143.00			



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

FLUID SUMMARY

Liberty Oper & Corp, Inc
308 W Main
Fairville KS 67663
ATTN: Roger L Corneau

2-10s-17w Rooks,KS
Ganoung B #1
Job Ticket: 44852
DST#:1
Test Start: 2011.10.14 @ 01:25:30

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 56.00 sec/qt
Water Loss: 8.78 in³
Resistivity: ohm m
Salinity: 5000.00 ppm
Filter Cake: inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: 25 deg API
Water Salinity: ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
52.00	SOCM 5%O95%M	0.729
72.00	MCO 40%M60%O	1.010
16.00	Free Oil	0.224

Total Length: 140.00 ft Total Volume: 1.963 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
Laboratory Name: Laboratory Location:
Recovery Comments:

