



KANSAS CORPORATION COMMISSION 1104711
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: _____



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	Klabzuba Oil & Gas, Inc.
Well Name	Jensen Trust 34-9-11-19
Doc ID	1104711

All Electric Logs Run

Dual Induction Log with Gamma Ray
Dual Compensated Porosity
Microresistivity
Borehole Compensated Sonic



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Klabzuba Oil & Gas inc

34-11s-19w Ellis

700 17th st.
STE 1300
Denver Co. 80202
ATTN: Dave Goldak

Jensen Tr 34-9-11-19

Job Ticket: 46807 **DST#: 1**

Test Start: 2012.03.08 @ 05:11:05

GENERAL INFORMATION:

Formation: **Topeka**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 08:11:30

Time Test Ended: 12:17:50

Test Type: Conventional Bottom Hole (Initial)

Tester: Andy Carreira

Unit No: 39

Interval: 3145.00 ft (KB) To 3162.00 ft (KB) (TVD)

Reference Elevations: 2151.00 ft (KB)

Total Depth: 3162.00 ft (KB) (TVD)

2143.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Poor

KB to GR/CF: 8.00 ft

Serial #: 8352 Outside

Press @ Run Depth: 21.37 psig @ 3146.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.03.08

End Date:

2012.03.08

Last Calib.: 2012.03.08

Start Time: 05:11:05

End Time:

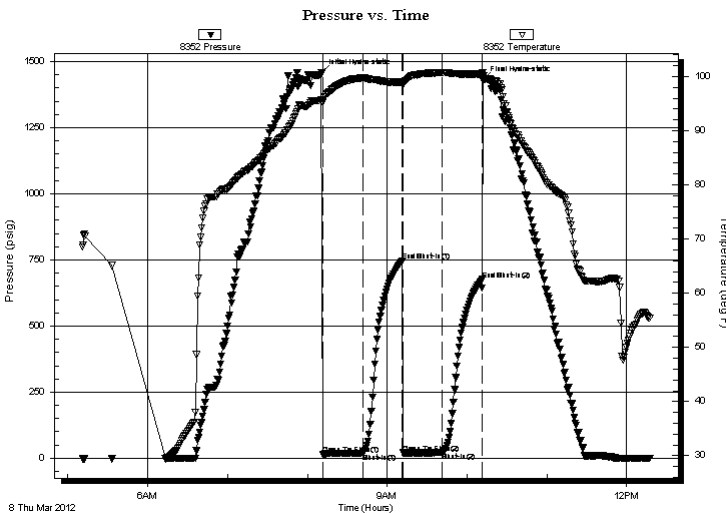
12:17:50

Time On Btm: 2012.03.08 @ 08:10:30

Time Off Btm: 2012.03.08 @ 10:11:50

TEST COMMENT: IF:(30min) Blow died in 9 min
ISl:(30min) No Return
FF:(30min) No Blow
FSl:(30min) No Return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1456.54	95.71	Initial Hydro-static
1	13.73	95.21	Open To Flow (1)
31	18.40	99.75	Shut-In(1)
61	746.77	98.98	End Shut-In(1)
62	19.78	98.71	Open To Flow (2)
91	21.37	100.74	Shut-In(2)
121	675.63	100.49	End Shut-In(2)
122	1429.87	100.68	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	MW w / oil spcks in tool	0.14

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Klabzuba Oil & Gas inc

34-11s-19w Ellis

700 17th st.
STE 1300
Denver Co. 80202
ATTN: Dave Goldak

Jensen Tr 34-9-11-19

Job Ticket: 46807

DST#: 1

Test Start: 2012.03.08 @ 05:11:05

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:

60000 ppm

Viscosity: 66.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 6.40 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 2100.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	MW w / oil spcks in tool	0.140

Total Length: 10.00 ft Total Volume: 0.140 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Sampler Data- oil=tr mud=200ml w ater=900ml press=40lbs

Resistivity- .17 @ 57 deg= 60000

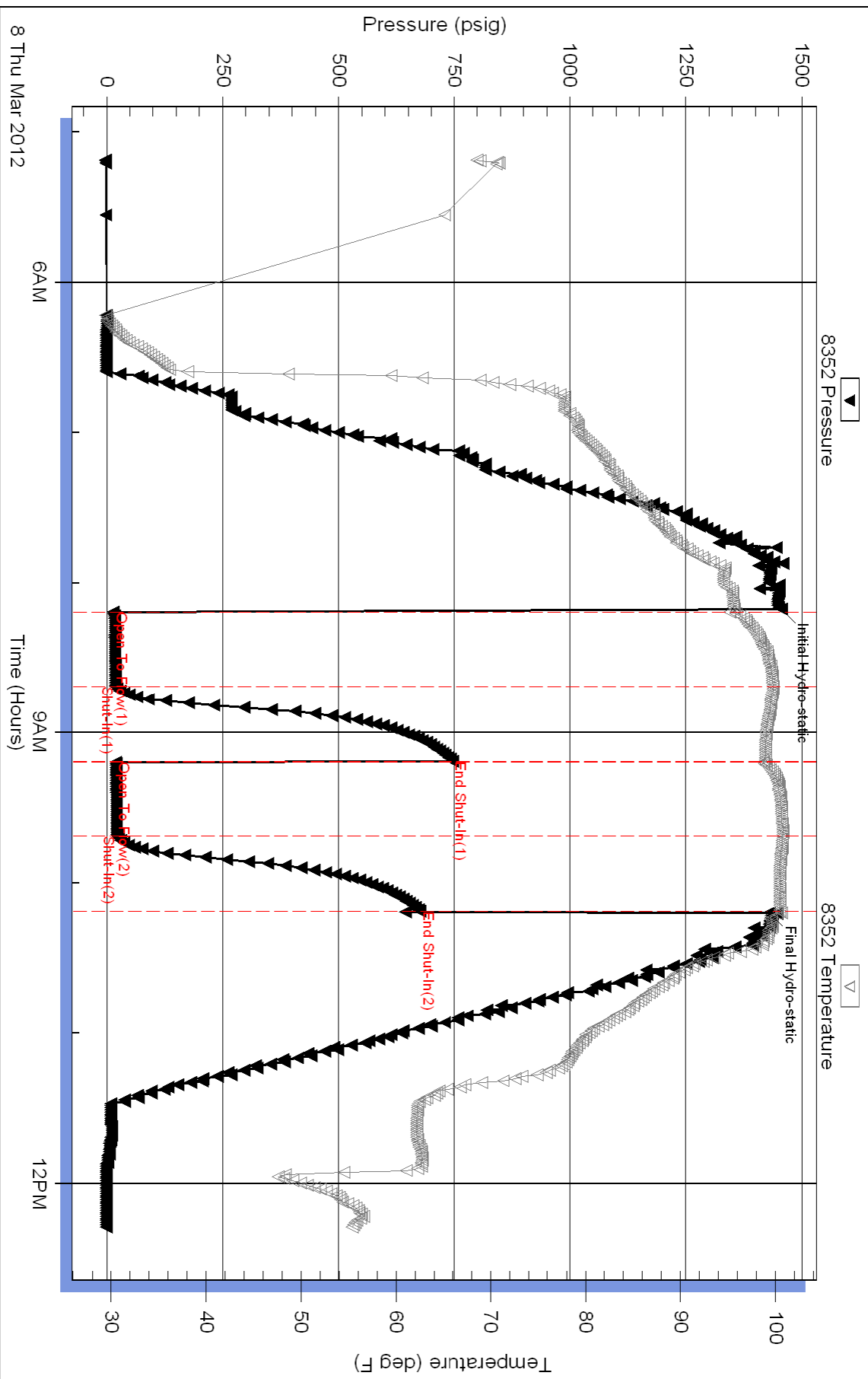
Serial #: 8352

Outside Klabzuba Oil & Gas inc

Jensen Tr 34-9-11-19

DST Test Number: 1

Pressure vs. Time



Triobite Testing, Inc

Ref. No: 46807

Printed: 2012.03.08 @ 15:09:07



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Klabzuba Oil & Gas inc
 700 17th st.
 STE 1300
 Denver Co. 80202
 ATTN: Dave Goldak

34-11s-19w Ellis

Jensen Tr 34-9-11-19

Job Ticket: 46809

DST#: 3

Test Start: 2012.03.10 @ 20:15:05

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 22:26:40

Time Test Ended: 04:32:20

Test Type: Conventional Bottom Hole (Reset)

Tester: Andy Carreira

Unit No: 39

Interval: 3650.00 ft (KB) To 3684.00 ft (KB) (TVD)

Reference Elevations: 2151.00 ft (KB)

Total Depth: 3684.00 ft (KB) (TVD)

2143.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Poor

KB to GR/CF: 8.00 ft

Serial #: 8352 Outside

Press @ RunDepth: 42.84 psig @ 3651.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.03.10

End Date:

2012.03.11

Last Calib.: 2012.03.11

Start Time: 20:15:05

End Time:

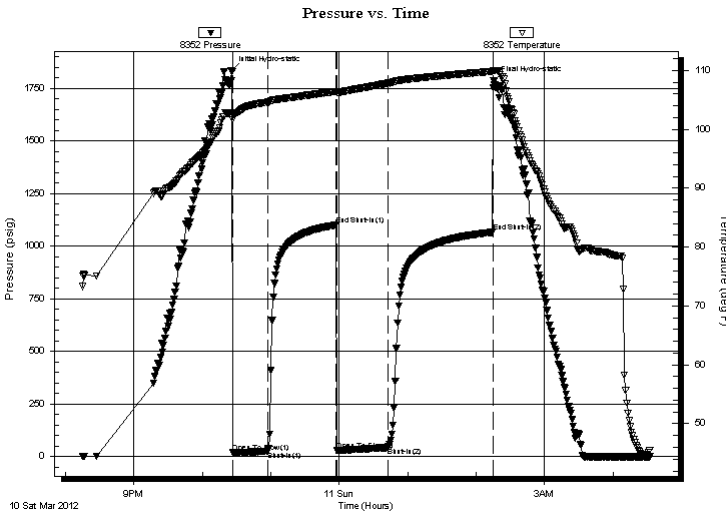
04:32:20

Time On Btm: 2012.03.10 @ 22:25:30

Time Off Btm: 2012.03.11 @ 02:15:29

TEST COMMENT: IF:(30min) 2" blow in 11 min. 3" in 23 min.
 IS:(60min) No Return
 FF:(45min) 2" blow in 19 min. 3" in 36 min.
 FS:(90min) No Return

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1834.73	102.63	Initial Hydro-static
2	21.33	101.62	Open To Flow (1)
32	25.98	104.59	Shut-In(1)
92	1100.15	106.43	End Shut-In(1)
93	30.87	106.20	Open To Flow (2)
138	42.84	107.80	Shut-In(2)
229	1066.20	109.82	End Shut-In(2)
230	1784.15	109.96	Final Hydro-static

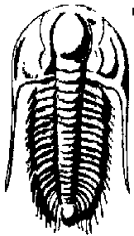
Recovery

Length (ft)	Description	Volume (bbl)
50.00	HMCO m=40% o=60%	0.70
20.00	CO o=100%	0.28

* Recovery from multiple tests

Gas Rates

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



TRILOBITE
TESTING, INC.

DRILL STEM TEST REPORT

Klabzuba Oil & Gas inc

34-11s-19w Ellis

700 17th st.
STE 1300
Denver Co. 80202
ATTN: Dave Goldak

Jensen Tr 34-9-11-19

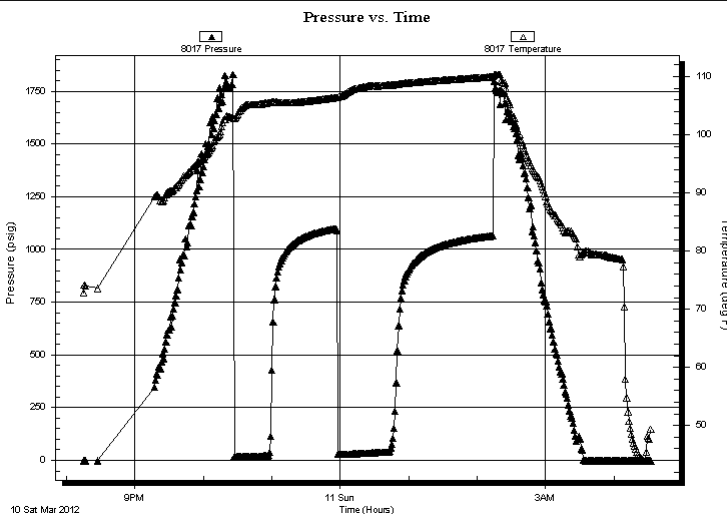
Job Ticket: 46809 **DST#: 3**
Test Start: 2012.03.10 @ 20:15:05

GENERAL INFORMATION:

Formation:	Arbuckle				
Deviated:	No	Whipstock:		ft (KB)	Test Type: Conventional Bottom Hole (Reset)
Time Tool Opened:	22:26:40				Tester: Andy Carreira
Time Test Ended:	04:32:20				Unit No: 39
Interval:	3650.00 ft (KB) To	3684.00 ft (KB) (TVD)		Reference Elevations:	2151.00 ft (KB)
Total Depth:	3684.00 ft (KB) (TVD)				2143.00 ft (CF)
Hole Diameter:	7.88 inches	Hole Condition:	Poor	KB to GR/CF:	8.00 ft

Serial #: 8017	Inside				
Press @RunDepth:	psig @	3651.00 ft (KB)	Capacity:	8000.00 psig	
Start Date:	2012.03.10	End Date:	2012.03.11	Last Calib.:	2012.03.11
Start Time:	20:15:05	End Time:	04:32:09	Time On Btm:	
				Time Off Btm:	

TEST COMMENT: IF:(30min) 2" blow in 11 min. 3" in 23 min.
 ISI:(60min) No Return
 FF:(45min) 2" blow in 19 min. 3" in 36 min.
 FSI:(90min) No Return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
50.00	HMCO m=40% o=60%	0.70
20.00	CO o=100%	0.28

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Klabzuba Oil & Gas inc

34-11s-19w Ellis

700 17th st.
STE 1300
Denver Co. 80202
ATTN: Dave Goldak

Jensen Tr 34-9-11-19

Job Ticket: 46809

DST#: 3

Test Start: 2012.03.10 @ 20:15:05

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:

ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbf

Water Loss: 6.80 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3000.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbf
50.00	HMCO m=40% o=60%	0.701
20.00	CO o=100%	0.281

Total Length: 70.00 ft Total Volume: 0.982 bbf

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Sampler Data- Mud=600ml Oil=1200ml Pressure=120lbs

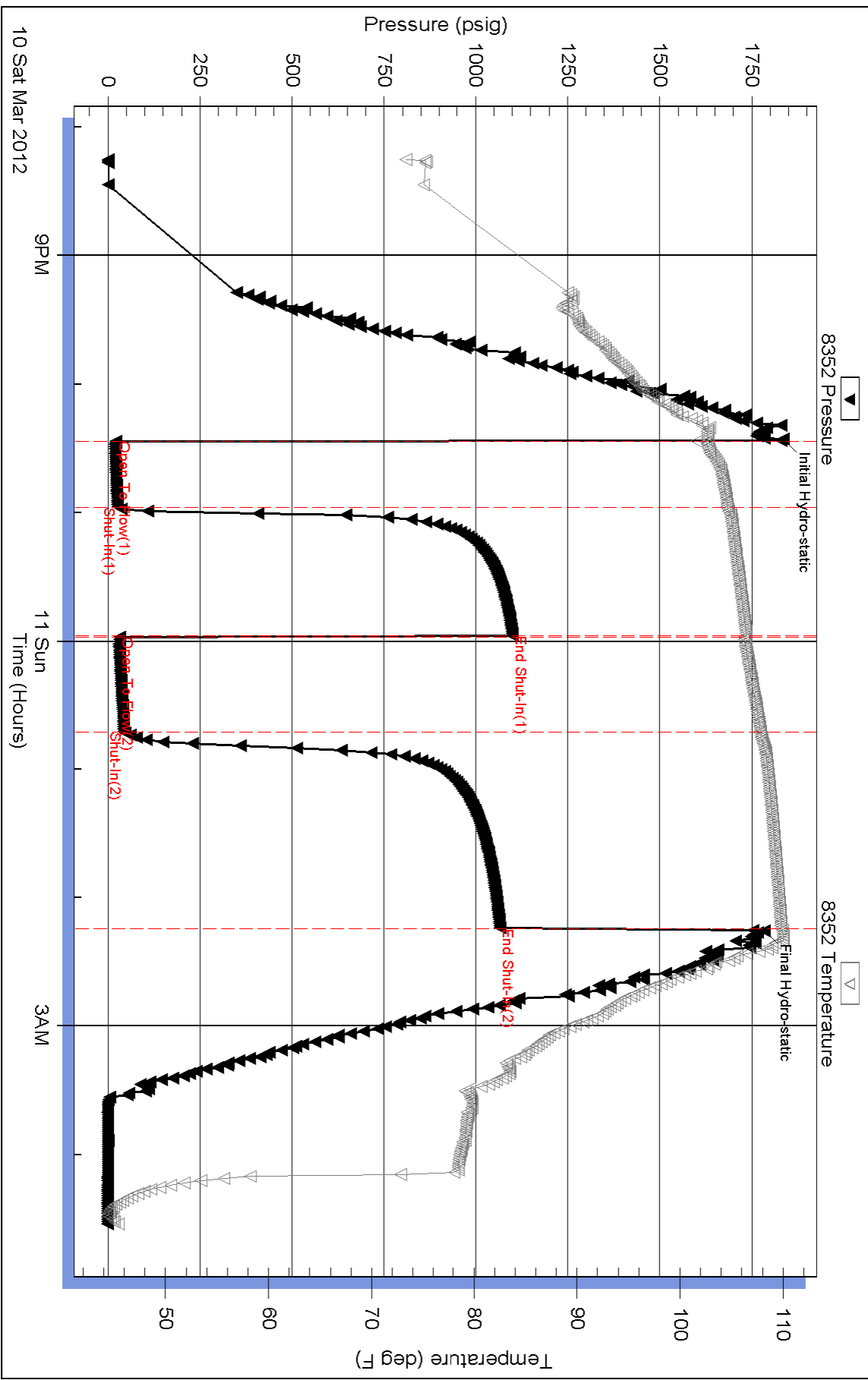
Serial #: 8352

Outside Kabzuba Oil & Gas Inc

Jensen Tr 34-9-11-19

DST Test Number: 3

Pressure vs. Time



Triobite Testing, Inc

Ref. No: 46809

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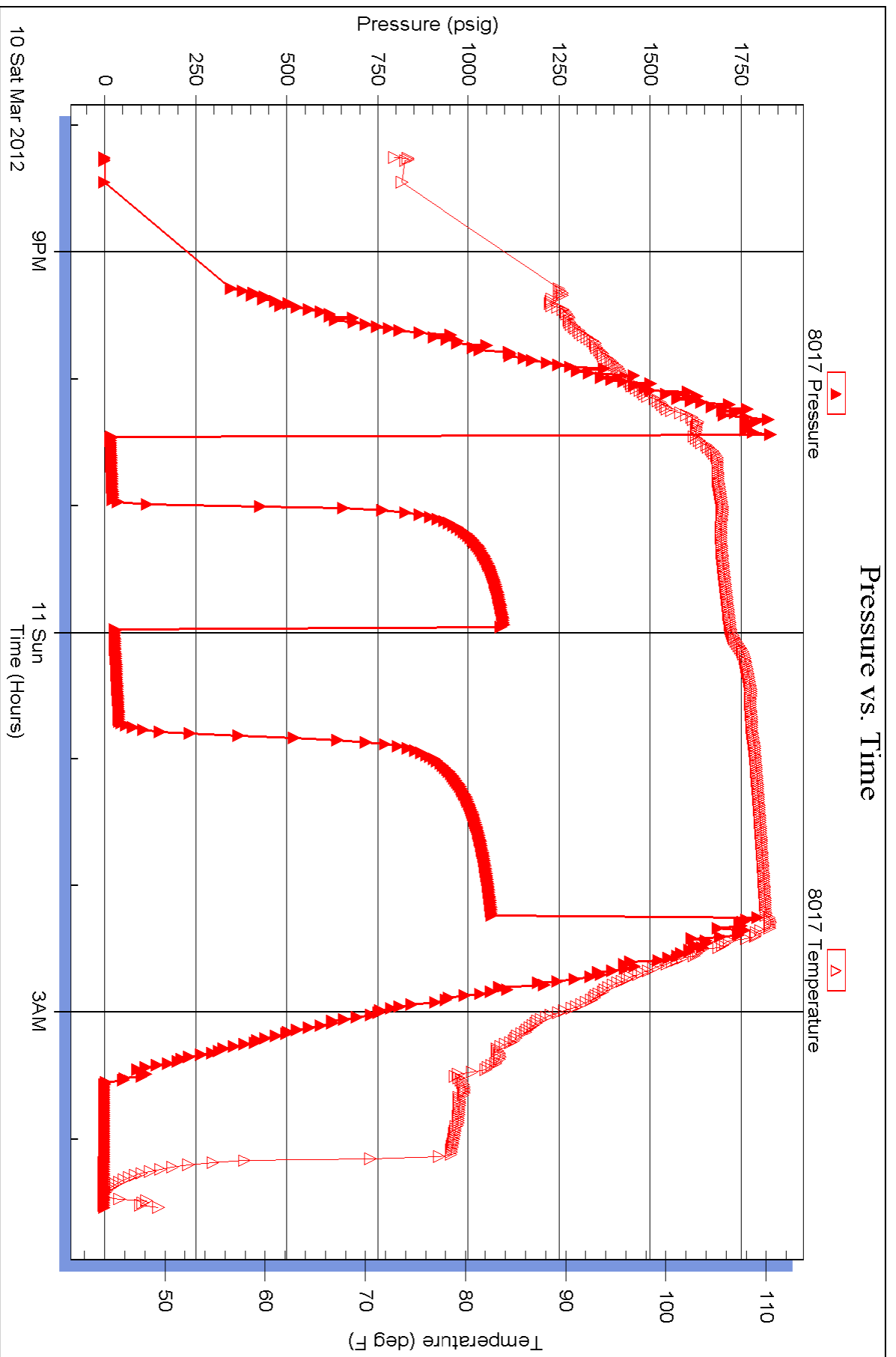
Serial #: 8017

Inside

Klabzuba Oil & Gas inc

Jensen Tr 34-9-11-19

DST Test Number: 3





CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 33927

LOCATION Oakley

FOREMAN Fuzz

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

FIELD TICKET & TREATMENT REPORT
CEMENT

KS

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY												
3-3-12	4471	Jensen Tract 39-9-11-19	34	11	19	Ellis												
CUSTOMER Klabzuba Oil & Gas			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>456</td> <td>Miles S</td> <td></td> <td></td> </tr> <tr> <td>460</td> <td>Bobby S</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	456	Miles S			460	Bobby S		
TRUCK #	DRIVER	TRUCK #					DRIVER											
456	Miles S																	
460	Bobby S																	
MAILING ADDRESS																		
CITY	STATE	ZIP CODE																

JOB TYPE Surf HOLE SIZE 17 1/4 HOLE DEPTH 765' CASING SIZE & WEIGHT 8 5/8 - 24#
 CASING DEPTH 263' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.7 SLURRY VOL 136 WATER gal/sk 6.5 CEMENT LEFT in CASING _____
 DISPLACEMENT 15.7 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safely mixing on truck with #6. Pick up and circulate 10 min
mix 200 SKS CLASS 'A' 3070-2 207000. Drop plug and
displace 15 3/4 PBL. Cement did circulate approx 4 PBL
To pit

Thanks Fuzz

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	1075.00	1075.00
5406	210	MILEAGE	9.52	2000.00
5407A	9.4 den	Ten mileage Delivery	70.00	677.92
11045	200 SKS	CLASS 'A' cement	17.65	3530.00
1102	564 #	calcium chloride	.89	501.96
1112B	376 #	Bentonite	.25	94.00
4432	1	307 wood cup plug	96.00	96.00
		sub total		6134.98
		100.10% disc		.613498
				5521.98
		SALES TAX		
		ESTIMATED TOTAL		

AUTHORIZATION [Signature] 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.



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 33895
LOCATION Oakley, KS
FOREMAN Walt Dinkel

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

FIELD TICKET & TREATMENT REPORT

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-12-12		Jensen Trust 34-9-11-1A	34	11 ^S	19 ^W	Ellis
CUSTOMER Klabzuba Oil & Gas			Yocanville			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY			456-T118	Miles Shaw		
STATE			466	Cory Davis		
ZIP CODE			466-T129	Cory Ricks		

JOB TYPE Prod-DV HOLE SIZE 7 7/8 HOLE DEPTH 3795' CASING SIZE & WEIGHT 5 1/2-18.5
 CASING DEPTH 3785' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.8-12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 21'
 DISPLACEMENT 90% DISPLACEMENT PSI _____ MIX PSI _____ RATE 6-7 BPM

REMARKS: Safety Meeting, Rig up on Smith, mud #2, circ casing on bottom
30 min. pump 500 gal mud flush, mix 130 sks o/w, 5# Kalseal
clear Pump + Lines, Displace 40 BBL H₂O + 50's BBL mud, at 600# hand plug
2 1100# DV Tool, circ 2 Hrs, mix 30 sks in P.H.
mix 400 sks 60/40 prod, 8% lat, 14# Flo-Seal, release Tool, Displaced 49 1/2 BBL
H₂O @ 550# Landrel Dis @ 1500#, released Pressure, Tool Hold

Comment Dd. Circ

Thank You
Walt+Cred

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	2850 ⁰⁰	2,850 ⁰⁰
5406	40	MILEAGE	500	200 ⁰⁰
1126	130 - sks	O/W	22 ⁵⁵	2,931 ⁵⁰
1131	430 - sks	60/40 prod	15 ¹⁰	6,493 ⁰⁰
1118B	2960 #	Bentonite	.25	740 ⁰⁰
1110A	650 #	Kalseal	.56	364 ⁰⁰
1107	108 #	Flo-Seal	2 ⁸²	304 ³⁰
11446	500 gal	Mud Flush	1 ⁰⁰	500 ⁰⁰
5407A		Ton Mileage Delivery	1 ⁶⁷	1,643 ²⁰
4155	1	AFU Floe ⁺ Slice	413 ⁰⁰	413 ⁰⁰
4130	8	Centralizers	58 ⁰⁰	464 ⁰⁰
4104	2	Baskets	276 ⁰⁰	552 ⁰⁰
4283	1	DV Tool w/ Catchbottom	3,850 ⁰⁰	3,850 ⁰⁰
				21,305 ²⁶
		Less 10% Disc	-	2,130 ⁵³
				19,174 ⁷³

SALES TAX _____
ESTIMATED TOTAL _____
AUTHORIZATION [Signature] TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's