



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1194037
OIL & GAS CONSERVATION DIVISION

Form ACO-1
August 2013

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

- Confidentiality Requested
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____

1194037

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	Becker Oil Corporation
Well Name	Mount Casino 1
Doc ID	1194037

Tops

Name	Top	Datum
Stone Corral	1058	(+1025)
Heebner	4259	(-2176)
Lansing Group	4446	(-2363)
Marmaton Group	4989	(-2906)
Pawnee	5078	(-2995)
Cherokee Shale	5135	(-3052)
Morrow	5256	(-3173)
Miss. Chester	5276	(-3193)
St. Genevieve	5350	(-3267)
TD (DrIr)	5360	(-3277)
TD (DrIr)	5360	(-3277)

Form	ACO1 - Well Completion
Operator	Becker Oil Corporation
Well Name	Mount Casino 1
Doc ID	1194037

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
surface	12.25	8.625	24	725	lite	225	3%cc, 1/4# Flo-seal
surface	12.25	8.625	24	725	common	125	3% cc
production	7.875	5.5	15.5	5359	Class A	215	6% gyp, 10% salt
production	7.875	5.5	15.5	5359	Class A	215	1/4# Flo-seal, .3% FL-160



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Becker Oil Corp.

30=32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51781

DST#: 1

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.21 @ 17:27:20

GENERAL INFORMATION:

Formation: **Lans. C**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 19:53:20

Time Test Ended: 03:21:50

Test Type: Conventional Bottom Hole (Initial)

Tester: Gary Pevoteaux

Unit No: 56

Interval: 4482.00 ft (KB) To 4528.00 ft (KB) (TVD)

Reference Elevations: 2083.00 ft (KB)

Total Depth: 4528.00 ft (KB) (TVD)

2073.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Poor

KB to GR/CF: 10.00 ft

Serial #: 8352

Inside

Press @ Run Depth: 1564.92 psig @ 4483.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.11.21

End Date:

2013.11.22

Last Calib.:

2013.11.22

Start Time:

17:27:25

End Time:

03:21:50

Time On Btm:

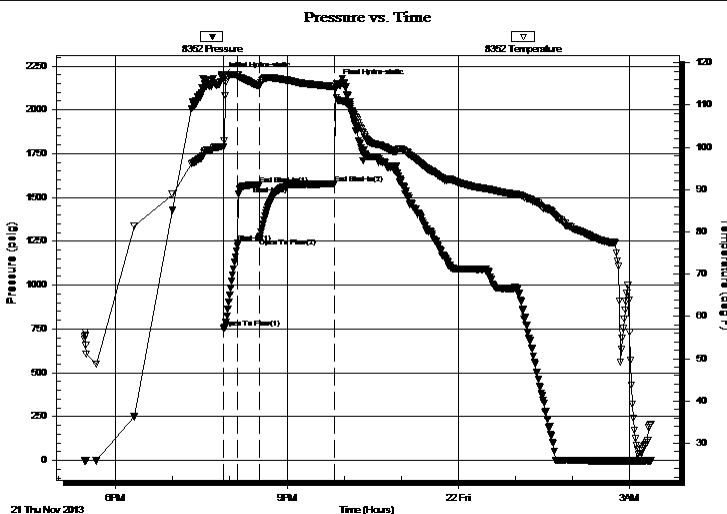
2013.11.21 @ 19:51:35

Time Off Btm:

2013.11.21 @ 21:51:50

TEST COMMENT: IF: Strong blow . B.O.B. in 15 secs.
IS: Weak blow . 1 - 2 1/2".
FF: Strong blow . B.O.B. in 20 secs.
FS: Strong blow . B.O.B. GTS in 25 mins.

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2188.10	100.19	Initial Hydro-static
2	752.89	100.07	Open To Flow (1)
17	1239.35	117.08	Shut-In(1)
40	1574.15	114.64	End Shut-In(1)
40	1272.39	114.51	Open To Flow (2)
69	1564.92	115.89	Shut-In(2)
119	1577.39	114.34	End Shut-In(2)
121	2150.93	111.74	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
2170.00	GCW/ w few o specs 4%g 96%w	29.35
0.00	Rw .17 ohms @38deg	0.00
180.00	GM&OCW 20%g 9%m 18%o 53%w	2.52
250.00	GM&OCW 28%g 10%m 30%o 32%w	3.51
370.00	GM&WCO 28%g 10%m 24%w 38%o	5.19
500.00	SOCGM 3%o 45%g 52%m	7.01

Gas Rates

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Becker Oil Corp.

30=32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51781

DST#: 1

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.21 @ 17:27:20

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:

85000 ppm

Viscosity: 46.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 12400.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbbl
2170.00	GCW/ w few o specs 4%g 96%w	29.346
0.00	Rw .17 ohms@38deg	0.000
180.00	GM&OCW 20%g 9%m 18%o 53%w	2.525
250.00	GM&OCW 28%g 10%m 30%o 32%w	3.507
370.00	GM&WCO 28%g 10%m 24%w 38%o	5.190
500.00	SOCGM 3%o 45%g 52%m	7.014

Total Length: 3470.00 ft

Total Volume: 47.582 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

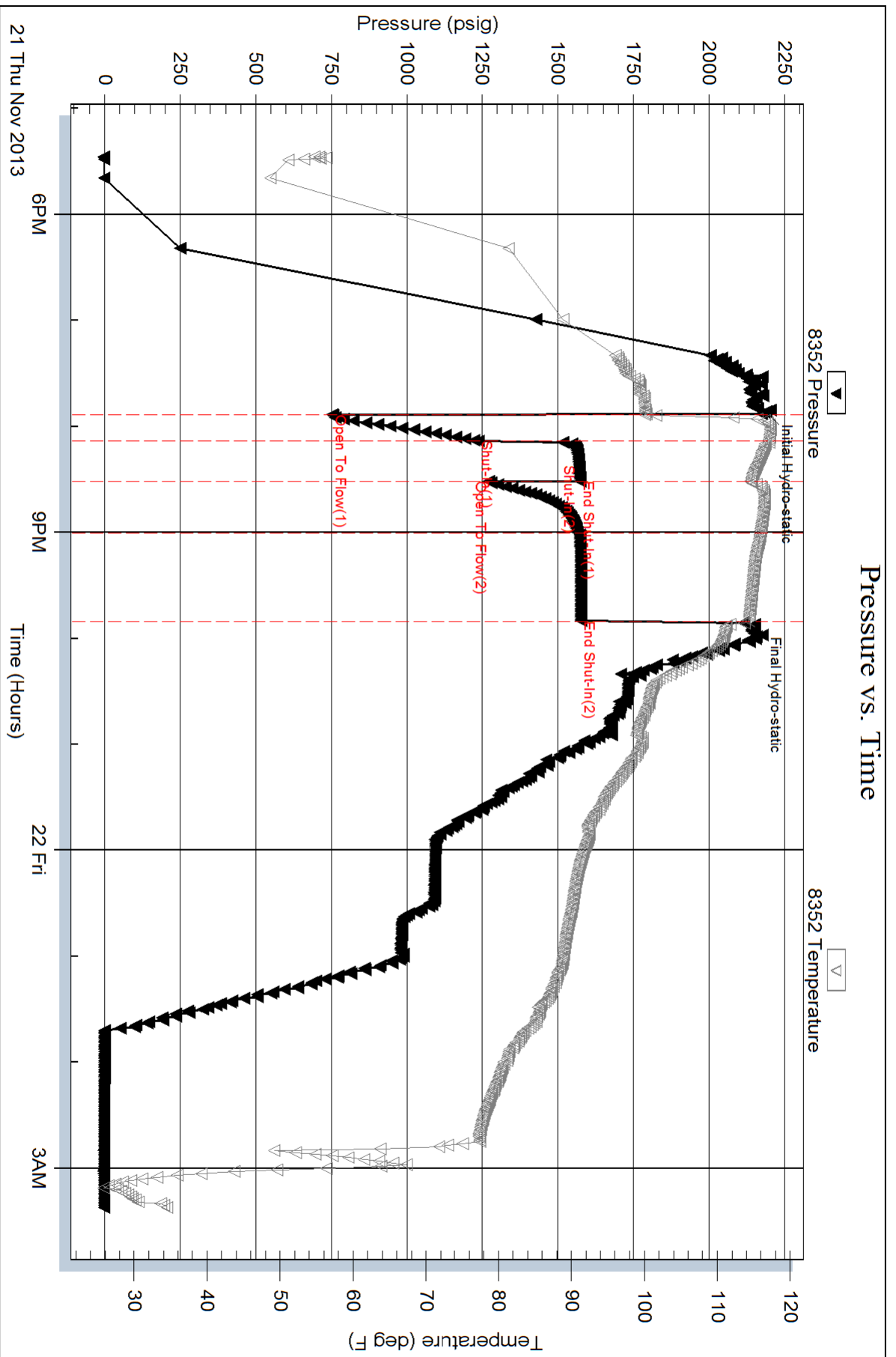
Serial #: 8352

Inside

Becker Oil Corp.

Mount Casino #1

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 51781

Printed: 2013.11.22 @ 06:27:41



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Becker Oil Corp.

30=32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51782

DST#: 2

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.23 @ 16:44:23

GENERAL INFORMATION:

Formation: **Swope**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 18:52:53

Time Test Ended: 00:35:38

Test Type: Conventional Bottom Hole (Reset)

Tester: Gary Pevoteaux

Unit No: 56

Interval: 4811.00 ft (KB) To 4915.00 ft (KB) (TVD)

Reference Elevations: 2083.00 ft (KB)

Total Depth: 4528.00 ft (KB) (TVD)

2073.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 10.00 ft

Serial #: 8352 Inside

Press@RunDepth: 131.31 psig @ 4812.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.11.23

End Date:

2013.11.24

Last Calib.:

2013.11.24

Start Time: 16:44:28

End Time:

00:35:37

Time On Btm:

2013.11.23 @ 18:50:53

Time Off Btm:

2013.11.23 @ 22:13:38

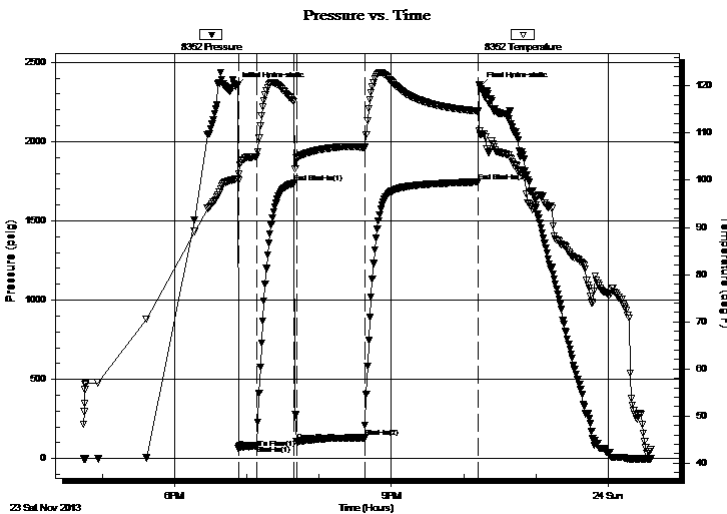
TEST COMMENT: IF:Strong blow . B.O.B. in 30 secs.GTS in 9 mins.(see gas flow report)

IS:Weak blow . 1/2".

FF:Strong blow . (see gas flow report)

FS:Weak blow . 1 - 2".

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2349.41	100.24	Initial Hydro-static
2	61.87	99.96	Open To Flow (1)
18	81.92	104.99	Shut-In(1)
49	1737.99	116.64	End Shut-In(1)
51	106.90	104.74	Open To Flow (2)
107	131.31	106.92	Shut-In(2)
201	1745.49	114.64	End Shut-In(2)
203	2346.67	109.65	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
205.00	GCM 8%g 92%m	1.78

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.25	5.00	30.46
Last Gas Rate	0.38	39.00	194.88
Max. Gas Rate	0.38	39.00	194.88

* Recovery from multiple tests



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Becker Oil Corp.

30=32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51782

DST#: 2

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.23 @ 16:44:23

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:

10000 ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 12.79 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 10000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
205.00	GCM 8%g 92%m	1.782

Total Length: 205.00 ft Total Volume: 1.782 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Becker Oil Corp.

30=32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51782

DST#: 2

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.23 @ 16:44:23

Gas Rates Information

Temperature: 59 (deg F)
Relative Density: 0.65
Z Factor: 0.8

Gas Rates Table

Flow Period	Elapsed Time	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
1	15	0.25	5.00	30.46
2	10	0.38	32.00	169.24
2	20	0.38	35.00	180.23
2	30	0.38	35.00	180.23
2	40	0.38	37.00	187.56
2	50	0.38	38.00	191.22
2	60	0.38	39.00	194.88

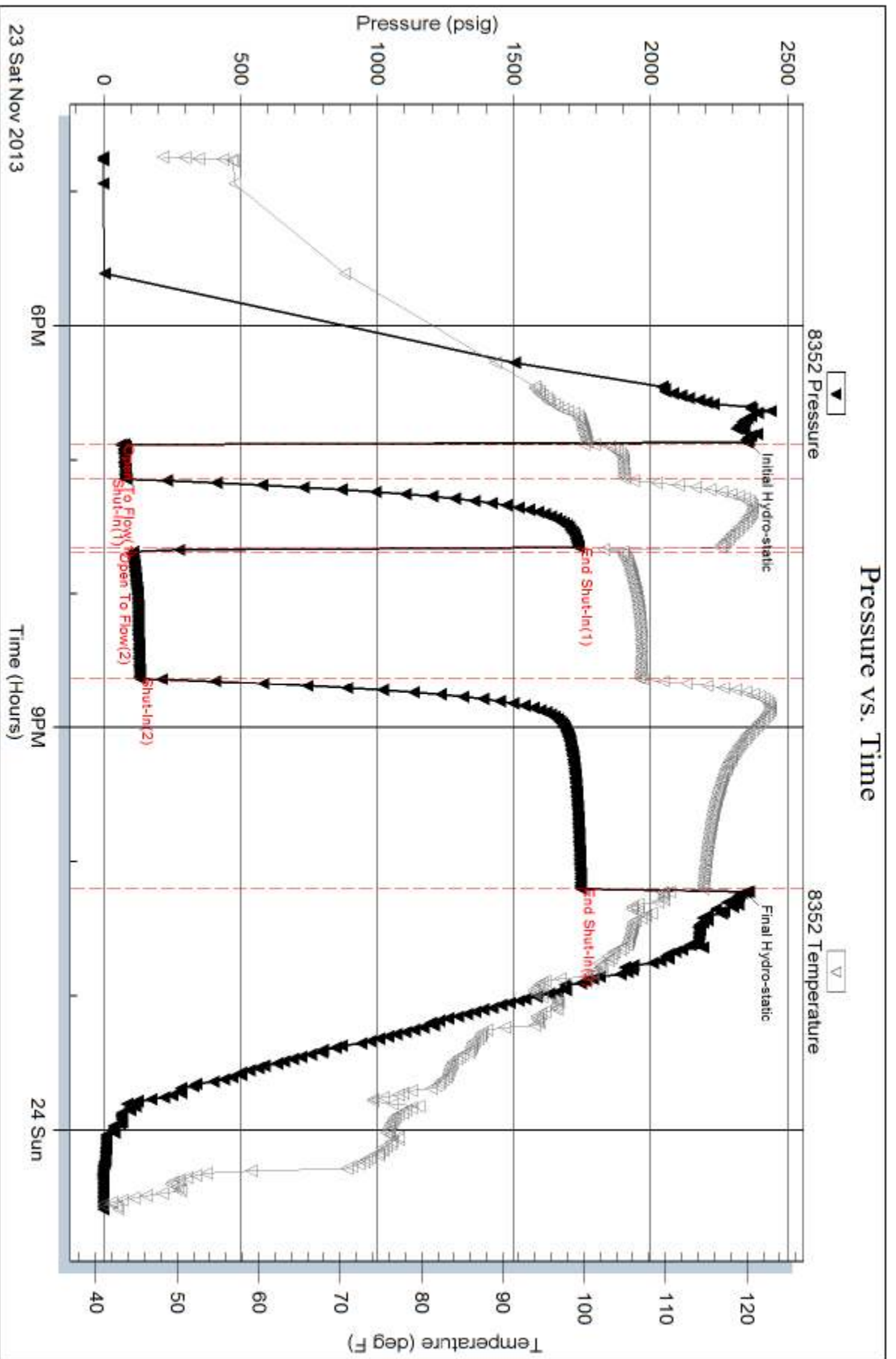
Serial #: 8352

Inside

Becker Oil Corp.

Mount Casino #1

DST Test Number: 2



Trilobite Testing, Inc

Ref. No: 51782

Printed: 2013.11.24 @ 06:41:49



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Becker Oil Corp.

30-32s-22w Clark Ks.

P.O.Box 1150
Ponca City, Ok.74602

Mount Casino #1

Job Ticket: 51783

DST#: 3

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.25 @ 02:02:21

GENERAL INFORMATION:

Formation: **Pawnee**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 04:50:06

Time Test Ended: 10:55:36

Test Type: Conventional Bottom Hole (Reset)

Tester: Gary Pevoteaux

Unit No: 56

Interval: 5072.00 ft (KB) To 5105.00 ft (KB) (TVD)

Reference Elevations: 2083.00 ft (KB)

Total Depth: 5105.00 ft (KB) (TVD)

2073.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Poor

KB to GR/CF: 10.00 ft

Serial #: 8352 Inside

Press@RunDepth: 90.02 psig @ 5073.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2013.11.25 End Date: 2013.11.25

Last Calib.: 2013.11.25

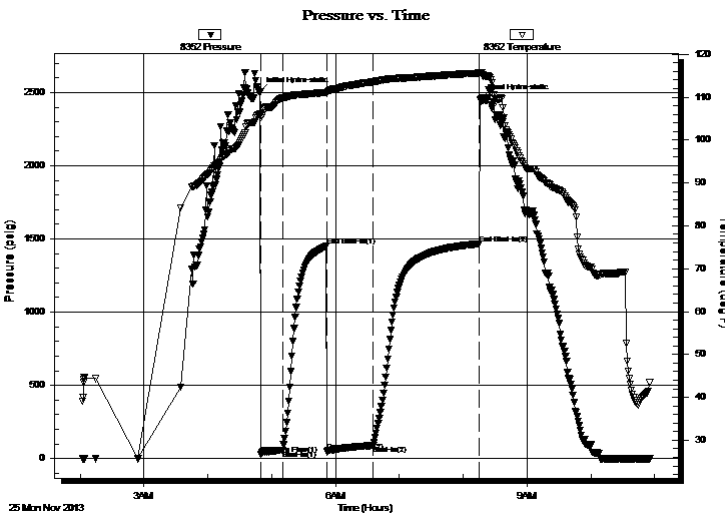
Start Time: 02:02:26 End Time: 10:55:36

Time On Btm: 2013.11.25 @ 04:49:06

Time Off Btm: 2013.11.25 @ 08:16:36

TEST COMMENT: IF:Strong blow . B.O.B. in 11 mins.
IS:Weak blow . 1/4".
FF:Strong blow . B.O.B. in 25 secs.
FS:Weak blow . 1/4 - 1/2".

PRESSURE SUMMARY



Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2504.89	106.02	Initial Hydro-static
1	29.96	105.27	Open To Flow (1)
21	56.45	109.75	Shut-In(1)
63	1450.29	111.12	End Shut-In(1)
63	50.15	110.90	Open To Flow (2)
107	90.02	113.58	Shut-In(2)
207	1467.74	115.61	End Shut-In(2)
208	2458.29	115.77	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
120.00	GOCMW 34%g 21% 14%m 31%w	0.59
95.00	GOCWM 30%g 11%o 25%w 34%m	1.33
0.00	2650 ft.of GIP	0.00

Gas Rates

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

* Recovery from multiple tests



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Becker Oil Corp.

30-32s-22w Clark Ks.

P.O.Box 1150
Ponca City , Ok.74602

Mount Casino #1

Job Ticket: 51783

DST#: 3

ATTN: Clyde M. Becker Jr.

Test Start: 2013.11.25 @ 02:02:21

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:

70000 ppm

Viscosity: 48.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 12.79 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 10000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
120.00	GOCMW 34%g 21% 14%m 31%w	0.590
95.00	GOCWM 30%g 11%o 25%w 34%m	1.333
0.00	2650 ft.of GIP	0.000

Total Length: 215.00 ft Total Volume: 1.923 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #: none

Laboratory Name:

Laboratory Location:

Recovery Comments:

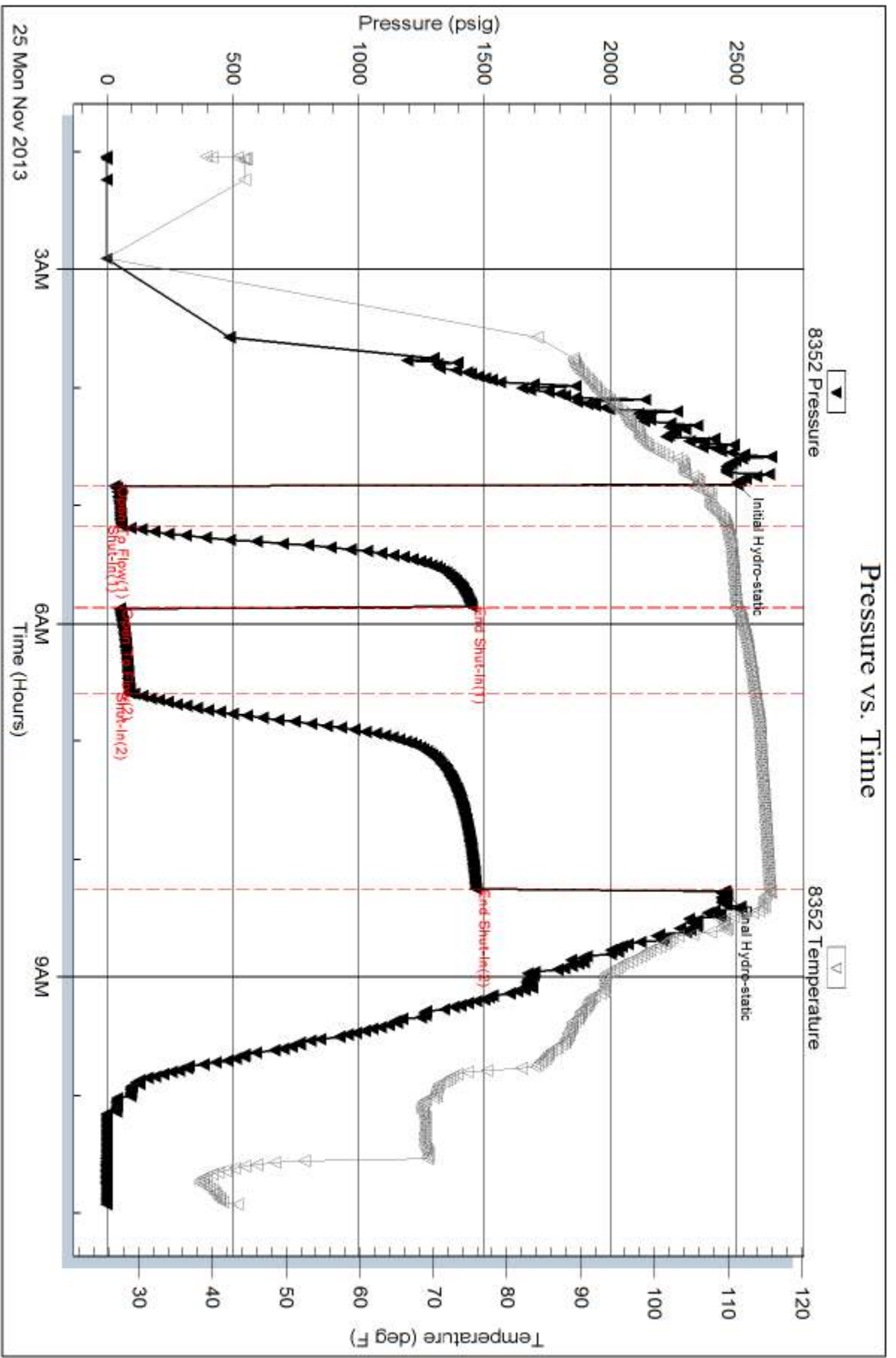
Serial #: 8352

Inside

Becker Oil Corp.

Mount Casino #1

DST Test Number: 3



ALLIED OIL & GAS SERVICES, LLC 059611

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT:
Adrian Lodge

DATE <u>11-14-13</u>	SEC. <u>30</u>	TWP. <u>32S</u>	RANGE <u>22W</u>	CALLED OUT	ON LOCATION <u>6:00pm</u>	JOB START <u>9:00pm</u>	JOB FINISH <u>10:00pm</u>
LEASE <u>Casino</u>	WELL# <u>1</u>	LOCATION <u>Ashland & North on Rd 20 2 1/2 W</u>			COUNTY <u>Clacke</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			East into				

CONTRACTOR Pickard OWNER Becker Oil Corp

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 730 CEMENT AMOUNT ORDERED 225 Sx 65:35+6% G+113% U

CASING SIZE 8 5/8 DEPTH 725 1 1/4 # Flseal

TUBING SIZE DEPTH 180 Sx Class A+ 30% CC

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM COMMON A 125 Sx @ 17.90 2237.50

MEAS. LINE SHOE JOINT 42' POZMIX @

CEMENT LEFT IN CSG. 42' GEL @

PERFS. CHLORIDE 12 Sx @ 64.00 768.00

DISPLACEMENT 44 3/4 ASC @

EQUIPMENT ALW 225 Sx @ 16.50 3712.50

PUMP TRUCK CEMENTER Jake Heman Flseal 56 # @ 2.97 1663.2

558/555 HELPER Scott Priddy

BULK TRUCK # 561/553 DRIVER James Bowen

BULK TRUCK # DRIVER

HANDLING 390.30 @ 2.48 967.94

MILEAGE 837.50 / 2.60 2177.50

TOTAL 10,029.76

REMARKS:

Pipe on Bottom / Break circ.
Pressure test 1000PSI
Mix + Pump lead cut, Mix + Pump Tailcut
Stop shut in Sweep valves Release plug
Start disp. Contain Dump plug
Cont did circ

SERVICE

DEPTH OF JOB 725'

PUMP TRUCK CHARGE 2058.50

EXTRA FOOTAGE @

MILEAGE 50 @ 7.70 385.00

MANIFOLD @ 275.00

LV 50 @ 4.40 220.00

@

TOTAL 2938.50

CHARGE TO: Becker Oil Corp

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

Top Rubber plug @ 76.25

1- Baffle plate @ 67.50

@

@

@

TOTAL 143.75

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.

SALES TAX (If Any) _____

TOTAL CHARGES 13,112.01

DISCOUNT _____ IF PAID IN 30 DAYS

NET 9807.70

PRINTED NAME Jerry A. Lev

SIGNATURE [Signature]

ALLIED OIL & GAS SERVICES, LLC 061067

Federal Tax I.D. # 20-8651475

REMIT TO P.O. BOX 93999
SOUTHLAKE, TEXAS 76092

SERVICE POINT: Crown Point, KS

DATE <u>11-27-13</u>	SEC. <u>30</u>	TWP. <u>32S</u>	RANGE <u>22W</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30 AM</u>	JOB FINISH <u>7:00 PM</u>
LEASE <u>Mountain Casino</u>		WELL# <u>1</u>		LOCATION <u>Ashland 23/4N</u>		COUNTY <u>Clark</u>	STATE <u>KS</u>
OLD OR NEW (Circle one) <u>Fixed</u>							

CONTRACTOR Pickrell Drilling #1

TYPE OF JOB 5 1/2 production

HOLE SIZE 7 1/4 T.D.

CASING SIZE 5 1/2 DEPTH 5363

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 14.20 CT

PERFS.

DISPLACEMENT 127 bbls Freshwater

OWNER _____

CEMENT

AMOUNT ORDERED 215 SKS class A

64 gals 10% salt T5# Kalsol 76 PT-100 14 DF

50 SKS 60% class A 40% 42 gal

COMMON	<u>30</u>	@ <u>17.90</u>	<u>537.00</u>
POZMIX	<u>20</u>	@ <u>9.35</u>	<u>187.00</u>
GEL	<u>2</u>	@ <u>23.40</u>	<u>46.80</u>
CHLORIDE		@	
ASC	<u>215</u>	@ <u>20.90</u>	<u>4493.00</u>
	<u>500 gal DV-1100</u>	@ <u>1.27</u>	<u>635.00</u>
	<u>Kalsol 1075</u>	@ <u>.98</u>	<u>1053.00</u>
	<u>FI-160 60</u>	@ <u>18.90</u>	<u>1134.00</u>
	<u>DF 30</u>	@ <u>9.80</u>	<u>294.00</u>
		@	
		@	
		@	
		@	
HANDLING	<u>329.91</u>	@ <u>2.48</u>	<u>818.17</u>
MILEAGE	<u>14.26 x 50 x</u>	<u>2.60</u>	<u>1.853.00</u>
			TOTAL <u>11,052.77</u>

EQUIPMENT

PUMP TRUCK CEMENTER Dustin Chambers

796 HELPER Mike Scarborough

BULK TRUCK

609-112 DRIVER Kevin Weigand

BULK TRUCK

421-290 DRIVER

REMARKS:

Pump pulled out 500# pump 550 gal mud flush
plug BH-30 SKS plug MH-20 SF
Mud 715 SKS down hole shut down & wash lines
Release Plug
Displace 127 bbls Freshwater and plug @
1500 # Release pressure casing did not
fold pump back down shut in @ 1500 #
plug down 600 gal
3 hr wait time

CHARGE TO: Becker Oil Corp

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>5363</u>		
PUMP TRUCK CHARGE	<u>3099.25</u>		
EXTRA FOOTAGE	@		
MILEAGE <u>Hwy</u>	<u>50</u>	@ <u>7.70</u>	<u>385.00</u>
MANIFOLD <u>Hand</u>		@ <u>275.00</u>	<u>275.00</u>
	<u>Hwy 50</u>	@ <u>4.40</u>	<u>220.00</u>
		@	
			TOTAL <u>3,979.25</u>

PLUG & FLOAT EQUIPMENT

<u>8 5/8 cementizers</u>	@ <u>33.75</u>	<u>270.00</u>
<u>1 3/4 Trencher</u>	@ <u>45.00</u>	<u>585.00</u>
<u>1-5/8 gal de hose</u>	@ <u>118.75</u>	<u>118.75</u>
<u>1-5/8 insert</u>	@ <u>103.75</u>	<u>103.75</u>
<u>1-5/8 rubber plug</u>	@ <u>51.25</u>	<u>51.25</u>
		TOTAL <u>1,128.75</u>

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 X Mike Kern

SIGNATURE X Mike Kern

Thank You!!!

SALES TAX (if Any) _____

TOTAL CHARGES 16,160.77

DISCOUNT 3,758.00 IF PAID IN 30 DAYS

12,402.77