KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5399
Name: American Energies Corporation
Address: 155 North Market, Suite 710
City/State/Zip: Wichita, Kansas 67202
Purchaser:
Operator Contact Person: Alan L. DeGood, President
Phone: (316) 263-5785
Contractor: Name: Shields Drilling Co., Inc.
License: 5184
Wellsite Geologist: Randy Kilian

Designate Type of Completion:
X New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
X Dry ____ Other (Core, WSW, Expl., Cathodic, 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./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No.
____ Dual Completion Docket No.
____ Other (SWD or Enhr.?) Docket No.

6/25/02	7/02/02	7/02/02
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-25142-0000
County: Ellis
130' NE of S/2 - S/2 - S/2 Sec. 20 Twp. 11S S. R. 19 ☐ East ☒ West
450 feet from (S) / N (circle one) Line of Section
2,670 feet from E / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Wild Bill Well #: 2
Field Name: Zerfas
Producing Formation: D & A
Elevation: Ground: 1953 Kelly Bushing: 1958
Total Depth: 3528 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at 5 jts new 23# set @ 259' 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 P+A EH 7.22.02
(Data must be collected from the Reserve Pit)
Chloride content 53,000 ppm Fluid volume 850 bbls
Dewatering method used Transferred fluids to Shield's Oil Producers, Inc. well
Location of fluid disposal if hauled offsite:
Operator Name: Shields Oil Producers, Inc.
Lease Name: Greathouse #4 License No.: 5184
Quarter ____ Sec. 20 Twp. 11 S. R. 19 ☐ East ☐ West
County: Ellis Docket No.: D-26,254

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Alan L. DeGood
Title: Alan L. DeGood, President Date: 7/17/02

Subscribed and sworn to before me this 17th day of July, 2002.
Notary Public: Melinda S. Wooten
Date Commission Expires: 3-12-04 Melinda S. Wooten

STATE OF KANSAS NOTARY PUBLIC MELINDA S. WOOTEN My Appt. Exp. 3-12-04

KCC Office Use ONLY
✓ NO Letter of Confidentiality Attached
If Denied, Yes ☐ Date:
✓ Wireline Log Received
✓ Geologist Report Received
____ UIC Distribution

Operator Name: American Energies Corporation Lease Name: Wild Bill Well #: 2

Sec. 20 Twp. 11S S. R. 19W ☐ East ☒ West County: Ellis

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☒ Yes ☐ No
(Attach Additional Sheets)
See Attachment
Samples Sent to Geological Survey ☐ Yes ☒ No
Cores Taken ☐ Yes ☒ No
Electric Log Run ☒ Yes ☐ No
(Submit Copy)

List All E. Logs Run:

Compensated Density Neutron
Dual Induction

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
See Attachment		

CASING RECORD ☒ New ☐ 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
Surface	12 1/4"	8 5/8"	23#	259'	60/40 poz	160	3% CaCl 2% gel

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 *(Amount and Kind of Material Used)*	Depth

TUBING RECORD Size Set At Packer At Liner Run ☐ Yes ☐ No

Date of First, Resumerd 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 METHOD OF COMPLETION Production Interval

☐ Vented ☐ Sold ☐ Used on Lease ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
(If vented, Sumit ACO-18.)
☐ Other *(Specify)*