

ORIGINAL

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

Handwritten initials and date: K, 12/3/08

Operator: License # 33640
Name: Haas Petroleum, LLC
Address: 800 W. 47th, Suite # 409
City/State/Zip: Kansas City, Missouri 64112
Purchaser: Plains Marketing
Operator Contact Person: Mark Haas
Phone: (816) 531-5922
Contractor: Name: Leis Oil Services LEIS, JOHN E.
License: 32079

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 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. _____

August 13, 2008	August 13, 2008	August 15, 2008
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 003-24568-00-00
County: Anderson
SW NE SW NW Sec. 2 Twp. 21 S. R. 19 East West
3465 feet from S N (circle one) Line of Section
4400 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Alice Benjamin Well #: 11-1
Field Name: Garnett Shoestring
Producing Formation: Squirrel
Elevation: Ground: 1069 Kelly Bushing: _____
Total Depth: 860 Plug Back Total Depth: 861
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 20
feet depth to 855 w/ 125 _____ sx.cmt.

Handwritten note: Alt 2 - Dig - 4/2/09

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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: _____
Title: Operator Date: November 7, 2008

Subscribed and sworn to before me this 7th day of November,
2008.

Notary Public: Mary L. Weber
Date Commission Expires: 5-22-2012

MARY L. WEBER
Notary Public - State of Kansas
My Appt. Expires May 22, 2012

KCC Office Use ONLY
(Initialed)
 Letter of Confidentiality Received *(as 'ENHR')*
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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DEC 01 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Haas Petroleum, LLC Lease Name: Alice Benjamin Well #: 11-1
 Sec. 2 Twp. 21 S. R. 19 East West County: Anderson

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)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Log Formation (Top); Depth and Datum Sample

Name _____ Top _____ Datum _____

SEE ATT.

*WCC
my
12/01/08*

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
Surface	7	9 7/8		23	Regular	8	
Longstring	5 5/8	2 7/8		855	50/50 Poz	125	

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				

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
	Perforations (2) Per Foot, (10) Perforations (3) Additional		
	Perforated from 796.5 to 802.0		

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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 16336
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/14/08	3451	A Benjamin # 11-J	2	21	19	AN
CUSTOMER Haas Petroleum			TRUCK #			
MAILING ADDRESS 800 W. 47th St			DRIVER		TRUCK #	
CITY Kansas City			DRIVER		TRUCK #	
STATE Mo			DRIVER		TRUCK #	
ZIP CODE 64112			DRIVER		TRUCK #	
JOB TYPE <u>Longstring</u>			HOLE SIZE <u>5 7/8</u>		HOLE DEPTH <u>860'</u>	
CASING DEPTH <u>855'</u>			DRILL PIPE		TUBING	
SLURRY WEIGHT			SLURRY VOL		WATER gal/sk	
DISPLACEMENT <u>5 BBL</u>			DISPLACEMENT PSI		MIX PSI	
					CEMENT LEFT in CASING <u>2 1/2" Plug</u>	
					RATE <u>5 BPM</u>	

REMARKS: Check casing depth w/ wireline. Mix + Pump 100# Premium Gel Flush. Mix + Pump 127 sks 50/50 Por Mix Cement 220 gal. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 5 BBL Fresh water. Pressure to 650 PSI. Release pressure to set Float Valve. Shut in casing.

Fred Mader

John Heis Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	495	925.00
5406	25 mi	MILEAGE Pump Truck	495	91.25
5407	1/2 Minimum	Ten Mileage.	237	157.50
5501C	1 1/2 hrs	Transport 505/7106		168.00
1124	125 sks	50/50 Por Mix Cement		1218.75
114B	312#	Premium Gel		53.04
4402	1	2 1/2" Rubber Plug		23.00
Sub Total				2636.54
Tax @ 6.3%				88.05
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SALES TAX ESTIMATED TOTAL				2724.59

AUTHORIZATION John

TITLE 224762

DATE

