

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

NOV 17 2008

CONSERVATION DIVISION  
WICHITA, KS

Operator: License # 32709  
Name: Tim Splechter  
Address: 1586 Hwy 54  
City/State/Zip: Yates Center  
Purchaser: Maclaskey  
Operator Contact Person: Tim Splechter  
Phone: (620) 496 6100  
Contractor: Name: John Leis  
License: 32079  
Wellsite Geologist: Tim Splechter

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. \_\_\_\_\_

2008 3/30/08 4/2/08 4/5/08  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date

API No. 15 - 207-27347-0000

County: Woodson

ne - sw - sw - Sec. 8 Twp. 25 S. R. 16  East  West

755 feet from S / N (circle one) Line of Section

855 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: GRISIER Well #: 3-07

Field Name: Owl Creek

Producing Formation: Squirrel

Elevation: Ground: na Kelly Bushing: \_\_\_\_\_

Total Depth: 1027.5/1040 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 40' Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from top

feet depth to 40 w/ na sx cmt.

Drilling Fluid Management Plan AH II NCR 3-24-09

(Data must be collected from the Reserve Pit)

Chloride content na ppm Fluid volume na bbls

Dewatering method used na air dry evaporation

Location of fluid disposal if hauled offsite:

Operator Name: Tim Splechter

Lease Name: Splechter License No.: 32709

Quarter sw Sec. 8 Twp. 25 S. R. 16  East  West

County: Woodson Docket No.: na

**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: Tim Splechter

Title: owner Date: 11/12/08

Subscribed and sworn to before me this 12 day of November

2008

Notary Public: Saundra S. Hite

Date Commission Expires: 3-22-2010

**SAUNDRA S. HITE**  
Notary Public - State of Kansas  
My Appt. Expires 3-22-2010

**KCC Office Use ONLY**

Letter of Confidentiality Received

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED  
KANSAS CORPORATION COMMISSION  
JAN 28 2009

CONSERVATION DIVISION  
WICHITA, KS

Operator Name: Tim Splechter Lease Name: GRISIER Well #: 3-07  
 Sec. 8 Twp. 25 S. R. 16  East  West County: Woodson

**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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<i>Synward Formation 956-980</i>	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RECEIVED KANSAS CORPORATION COMMISSION	
List All E. Logs Run:	NOV 17 2008		
<i>Gamma Ray / Neutron / CCL</i>	CONSERVATION DIVISION WICHITA, KS		
<i>copy already submitted</i>			

*1/28/09*

CASING RECORD <input type="checkbox"/> New <input checked="" 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
longstring	5 5/8	2 7/8	na	1027	60/40 pozmix	130	2% gel
Surface	12"	7"	na	40	<i>hand mixed by driller (85x) filled bottom to top</i>		

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	
2	perf 958-978	acid spot/ frac with sand 60sx	6227

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TUBING RECORD	Size <u>1"</u> Set At <u>1025</u> Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	JAN 28 2009
Date of First, Resumed Production, SWD or Enhr.	Producing Method	CONSERVATION DIVISION WICHITA, KS	
<u>4/15/08</u>	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. <u>5</u> Gas Mcf <u>5</u> 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: \_\_\_\_\_

165290  
 20 437-2661  
 620 437-7582  
 316 685-5908  
 316-685-5926  
 JSS: 3613A Y Road  
 Madison, KS 66860

Hurricane Services, Inc.  
 P.O. Box 782228  
 Wichita, KS 67278-2228

Cement, Acid or Tools  
 Service Ticket

02360

DATE 4-<sup>5</sup> 2008

COUNTY Woodson CITY \_\_\_\_\_

CHARGE TO Tim Splachter

ADDRESS 1586 Hwy 54 CITY Yates Center ST Ks ZIP 66783

LEASE & WELL NO. Grisier #3-07 CONTRACTOR John Leis

KIND OF JOB LongString SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RNG. \_\_\_\_\_

DIR. TO LOC. \_\_\_\_\_ OLD  NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
130 SKs	60/40 Pozmix cement		1131.00
225 lbs	Gel 2%		45.00
3 Hrs	water Truck #97		225.00
3 Hrs	water Truck #193		225.00
	BULK CHARGE		
5.95 Tons	BULK TRK. MILES		257.40
40	PUMP TRK. MILES		120.00
100 lbs.	Gel Flush		20.00
2	PLUGS 2 7/8" Top Rubber		30.00
		6.32 SALES TAX	77.24
		TOTAL	2830.64

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 NOV 17 2008  
 CONSERVATION DIVISION  
 WICHITA, KS

T.D. 1040'

SIZE HOLE 5 5/8"

MAX. PRESS. \_\_\_\_\_

PLUG DEPTH \_\_\_\_\_

PLUG USED 2 - 2 7/8" Top Rubber Plugs

REMARKS: Rig up to 2 7/8" Tubing, Break circulation with 10 Bbls water, 5 Bbl. Gel Flush, followed with 20 Bbls water. Mixed 130 SKs 60/40 Pozmix cement w/ 2% Gel. Shut down - wash out Pump & Lines - Release Plugs Displace Plugs with 6 Bbl. water. Final Pumping at 400 PSI - Bumped Plug To 1000 PSI - close Tubing in with 1000 PSI. Good cement returns to Surface w/ 5 Bbl slurry.

"Thank you"

EQUIPMENT USED

NAME Kelly Kimbulix UNIT NO. 185

NAME Brad Butler UNIT NO. \_\_\_\_\_

HSI REP. \_\_\_\_\_

NAME Jerry #186, Jason #97, Clayton #193 UNIT NO. \_\_\_\_\_

NAME witnessed by Tim UNIT NO. \_\_\_\_\_

OWNER'S REP. \_\_\_\_\_