

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. MARKET, SUITE 1000
City/State/Zip: WICHITA, KANSAS 67202
Purchaser: BLUESTEM GAS MARKETING / PLAINS MARKETING
Operator Contact Person: DEAN PATTISSON, OPERATIONS MANAGER
Phone: (316) 267-4379 (ext 107)
Contractor: Name: PRATT WELL SERVICE
License: 5822
Wellsite Geologist: _____

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: WOOLSEY PETROLEUM CORPORATION
Well Name: ELLIS G-5
Original Comp. Date: 6/10/1996 Original Total Depth: 5331
____ 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. _____

07/30/2008 08/11/2008
Spud Date or ~~Date Reached TD~~ Completion Date or ~~Recompletion Date~~

API No. 15 - 007 - 22502 00-02
County: BARBER
150'S SW SE NE Sec. 34 Twp. 33 S. R. 14 East West
2460 feet from S (N) (circle one) Line of Section
990 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW
Lease Name: ELLIS G Well #: 5
Field Name: AETNA GAS AREA

Producing Formation: MISSISSIPPIAN
Elevation: Ground: 1699 Kelly-Bushing: 5360 1710
Total Depth: 5331 Plug Back Total Depth: 5284
Amount of Surface Pipe Set and Cemented at 922 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from n/a
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan wo-Dig-4/3/09
(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: Dean Pattison, Operations Manager Date: November 26, 2008

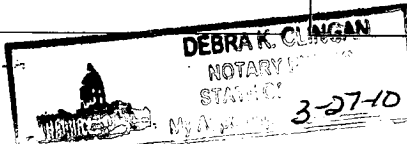
Subscribed and sworn to before me this 26th day of November,
20 08

Notary Public: Debra K. Clingan
Date Commission Expires: March 27, 2010

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
DEC 05 2008



CONSERVATION DIVISION
WICHITA, KS

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: ELLIS G Well #: 5
 Sec. 34 Twp. 33 S. R. 14 East West County: BARBER

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(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
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone (Stalnakar)				

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
2	MISSISSIPPIAN 4782' - 4816' & 4706' - 4756'	ACID: 2650 gal 10% MIRA	4706' -
		FRAC: 554,200 gal treated 2% Kcl wtr, 195,000# 30/70	4816' OA
		sd, 35,000# 16/30 sd & 15,00# 16/30 resin coated sd	
	Composite bridge plug at 4964'		

TUBING RECORD		Size 2 3/8"	Set At 4759'	Packer At n/a	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 8/12/2008			Producing Method <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. 2.5	Gas Mcf 81	Water Bbls. 47	Gas-Oil Ratio 32,400 : 1	Gravity n/a

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 4706' - 4816' OA

