

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 # 33025
Name: Leon C. Smitherman, Jr.
Address: 14331 Tipperary Circle
Wichita, KS 67230
City/State/Zip: _____
Purchaser: NCRA
Operator Contact Person: Leon C. Smitherman, Jr.
Phone: (316) 733-5434
Contractor: Name: Gulick Drilling, Inc.
License: 32854
Wellsite Geologist: Wm. M. Stout

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. _____

10-15-07 10-19-07 12-18-07

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

API No. ⁰¹⁵ 23749-0000
County: Butler
NWNWSE 16 29 4
2310 feet from S N (circle one) Line of Section
2245 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Asmussen Well #: 16-1

Field Name: Asmussen

Producing Formation: Arbuckle

Elevation: Ground: 1212 ft. Kelly Bushing: 1220 ft.

Total Depth: 2700 ft. Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 226 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to AKI - 100' dia _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 1000 ppm Fluid volume 5500 bbls

Dewatering method used Fourthen Pits

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: Leon C. Smitherman, Jr.
Title: Owner/Operator Date: 01/16/08

Subscribed and sworn to before me this 16th day of January

20 08
Notary Public: Stacey Shoemaker

Date Commission Expires: 2/22/10

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received **RECEIVED**
KANSAS CORPORATION COMMISSION

Geologist Report Received
Distribution

JAN 17 2008

CONSERVATION DIVISION
WICHITA, KS

STACEY SHOEMAKER
Notary Public - State of Kansas
MY APPL. EXP. 2/22/10

Operator Name: Leon C. Smitherman, Jr. Lease Name: Asmussen Well #: 16-1
 Sec. 16 Twp. 29 S. R. 4 East West County: Butler

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) 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 (Submit Copy) 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
Surface	12 1/4"	8 5/8"	20#	226'	Class "A"	150	50# cal/chlor 25# Flo-seal
Production	7 7/8"	5 1/2"	14#	2696'	Thick set	100	Kol-seal 50#

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

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TUBING RECORD		Size <u>2 7/8"</u>	Set At <u>2626'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>January 01/2008</u>		Producing Method <input checked="" type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>10</u> Bbls.	Gas <u>Mcf</u>	Water <u>40</u> Bbls.	Gas-Oil Ratio	Gravity <u>32.5</u>

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 2696-2700'

CONSOLIDATED
OIL WELL
SERVICES, LLC

REMIT TO
 Consolidated Oil Well Services, LLC
 Dept. 970
 P.O. Box 4346
 Houston, TX 77210-4346

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8676
 FAX 620/431-0012

Invoice # 217405

Date: 10/19/2007 Terms: Page 1

BITHERMAN JR, LEON
 331 TIPPERARY CIRCLE
 CHITA KS 67230
 16)733-5434

ASMUSSEN 16-1
 12430
 10-15-07

Number	Description	Qty	Unit Price	Total
	CLASS "A" CEMENT (SALE)	150.00	12.2000	1830.00
	CALCIUM CHLORIDE (50#)	400.00	.6700	268.00
	FLO-SEAL (25#)	25.00	1.9000	47.50

Description	Hours	Unit Price	Total
CEMENT PUMP (SURFACE)	1.00	650.00	650.00
EQUIPMENT MILEAGE (ONE WAY)	28.00	3.30	92.40
IN. BULK DELIVERY	1.00	285.00	285.00

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 2145.50 Freight: .00 Tax: 113.71 AR 3286.61
 .00 Misc: .00 Total: 3286.61
 .00 Supplies: .00 Change: .00
 =====

Date _____



**CONSOLIDATED
OIL WELL
SERVICES, LLC**

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE Invoice # 217525
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Invoice Date: 10/23/2007 Terms: Page 1

SMITHERMAN JR, LEON
14331 TIPPERARY CIRCLE
WICHITA KS 67230
(316)733-5434

ASMUSSEN 16-1
12824
10-20-07

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	100.00	15.4000	1540.00
1110A	KOL SEAL (50# BAG)	400.00	.3800	152.00
1123	CITY WATER	3000.00	.0128	38.40
4454	5 1/2" LATCH DOWN PLUG	1.00	220.0000	220.00
4104	CEMENT BASKET 5 1/2"	1.00	200.0000	200.00
4130		7.00	42.0000	294.00
4253	TYPE A PACKER SHOE61/2X6	1.00	1500.0000	1500.00
4306	THREAD LOCK KIT	1.00	20.0000	20.00
4310	MISC. EQUIPMENT	1.00	25.0000	25.00

Description	Hours	Unit Price	Total
436 80 BBL VACUUM TRUCK (CEMENT)	5.00	90.00	450.00
445 CEMENT PUMP	1.00	840.00	840.00
445 EQUIPMENT MILEAGE (ONE WAY)	25.00	3.30	82.50
502 MIN. BULK DELIVERY	1.00	285.00	285.00

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Parts: 3989.40 Freight: .00 Tax: 211.45 AR 5858.35
Labor: .00 Misc: .00 Total: 5858.35
Sublt: .00 Supplies: .00 Change: .00
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Signed _____ Date _____