

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

Operator: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. MARKET, SUITE 1000
City/State/Zip: WICHITA, KANSAS 67202
Purchaser: n/a
Operator Contact Person: DEAN PATTISSON, OPERATIONS MANAGER
Phone: (316) 267-4379 (ext 107)
Contractor: Name: BEREDCO, INC.
License: 5147
Wellsite Geologist: BILLY G. KLAVER

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: n/a

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. D - 30,360

9/21/2008 10/5/2008 1/23/2009
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-23367 0000 Spot: 100' W of NE SE NE
County: BARBER
W2 NE SE NE Sec. 26 Twp. 34 S. R. 13 East West
1650 feet from S / (N) (circle one) Line of Section
430 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: ALLEN C Well #: 1 SWD
Field Name: _____

Producing Formation: _____
Elevation: Ground: 1475 Kelly Bushing: 1488
Total Depth: 6430 Plug Back Total Depth: 6430
Amount of Surface Pipe Set and Cemented at 222 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 AIT I NCR 3-30-09
(Data must be collected from the Reserve Pit):
Chloride content 17,500 ppm Fluid volume 1800 bbls
Dewatering method used HAUL FREE FLUIDS AND ALLOW TO DRY

Location of fluid disposal if hauled offsite:
Operator Name: n/a
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.

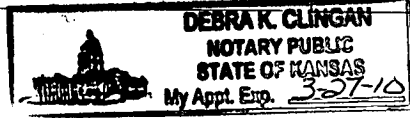
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____
Title: Dean Pattison, Operations Manager Date: January 28, 2009

Subscribed and sworn to before me this 28th day of January,
20 09

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

KCC Office Use ONLY *(Att. approval)*
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
JAN 30 2009



CONSERVATION DIVISION
WICHITA, KS

JAN 19 1980

Side Two

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: ALLEN C Well #: 1 SWD
 Sec. 28 Twp. 34 S. R. 13 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 <i>(Attach Additional Sheets)</i> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Name | Top | Datum |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Chase | 1953 | - 465 |
| Electric Log Run <i>(Submit Copy)</i> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Toronto | 3882 | - 2394 |
| List All E. Logs Run: | | Douglas | 3900 | - 2412 |
| | | Swope | 4511 | - 3023 |
| | | Hertha | 4538 | - 3050 |
| | | Mississippian | 4732 | - 3244 |
| | | Viola | 5143 | - 3655 |
| | | Simpson | 5252 | - 3764 |
| Compensated Neutron Density PE | | | | |
| Dual Induction | | | | |
| Cement Bond | | | | |

| CASING RECORD <input checked="" 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 | 14 3/4" | 10 3/4" | 32# / ft | 222' | Class A | 225 | 2% gel, 3% cc |
| Production | 7 7/8" | 4 1/2" | 10.5# / ft | 5529' | 60/40 poz | 50 | 4% gel, 1/4# Floseal |
| | | | | | Class H | 100 | 10% salt, 10% Gypseal, 1/4# Floseal, 6#Kolseal, ClaPro & .8% FL160 |

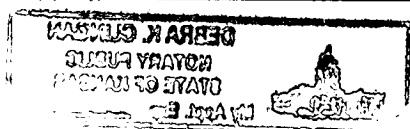
| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|---|------------------|----------------|-------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate | | | | |
| <input type="checkbox"/> 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 |
|----------------|---|---|-------|
| | ARBUCKLE 5495' - 6430' | ACID: 5000 gal 28% | same |
| | | | |
| | | | |
| | | | |

| | | | | |
|--|--|-----------------|------------------|--|
| TUBING RECORD | Size 2 7/8" | Set At 5527' | Packer At n/a | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, <u>SWD</u> or Enhr. SI - WO KCC approval to use | 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) _____



ALLIED CEMENTING CO., LLC. 32321

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Medicine Lodge

DATE 9-21-08 SEC 26 TWP. 34s RANGE 13w CALLED OUT 5:00 PM ON LOCATION 7:00 PM JOB START 12:00 PM JOB FINISH 10:30 PM
 LEASE Allen WELL# C-1 SWD LOCATION Gyp Hill Rd. COUNTY Barber STATE Ks.
 OLD OR NEW (Circle one) NEW

265/09

CONTRACTOR Beredco #1
 TYPE OF JOB surface
 HOLE SIZE _____ T.D. _____
 CASING SIZE 10 3/4 DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 200 MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 20 Bbls water
 EQUIPMENT _____
 PUMP TRUCK # 380-265 CEMENTER Carl Salding
 HELPER Newton Dycher
 BULK TRUCK # 389 DRIVER Matt Thomsch
 DRIVER _____

OWNER Woolsey Operating
 CEMENT AMOUNT ORDERED 225 sx Class A+3%cc+2%gel
 COMMON 225 A @ 15.45 3476.25
 POZMIX @ _____
 GEL 4 @ 20.80 83.20
 CHLORIDE 8 @ 58.20 465.60
 ASC @ _____
WELL FILE
 Regulatory Correspondence @ _____
 Drig / Comp Workovers @ _____
 Tests / Meters Operations @ _____
 HANDLING 237 @ 2.40 568.80
 MILEAGE 22 x 237 x 1.10 521.40
 TOTAL 5115.25

REMARKS:

Run 209' 10 3/4 + 13' 8 9/8 LT
Break circulation w/ Rig
Mix 225 sx A 3+2 + Disp
w/ 20 pbls water leave 20'
Cement in pipe + shut in
Circulate cement to surface

SERVICE
 DEPTH OF JOB 209'
 PUMP TRUCK CHARGE 1018.00
 EXTRA FOOTAGE @ _____
 MILEAGE 22 @ 7.00 154.00
 MANIFOLD @ _____
 TOTAL 1172.00

CHARGE TO: Woolsey Operating
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 30 2009

CONSERVATION DIVISION
WICHITA, KS

PLUG & FLOAT EQUIPMENT
 @ _____
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
 TOTAL CHARGES 1172.00
 DISCOUNT None IF PAID IN 30 DAYS

PRINTED NAME MIKE THARP
 SIGNATURE Mike Tharp

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING

ALLIED CEMENTING CO., LLC. 34041

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Medicine Lodge, KS

| | | | | | | | |
|--------------------------------|-------------------|---|-------------------|---------------------------|-----------------------------|--------------------------|---------------------------|
| DATE <u>05 Oct 08</u> | SEC <u>26</u> | TWP <u>24s</u> | RANGE <u>13 W</u> | CALLED OUT <u>9:00 PM</u> | ON LOCATION <u>10:30 PM</u> | JOB START <u>8:30 AM</u> | JOB FINISH <u>9:45 AM</u> |
| LEASE <u>Allen</u> | WELL # <u>C-1</u> | LOCATION <u>160 & Gyp Hill Rd, 16 s, y/16</u> | | | COUNTY <u>Barber</u> | STATE <u>KS</u> | |
| OLD OR <u>NEW</u> (Circle one) | | | | | | | |

CONTRACTOR Baredco #1
 TYPE OF JOB Production Casing
 HOLE SIZE 7 7/8 T.D. 6430
 CASING SIZE 5 7/8 DEPTH 5529
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1400 MINIMUM -
 MEAS. LINE SHOE JOINT 30.97
 CEMENT LEFT IN CSG. 31
 PERFS.
 DISPLACEMENT 130 Bbls 2% KCL Water

OWNER Woolsey
 CEMENT
 AMOUNT ORDERED 75sx 60:40:4 + 1/4 #Flo Seal
100sx H + 10% gyp + 10% salt + 6 #K-1
seal + 1/4 #Flo Seal + 8% FC 160 9 gal Clayco
 COMMON 45 A @ 15.45 695.25
 POZMIX 30 @ 8.00 240.00
 GEL 3 @ 20.80 62.40
 CHLORIDE @
 ASC @
 @
100 H @ 16.75 1675.00
Clay Pro 9 gal @ 31.25 281.25
Flo Seal 44 # @ 2.50 110.00
FL-160 75 # @ 13.30 997.50
Salt 11 @ 12.00 132.00
Gyp Seal 10 @ 29.20 292.00
Ko 1 Seal 600 # @ .89 534.00
 HANDLING 215 @ 2.40 516.00
 MILEAGE 22 x 215 x .10 473.00
 TOTAL 6008.40

EQUIPMENT
 PUMP TRUCK CEMENTER D. Felis
 # 352 HELPER M. Becker
 BULK TRUCK
 # 368 DRIVER Scott
 BULK TRUCK
 # DRIVER

REMARKS:
Pipe on Bttm, Break Cas., turn hole over,
Set Packer Shoe, Plug Rat & mouse Holes w/
25sx 60:40 Blend Cement, Pump 50sx Searanger
Cement, Mix 100sx tail Cement, Stop Pump,
Wash Pump & Lines, Release Plug, Start
Disp. w/ 2% KCL Water, See increase in
PSE, Slow Rate, Pump Plug at 130 Bbls
total Disp. Hold PSE for 15 min, Release
PSE, Float Did Hold - OK

SERVICE
 DEPTH OF JOB 5529
 PUMP TRUCK CHARGE 2451.00
 EXTRA FOOTAGE @
 MILEAGE 22 @ 7.00 154.00
 MANIFOLD Head Rental @ 113.00 113.00
 @
 @
 TOTAL 2718.00

CHARGE TO: Woolsey Oper.
 STREET _____
 CITY _____ STATE _____ ZIP _____

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 KANSAS CORPORATION COMMISSION
 JAN 30 2009
 CONSERVATION DIVISION
 WICHITA

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment
 and furnish cementer and helper(s) to assist the
 contractor to do work as is listed. The above work was
 done to satisfaction and supervision of owner agent or
 contractor. I have read and understand the "GENERAL
 TERMS AND CONDITIONS" listed on the reverse side.

5 1/2" PLUG & FLOAT EQUIPMENT
1-Packer Shoe @ 1491.00 1491.00
1-Latch down Plug Assy @ 462.00 462.00
3-turbolizers @ 79.00 237.00
1-Basket @ 186.00 186.00
 @
 TOTAL 2376.00

PRINTED NAME MIKE THOMP
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES [Total]
 DISCOUNT [Total] IF PAID IN 30 DAYS
 ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING