

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

ORIGINAL

3/20/09

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33772  
Name: Black Star 231 Corp.  
Address: 2300 Main St., Suite 900  
City/State/Zip: Kansas City, Missouri, 64108  
Purchaser: N/A  
Operator Contact Person: Jim Pryor  
Phone: (816) 560-7300  
Contractor: Name: Three Rivers Exploration, LLC  
License: 33217

Wellsite Geologist: David Griffin  
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. \_\_\_\_\_

2-5-07 Spud Date or Recompletion Date	2-14-07 Date Reached TD	3-6-07 Completion Date or Recompletion Date
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API No. 15 - 073-24053-0000  
County: Greenwood  
apSE  NWSE  NE  Sec. 35 Twp. 27 S. R. 9  East  West  
3597 feet from (S) N (circle one) Line of Section  
987 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Schoenhals Well #: 106  
Field Name: W/C  
Producing Formation: Absent  
Elevation: Ground: 1277 Kelly Bushing: \_\_\_\_\_  
Total Depth: 2770 Plug Back Total Depth: Surface  
Amount of Surface Pipe Set and Cemented at 200' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from D&A  
feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan PA NH 10-30-08  
(Data must be collected from the Reserve Pit)  
Chloride content 12,000 ppm Fluid volume 120 bbls  
Dewatering method used Evaporation  
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: [Signature]  
Title: President Date: 3-19-07  
Subscribed and sworn to before me this 19 day of MARCH,  
2008.  
Notary Public: Leonard L. Hopkin  
Date Commission Expires: 12-6-2008

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**MAR 21 2007**  
CONSERVATION DIVISION  
WICHITA, KS

LEONARD L. HOPKIN  
Notary Public - State of Missouri  
County of Platte  
My Commission Expires Dec. 6, 2008  
Commission #04537004

Operator Name: Black Star 231 Corp. Lease Name: Schoenhals Well #: 1-06  
 Sec. 35 Twp. 27 S. R. 9  East  West County: Greenwood

**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 (Attach Additional Sheets) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy)  List All E. Logs Run:  <b>G/R Nutrn</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Base Kansas City</td> <td>1724</td> <td>-447</td> </tr> <tr> <td>Bartlesville ss</td> <td>2225</td> <td>-948</td> </tr> <tr> <td>Miss. Chert</td> <td>2349</td> <td>-1072</td> </tr> <tr> <td>Abrbkl</td> <td>1701</td> <td>-1424</td> </tr> </table>	Name	Top	Datum	Base Kansas City	1724	-447	Bartlesville ss	2225	-948	Miss. Chert	2349	-1072	Abrbkl	1701	-1424
Name	Top	Datum														
Base Kansas City	1724	-447														
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Abrbkl	1701	-1424														

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	11 1/4"	8 5/8"	23#	200'	Class A	100	3% calclr-2%Gel

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
D&A	D&A	D&A	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	D&A			

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
D&A	<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
	D&A		D&A		

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Duality Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____
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CONSOLIDATED OIL WELL SERVICES, LLC  
 P.O. BOX 884, CHANUTE, KS 66720  
 620-431-9210 OR 800-467-8676

TICKET NUMBER 16839  
 LOCATION EUREKA  
 FOREMAN RICK LORAND

TREATMENT REPORT & FIELD TICKET  
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY												
2-6-07	17164	Schaenbels 1-07				6W												
CUSTOMER Black Star Cap.			<table border="1"> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> <tr> <td>463</td> <td>Kyle</td> <td></td> <td></td> </tr> <tr> <td>439</td> <td>Sarrid</td> <td></td> <td></td> </tr> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	Kyle			439	Sarrid		
TRUCK #	DRIVER	TRUCK #					DRIVER											
463	Kyle																	
439	Sarrid																	
MAILING ADDRESS 5765 NU 90th terrace																		
CITY Kansas City		STATE Mo.	ZIP CODE 64154															

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 209' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 200 G.L. DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.8\* SLURRY VOL 25 bbl WATER gal/sk 6.5 CEMENT LEFT in CASING 20'  
 DISPLACEMENT 11.5 bbl DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting- Rig up to 8 5/8" casing. Bear circulation w/ water.  
Mixed 100 sks class A cement w/ 220 gal. 320 sack. & 1/4" floater @ 14.8\* disp. Displace w/ 11.5 bbl water. shut casing in. Good cement returns to surface - 6 bbl slurry to pit.  
Job complete. Rig down

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"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	620.00	620.00
5406	20	MILEAGE	3.30	66.00
11043	100 sks	class A cement	12.20	1220.00
1118A	200*	220 gal	.15	30.00
1102	30*	320 sack	.67	201.00
1107	25*	1/4" floater @ 1/2"	1.90	47.50
5407	4.7	ten-mileage bulk tax	m/c	285.00
			subtotal	2499.50
			SALES TAX	94.40
			ESTIMATED COMMISSION	293.90

AUTHORIZATION called by Dave Farthing

TITLE \_\_\_\_\_

211792  
 RECEIVED  
 KANSAS CORPORATION COMMISSION  
 MAR 21 2007

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

TICKET NUMBER 16965  
 LOCATION Eureka  
 FOREMAN J. Stearns

TREATMENT REPORT & FIELD TICKET  
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2-6-07	1764	Schaenhals #1-07	25	27S	26	Comwal
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
City			TRUCK #			
State			DRIVER			
ZIP CODE			TRUCK #			
HOLE SIZE			DRIVER			
HOLE DEPTH			TRUCK #			
CASING SIZE & WEIGHT			DRIVER			
CASING DEPTH			TRUCK #			
SLURRY WEIGHT			DRIVER			
SLURRY VOL			TRUCK #			
WATER gal/sk			DRIVER			
CEMENT LEFT In CASING			TRUCK #			
DISPLACEMENT			DRIVER			
DISPLACEMENT PSI			TRUCK #			
MIX PSI			DRIVER			
RATE			TRUCK #			

CUSTOMER: Black Star Corp.  
 MAILING ADDRESS: 5705 N.W. 90th Terr.  
 CITY: Kansas City STATE: Mo ZIP CODE: 64154

REMARKS: Safety Auditing. Plug well as follow  
250' Plug AT 2667'  
50' Plug AT 2322'  
50' Plug AT 790'  
260' To Surface  
Total 125 SKS 60/40 Perm Cement 4% gal

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	840.00	840.00
5406	20	MILEAGE	3.30	66.00
1131	125 SKS	60/40 Perm Cement	9.80	1225.00
113A	429*	4% Gal	.15	64.35
5407	5.350m	Tan Mileage Tank Truck	77.00	412.65
			Sub Total	2408.00
			SALES TAX	81.24
			TOTAL	2489.24

AUTHORIZATION Called by Dave TITLE Toolpusher  
 RECEIVED 212005 KANSAS CORPORATION COMMISSIONED  
 MAR 21 2007 DATE 3-6-07  
 CONSERVATION DIVISION  
 WICHITA, KS

# Black Star <sup>231</sup> Corp.

3/20/09

Phone 816-448-3600

Fax 816-448-3101



To: Kansas Corporation Commission  
From: Black Star 231 Corp.  
RE: Schoenhals #1-07

KCC

MAR 20 2007

CONFIDENTIAL

Dears Sirs/Madam,

Please hold the enclosed information in Confidence for the maximum allowed by6 regulation.

Thank You

A handwritten signature in black ink, appearing to read 'Jim Pryor', is written over a horizontal line. The signature is fluid and cursive.

Jim Pryor, President

jlj

RECEIVED  
KANSAS CORPORATION COMMISSION

MAR 21 2007

Two Pershing Square • 2300 Main St., Suite 900 • Kansas City, MO 64108

CONSERVATION DIVISION  
WICHITA, KS