

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31337
Name: Wildcat Oil & Gas, LLC
Address 1: 10286 SW 170 Ave.
Address 2: _____
City: Nashville State: KS Zip: 67112 + 8336
Contact Person: Gary Adelhardt
Phone: (620) 4243-4401
CONTRACTOR: License # 33902
Name: Hardt Drilling, LLC
Wellsite Geologist: Max R. Lovely
Purchaser: N/A (Dry Hole)
Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ SLOW
_____ Gas _____ ENHR _____ SIGW
_____ CM (Coal Bed Methane) _____ Temp. Abd.
 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. _____ Conv. to SWD
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
01/12/09 01/20/09 01/20/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 095-22179-00-00
Spot Description: _____
E2 SW NE NE Sec. 35 Twp. 29 S. R. 9 East West
4290 Feet from North / South Line of Section
760 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kingman
Lease Name: Bohrer Well #: 1
Field Name: Spivey-Grabs-Basil
Producing Formation: Mississippi was the target formation
Elevation: Ground: 1614 Kelly Bushing: 1624
Total Depth: 4268 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 223 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ ^{sx cmt} PA-Dlg-4/28/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 23,000 ppm Fluid volume: 1,800 bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Wildcat Oil & Gas, LLC
Lease Name: Dickson #2 SWD License No.: 31337
Quarter SW Sec. 8 Twp. 31 S. R. 8 East West
County: Harper Docket No.: E-05673.1

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: Gary Adelhardt
Title: Office Manager Date: 03/31/09
Subscribed and sworn to before me this 1st day of April,
20 09.
Notary Public: Robin Pinkerton
Date Commission Expires: 9-25-2010

KCC Office Use ONLY

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

ROBIN PINKERTON
Notary Public - State of Kansas
My Appt. Expires 9-25-2010

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Operator Name: Wildcat Oil & Gas, LLC Lease Name: Bohrer Well #: 1
 Sec. 35 Twp. 29 S. R. 9 East West County: Kingman

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 <i>(Attach Additional Sheets)</i> 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 checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <p style="margin-left: 20px;">None</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3300</td> <td>-1676</td> </tr> <tr> <td>Lansing</td> <td>3512</td> <td>-1888</td> </tr> <tr> <td>Swope</td> <td>3920</td> <td>-2296</td> </tr> <tr> <td>Hertha</td> <td>3953</td> <td>-2329</td> </tr> <tr> <td>Mississippi</td> <td>4231</td> <td>-2607</td> </tr> </table>	Name	Top	Datum	Heebner	3300	-1676	Lansing	3512	-1888	Swope	3920	-2296	Hertha	3953	-2329	Mississippi	4231	-2607
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Hertha	3953	-2329																	
Mississippi	4231	-2607																	

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	12-1/4"	8-5/8"	24#	223'	60/40/2	175	3%cc

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 <i>(Amount and Kind of Material Used)</i>	Depth

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TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906

Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 117852
 Invoice Date: Jan 12, 2009
 Page: 1

Bill To:
Wildcat Oil & Gas 10286 SW 170th Ave. Nashville, KS 67112

*Ken
 4/28/09*

Bohler 1

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Wild	Spivey-Grahs-Basi#1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2	Medicine Lodge	Jan 12, 2009	2/11/09

Quantity	Item	Description	Unit Price	Amount
105.00	MAT	Class A Common	15.45	1,622.25
70.00	MAT	Pozmix	8.00	560.00
3.00	MAT	Gel	20.80	62.40
6.00	MAT	Chloride	58.20	349.20
184.00	SER	Handling	2.40	441.60
32.00	SER	Mileage 184 sx @ .10 per sk per mi	18.40	588.80
1.00	SER	Surface	1,018.00	1,018.00
32.00	SER	Mileage Pump Truck	7.00	224.00
1.00	SER	Head Rental	113.00	113.00
1.00	EQP	Wooden Plug	68.00	68.00

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ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 504.72

ONLY IF PAID ON OR BEFORE

Feb 11, 2009

Subtotal	5,047.25
Sales Tax	141.08
Total Invoice Amount	5,188.33
Payment/Credit Applied	
TOTAL	5,188.33

ALLIED CEMENTING CO., LLC. 32569

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

SERVICE POINT:

Medicine Lodge, KS

Spivey-Grass-Basi

DATE <i>1-17-09</i>	SEC <i>35</i>	TWR <i>29s</i>	RANGE <i>9w</i>	CALLED OUT <i>7:00pm</i>	ON LOCATION <i>8:30pm</i>	JOB START <i>10:00pm</i>	JOB FINISH <i>16:30pm</i>
LEASE <i>Spivey-Grass</i>	WELL # <i>1</i>	LOCATION <i>Zenda, ks 3W, 3/4 E</i>		COUNTY <i>Kinsmen</i>	STATE <i>KS</i>		
OLD OR NEW (Circle one) <i>NEW</i>		<i>S/into</i>					

CONTRACTOR <i>Acad #1</i>	OWNER <i>Wildcat Oil & Gas</i>
TYPE OF JOB <i>Surface</i>	
HOLE SIZE <i>12 1/4</i>	T.D. <i>223</i>
CASING SIZE <i>8 5/8</i>	DEPTH <i>225</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <i>15'</i>	
PERFS.	
DISPLACEMENT <i>13 bbls of Fresh water</i>	

CEMENT	
AMOUNT ORDERED <i>175 sv 60:40:2</i>	
<i>3% cc</i>	

COMMON	<i>105</i>	<i>A</i>	@	<i>15.45</i>	<i>1622.25</i>
POZMIX	<i>70</i>		@	<i>8.00</i>	<i>560.00</i>
GEL	<i>3</i>		@	<i>20.80</i>	<i>62.40</i>
CHLORIDE	<i>6</i>		@	<i>58.20</i>	<i>349.20</i>
ASC			@		
			@		
			@		
			@		
			@		
			@		
			@		
HANDLING	<i>184</i>		@	<i>2.40</i>	<i>441.60</i>
MILEAGE	<i>32 x 184 x .10</i>				<i>588.80</i>
TOTAL					<i>3624.25</i>

REMARKS:

*Pipe on bottom & brook circulate
Pump 3 bbls of fresh water & hose
mix 175sv of cement, shut down &
release plus, open & displacement
pump 13 bbls & shut in
cement did circulate*

SERVICE

DEPTH OF JOB	<i>225</i>	
PUMP TRUCK CHARGE		<i>1018.00</i>
EXTRA FOOTAGE		@
MILEAGE	<i>32</i>	@ <i>7.00</i> <i>224.00</i>
MANIFOLD		@
<i>Headventer</i>		@ <i>113.00</i> <i>113.00</i>
		@
TOTAL		<i>1355.00</i>

CHARGE TO: *Wildcat Oil & Gas*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>8 5/8</i>		
<i>1- Wooden Plug</i>	@ <i>68.00</i>	<i>68.00</i>
	@	
	@	
	@	
	@	
TOTAL		<i>68.00</i>

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.

PRINTED NAME *X*

SIGNATURE *X Scott Adkins*

SALES TAX (If Any) _____

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

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