

**CONFIDENTIAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

5/9/08 Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 6569  
Name: Carmen Schmitt Inc.  
Address: PO Box 47  
City/State/Zip: Great Bend, KS 67530  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Jacob Porter  
Phone: (620) 793-5100  
Contractor: Name: Mallard JV, Inc.  
License: 4958  
Wellsite Geologist: Jacob Porter

**KCC**

**MAY 09 2007**

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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. \_\_\_\_\_

4/4/07	4/12/07	4/13/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 047-21551-0000  
County: Edwards  
130n 50wE2 W/2 SE Sec. 8 Twp. 23s S. R. 19w  East  West  
1450 fsl \_\_\_\_\_ feet from S / N (circle one) Line of Section  
1700 fel \_\_\_\_\_ feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Putter Well #: 1  
Field Name: WC

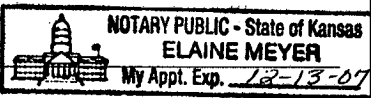
Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2235' Kelly Bushing: 2240'  
Total Depth: 4507' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 364' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan** PA ALET NH 6-11-08  
(Data must be collected from the Reserve Pit)  
Chloride content 71000 ppm Fluid volume 1000 bbls  
Dewatering method used evaporated  
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: Jacob L Porter  
Title: Operations Manager Date: 5/9/07  
Subscribed and sworn to before me this 9th day of May,  
20 07.  
Notary Public: Elaine Meyer  
Date Commission Expires: 12-13-07



**KCC Office Use ONLY**

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

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**MAY 09 2007**

Operator Name: Carmen Schmitt Inc. Lease Name: Putter Well #: 1

Sec. 8 Twp. 23s S. R. 19w  East  West County: Edwards

**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 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 checked="" 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>Anhydrite</td> <td>1373</td> <td>867</td> </tr> <tr> <td>Heebner</td> <td>3854</td> <td>-1614</td> </tr> <tr> <td>Lansing</td> <td>3955</td> <td>-1715</td> </tr> <tr> <td>Base KC</td> <td>4262</td> <td>-2022</td> </tr> <tr> <td>Marmaton</td> <td>4306</td> <td>-2066</td> </tr> <tr> <td>Cherokee</td> <td>4413</td> <td>-2173</td> </tr> <tr> <td>Mississippian</td> <td>4499</td> <td>-2259</td> </tr> </table>	Name	Top	Datum	Anhydrite	1373	867	Heebner	3854	-1614	Lansing	3955	-1715	Base KC	4262	-2022	Marmaton	4306	-2066	Cherokee	4413	-2173	Mississippian	4499	-2259
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Mississippian	4499	-2259																							

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	12.25"	8 5/8"	23#	364'	common	250	3% cc, 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	0 - 4507'	60/40 poz	225	6 % gel

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
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Date of First, Resumerd 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

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Disposition of Gas  Vented  Sold  Used on Lease *(If vented, Submit ACO-18.)*      METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

MAY 09 2007

# ALLIED CEMENTING CO., INC.

30604

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

SERVICE POINT:  
Great Bend

DATE <u>4.5.07</u>	SEC. <u>8</u>	TWP. <u>23</u>	RANGE <u>19</u>	CALLED OUT <u>5:00 AM</u>	ON LOCATION <u>8:00 AM</u>	JOB START <u>8:30 AM</u>	JOB FINISH <u>10:00 AM</u>
LEASE <u>Putter</u>	WELL # <u>1</u>	LOCATION <u>Kinsley 8 north to rd D</u>			COUNTY <u>Edwards</u>	STATE <u>Ka</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>1 west 1 1/2 north</u>				

CONTRACTOR Mallard Drilling  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 364'  
 CASING SIZE 8 5/8 DEPTH 364'  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. 15'  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT  22.7 BBLs

OWNER Carmen Schmidt  
 CEMENT  
 AMOUNT ORDERED 250 cu Common  
3% cc 27% gel

U.B.  
 PUMP TRUCK. CEMENTER J.D. Drilling  
 # 181 HELPER Randy Pray  
 BULK TRUCK  
 # 260 DRIVER David Jaergensen  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>250 cu</u>	@	<u>11.10</u>	<u>2775.00</u>
POZMIX	_____	@	_____	_____
GEL	<u>5 cu</u>	@	<u>16.65</u>	<u>83.25</u>
CHLORIDE	<u>8 cu</u>	@	<u>46.60</u>	<u>372.80</u>
ASC	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
HANDLING	<u>263 cu</u>	@	<u>1.90</u>	<u>499.70</u>
MILEAGE	<u>263 ML 09</u>	<u>48</u>	_____	<u>1136.16</u>
TOTAL	_____	_____	_____	<u>4866.91</u>

REMARKS:

Ran 8 5/8 casing to Bottom, Circulate with sig mud. Hook up to pump truck & mixed 250 cu Common 3% cc 27% gel. Shut down change valves over on manifold release 8 5/8 TWP & displace with 22.7 BBLs fresh H<sub>2</sub>O. Cement did circulate. Shut in manifold (Circulated 7 BBL cement)

SERVICE

DEPTH OF JOB	<u>364'</u>	_____	_____
PUMP TRUCK CHARGE	_____	_____	<u>815.00</u>
EXTRA FOOTAGE	<u>64</u>	@	<u>.65</u> <u>41.60</u>
MILEAGE	<u>48</u>	@	<u>6.00</u> <u>288.00</u>
MANIFOLD	_____	@	_____
<u>Headrental</u>	_____	@	<u>100.00</u> <u>100.00</u>
TOTAL	_____	_____	<u>1244.60</u>

CHARGE TO: Carmen Schmidt Inc  
 STREET P.O. Box 47  
 CITY Great Bend STATE Kansas ZIP 67530

PLUG & FLOAT EQUIPMENT

<u>1 - 8 5/8 TWP</u>	@	<u>60.00</u>	<u>60.00</u>
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
TOTAL	_____	_____	<u>60.00</u>

To Allied Cementing Co., Inc.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_  
 TOTAL CHARGE \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Kirk Urban

X Kirk Urban  
 PRINTED NAME  
Thanks

# ALLIED CEMENTING CO., INC.

30156

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

SERVICE POINT: MB

DATE <u>4-13-07</u>	SEC <u>8</u>	TWP <u>23</u>	RANGE <u>19</u>	CALLED OUT <u>7:30 AM</u>	ON LOCATION <u>12:00 AM</u>	JOB START <u>2 AM</u>	JOB FINISH <u>4 AM</u>
LEASEE <u>Putter</u>	WELL # <u>1</u>	LOCATION <u>Rozel 1E 2S 1W</u>			COUNTY <u>Edwards</u>	STATE <u>K.S.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		<u>9S 1W 3, 5 1/2</u>					

CONTRACTOR Mallard Pkg 1

TYPE OF JOB Rotary Plug

HOLE SIZE \_\_\_\_\_ T.D. 450.7

CASING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE 4 1/2 DEPTH 1410 ft

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 225 <sup>60</sup>/<sub>40</sub> 67 gal

**EQUIPMENT**

PUMP TRUCK CEMENTER Mike M.

# 224 HELPER Jim W.

BULK TRUCK DRIVER Don D.

# \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>135 sk</u>	@	<u>11.10</u>	<u>1498.50</u>
POZMIX	<u>90 sk</u>	@	<u>6.20</u>	<u>558.00</u>
GEL	<u>12 sk</u>	@	<u>16.65</u>	<u>199.80</u>
CHLORIDE		@		
ASC		@		
HANDLING	<u>237.04</u>	@	<u>1.90</u>	<u>450.30</u>
MILEAGE	<u>237.04</u>	@	<u>0.43</u>	<u>1023.84</u>
TOTAL				<u>3730.44</u>

**REMARKS:**

50 sk at 1410 ft

80 sk at 690 ft

50 sk at 390 ft

20 sk at 60 ft with plug

15 sk at 2 ft

10 sk at 1 ft

**SERVICE**

DEPTH OF JOB 1410 ft

PUMP TRUCK CHARGE 815.00

EXTRA FOOTAGE @ \_\_\_\_\_

MILEAGE 48 @ 6.10 288.00

MANIFOLD @ \_\_\_\_\_

TOTAL 1103.00

CHARGE TO: Carmen Schmitt

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

1-8 1/2 old Hole Plug 35.00 35.00

TOTAL 35.00

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE [Signature]

Kirk Urban  
PRINTED NAME

5/9/08

**CARMEN SCHMITT INC.**  
**P.O. BOX 47**  
**GREAT BEND KS 67530**  
New Wealth Comes From the Land  
620-793-5100

5-9-07

**KCC**  
**MAY 09 2007**  
**CONFIDENTIAL**

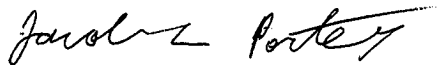
Conservation Division  
Kansas Corporation Commission  
130 S. Market, Room 2078  
Wichita, KS 67202

Re: ACO-1 Confidentiality, Putter #1, 8-23S-19W, API 15-047-21551-0000

To Whom It May Concern:

Please hold side 2 of the enclosed ACO-1 confidential for 12 months.

Sincerely,



Jacob Porter

RECEIVED  
KANSAS CORPORATION COMMISSION

MAY 09 2007

CONSERVATION DIVISION  
WICHITA, KS