

ORIGINAL

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 # 33252  
Name: Matador, Inc.  
Address 1: P. O. Box 337  
Address 2: \_\_\_\_\_  
City: Sedan State: Ks. Zip: 67361 + \_\_\_\_\_  
Contact Person: Tim D. Nordell  
Phone: (620) 725-3366  
CONTRACTOR: License # 8736  
Name: James David Dixon  
Wellsite Geologist: none  
Purchaser: CMT

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: na  
Well Name: na  
Original Comp. Date: na Original Total Depth: na  
\_\_\_\_ 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.: \_\_\_\_\_  

<u>12-2-08</u>	<u>12-6-08</u>	<u>2-6-09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 019-26949-0000  
Spot Description: \_\_\_\_\_  
NE NE SE SE Sec. 33 Twp. 33 S. R. 11  East  West  
1000 Feet from  North /  South Line of Section  
270 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Chautauqua  
Lease Name: Homestead Well #: 9  
Field Name: Peru-Sedan  
Producing Formation: Arbuckle  
Elevation: Ground: 840 topo Kelly Bushing: na  
Total Depth: 2306 Plug Back Total Depth: 2150  
Amount of Surface Pipe Set and Cemented at: 40' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: na Feet  
If Alternate II completion, cement circulated from: 2,150  
feet depth to: surface w/ 360 Alt - Dig - 4/24/09 <sup>sx cmt.</sup>

Drilling Fluid Management Plan  
*(Data must be collected from the Reserve Pit)*  
Chloride content: fresh water ppm Fluid volume: 350 bbls  
Dewatering method used: evaporated and backfilled  
Location of fluid disposal if hauled offsite:  
Operator Name: na  
Lease Name: na License No.: na  
Quarter na Sec. na Twp. na S. R. na  East  West  
County: na Docket No.: na

**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: Tim D. Nordell, Pres.  
Title: President Date: 4/3/09  
Subscribed and sworn to before me this 3<sup>rd</sup> day of April,  
2009.  
Notary Public: Sondra Nordell  
Date Commission Expires: November 24, 2011

**SONDRA NORDELL**  
Notary Public - State of Kansas  
My Appt. Expires 11-24-11

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

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Operator Name: Matador, Inc. Lease Name: Homestead Well #: 9  
 Sec. 33 Twp. 33 S. R. 11  East  West County: Chautauqua

**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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: gamma ray/neutron, cement bond log compensated neutron/density, dual induction	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Wayside</td> <td>1124</td> <td>-284</td> </tr> <tr> <td>Mississippi</td> <td>1856</td> <td>-1016</td> </tr> <tr> <td>Arbuckle</td> <td>2066</td> <td>-1226</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Wayside	1124	-284	Mississippi	1856	-1016	Arbuckle	2066	-1226
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample														
Name	Top	Datum														
Wayside	1124	-284														
Mississippi	1856	-1016														
Arbuckle	2066	-1226														

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" 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/ new	12 1/4"	8 5/8"	23 lbs	40'	portland	25	na
production/ used	7 7/8"	4 1/2"	11.6 lbs	2150'	portland	360	copy attached

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	surface/60'	portland	24	copy attached

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
2	2082 to 2092	500 gal 15% HCL, 1 gal inhibitor	2082/92

TUBING RECORD:		Size: 2 3/8"	Set At: 2117'	Packer At: 2117'	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. SWD waiting on permit approval		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. na	Gas Mcf na	Water Bbls. na	Gas-Oil Ratio na	Gravity na

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: na
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**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 # 227902

=====  
Invoice Date: 12/08/2008      Terms: Page 1

MATADOR EXPLORATION INC  
ATTN: TIM NORDELL  
P.O. BOX 337  
SEDAN KS 67361  
(620)725-3366

HOMESTEAD #9  
21364  
12/06/08

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	360.00	17.0000	6120.00
1110A	KOL SEAL (50# BAG)	1900.00	.6500	1235.00
1107A	PHENOSEAL (M) 40# BAG)	160.00	1.1500	184.00
1111	GRANULATED SALT (50 #)	500.00	.3300	165.00
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00
1144	SP-402 (MUD CLEAN AGENT)	10.00	27.0000	270.00
1123	CITY WATER	8400.00	.0140	117.60
4310	4 1/2" X 5 1/2 CHANGE OV	1.00	170.0000	170.00
4253	TYPE A PACKER SHOE61/2X6	1.00	1640.0000	1640.00

Description	Hours	Unit Price	Total
T-64 WATER TRANSPORT (CEMENT)	4.00	112.00	448.00
451 MIN. BULK DELIVERY	1.00	450.00	450.00
T-97 WATER TRANSPORT (CEMENT)	4.00	112.00	448.00
492 CEMENT PUMP	1.00	975.00	975.00
492 EQUIPMENT MILEAGE (ONE WAY)	45.00	3.65	164.25
492 CASING FOOTAGE	2100.00	.20	420.00
518 MIN. BULK DELIVERY	1.00	450.00	450.00
PLUG 4 1/2" PLUG CONTAINER	1.00	325.00	325.00

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Parts: 9946.60      Freight: .00      Tax: 626.65      AR      14253.50  
Labor: .00      Misc: .00      Total: 14253.50  
Sublt: .00      Supplies: .00      Change: .00  
=====

*CK5474 12/16/08*

Signed \_\_\_\_\_ Date \_\_\_\_\_



**CONSOLIDATED**  
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

TICKET NUMBER 21364  
LOCATION BARTLESVILLE OK  
FOREMAN DOANNE TATE

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-6-08	5142	HOMESTEAD #9				CHO. KS
CUSTOMER MATAJOR EXPLORATION			TRUCK #			
MAILING ADDRESS			DRIVER		TRUCK #	
CITY			DRIVER		TRUCK #	
STATE			DRIVER		TRUCK #	
ZIP CODE			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	

JOB TYPE LS HOLE SIZE 7 7/8 HOLE DEPTH 2300' CASING SIZE & WEIGHT 4 1/2  
CASING DEPTH 2100 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT 14/145 SLURRY VOL 171/158 WATER gal/sk 8/7 CEMENT LEFT in CASING \_\_\_\_\_  
DISPLACEMENT 33 DISPLACEMENT PSI 600\* MIX PSI 400\* RATE 5

REMARKS: DROP BALL. RUN 5 BBL H2O, RUN 10 BBL H2O w/10 GALLONS MUD  
FLUSH. RUN 20 BBL H2O. RUN 250 SX THICK SET WITH 5# KOL SEAL  
40 PHENO - FOLLOWED BY 110 SX WITH 200# GEL, 240# CAL, 40# PHENO  
650# KOL SEAL, 500# SALT. WASH OUT PUMP AND LINES, RELEASE PLUG.  
DISPLACING 33 BBLs TO SET SIDE.

PLUG DOWN 3:00AM  
MAX PSI - 11000\* — CEMENT TO SURFACE —

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		975.00
5406	45	MILEAGE		164.25
5402	2100	FOOTAGE		420.00
5407A	2	BULK TRUCK AND BULK TRUCK TRAILER		900.00
5621	1	4 1/2 PLUG CONTAINER		325.00
5501C	2 @ 4 HR	TRANSPORT		896.00
1126	360sx/33,840*	OWC		6120.00
110A	385sx/1900*	KOL SEAL		1235.00
1107A	45x/1160*	PHENO		184.00
1111	105x/500*	SALT		165.00
4404	1	4 1/2 RUBBER PLUG		45.00
1144	10 GALLONS	MUD FLUSH		270.00
1123	8400 GALLONS	CITY WATER		117.60
4310	1	4 1/2 x 5 1/2 CHANGE OVER		170.00
4253	1	TYPE A PACKER SHOE 5 1/2		1640.00
			6.3%	SALES TAX
				626.65
				ESTIMATED TOTAL
				14,253.50

RAVIN 5737  
AUTHORIZATION David & Gene TITLE #227902 DATE \_\_\_\_\_



ACKARMAN HARDWARE and LUMBER CO  
 160 EAST MAIN STREET  
 SEDAN, KS 67361

PHONE: (620) 725-3103

THANKS FOR YOUR BUSINESS!!

Cust No	Job No	Purchase Order	Reference	Terms	Clerk	Date	Time
253366				NET 10TH	SC	12/ 3/08	7:25

Sold To:  
 MATADOR  
 TIM NORDELL  
 BOX 337  
 SEDAN KS 67361

Ship To:

TERM#552

DOC# 164760  
 \*\*DUPLICATE\*\*  
 \* INVOICE \*  
 \*\*\*\*\*

TAX : 001 KANSAS SALES TAX

LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENSION
1	3		EA	RM44816	PORTLAND CEMENT 92.6#		3	10.35 /EA	31.05 *

** AMOUNT CHARGED TO STORE ACCOUNT **	33.47	TAXABLE	31.05
(DRILLER )		NON-TAXABLE	0.00
		SUBTOTAL	31.05
		TAX AMOUNT	2.42
		TOTAL AMOUNT	33.47

X

Received By

KANSAS CORPORATION COMMISSION

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