

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31119
Name: Lone Wolf Oil
Address 1: Box 241
Address 2: _____
City: Moline State: Ks Zip: 67353 + _____
Contact Person: Rob Wolfe
Phone: (620) 647-3626
CONTRACTOR: License # 32701
Name: C & G Drilling Inc.
Wellsite Geologist: Orlin Phelps
Purchaser: Plains Marketing

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SIOW _____
_____ 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.: _____

12-8-08 12-11-08 12-29-08
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 019 010 26956 0000
Spot Description: _____
cen NE NE Sec. 1 Twp. 32 S. R. 9 East West
660 Feet from North / South Line of Section
660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Chautauqua
Lease Name: Walker Trust Well #: 6
Field Name: Hylton North
Producing Formation: Mississippi
Elevation: Ground: 1119 Kelly Bushing: 1125
Total Depth: 2243 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 2243
feet depth to: surface w/ 425 sx cmt.

Drilling Fluid Management Plan AH II NR 5-6-09
(Data must be collected from the Reserve Pit)
Chloride content: 1000 ppm Fluid volume: 220 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-5 form for 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: Rob Wolfe
Title: President Date: 3-27-09
Subscribed and sworn to before me this 27th day of March
09
Notary Public: Lisa J. Townsley
Date Commission Expires: 6-13-12

RECEIVED
APR 13 2009

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
MAR 30 2009

LISA J. TOWNSLEY
Notary Public - State of Kansas
My Appt. Expires _____

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Lone Wolf Oil Lease Name: Walker Trust Well #: 6
 Sec. 1 Twp. 32 S. R. 9 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	<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>Altamont</td> <td>1728</td> <td>-603</td> </tr> <tr> <td>Pawnee</td> <td>1814</td> <td>-689</td> </tr> <tr> <td>Cherokee</td> <td>1902</td> <td>-777</td> </tr> <tr> <td>Mississippi</td> <td>2181</td> <td>-1056</td> </tr> </table>	Name	Top	Datum	Altamont	1728	-603	Pawnee	1814	-689	Cherokee	1902	-777	Mississippi	2181	-1056
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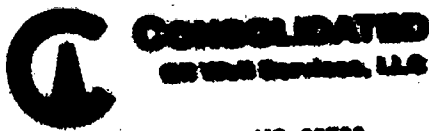
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface	12 1/4	8 5/8		40	class A	40	3% cal. 2% gel
Production	7 7/8	4 1/2	10.5	2239	60/40 poz	425	8% gel 1/4 #flocel

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
2	2189 - 2196	300 gal. Mud acid	

TUBING RECORD: Size: <u>none</u> 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. <u>0</u>	Gas Mcf <u>0</u>	Water Bbls. <u>0</u> 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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PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676



TICKET NUMBER 20684
LOCATION EUREKA
FOREMAN KEVIN McCoy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-8-08	4763	WALKER Trust #6	1	325	9E	CO
CUSTOMER <u>Lone Wolf Oil Co.</u>			C & G Daly.			
MAILING ADDRESS <u>Box 241</u>						
CITY <u>Moline</u>	STATE <u>KS</u>	ZIP CODE <u>67353</u>	TRUCK # <u>445</u>	DRIVER <u>Chris</u>	TRUCK #	DRIVER
			<u>439</u>	<u>CAIM</u>		

JOB TYPE SURFACE HOLE SIZE 12 1/4 HOLE DEPTH 41 CASING SIZE & WEIGHT 0.9
 CASING DEPTH 44' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL 9.6 bbl WATER gal/sk 6.5 CEMENT LEFT in CASING 10'
 DISPLACEMENT 2 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation w/ 5 bbl fresh water.
Mixed 40 sks class "A" cement w/ 3% CACL2, 2% Gel @ 15" / gal, YIELD 1.35.
w/ 2 bbl fresh water. Shut casing in. Good cement returns to surface. All complete.
Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	785.00	785.00
5406	40	MILEAGE	3.65	146.00
11045	40 SKS	Class "A" Cement	13.50	540.00
1102	110 #	CACL2 3%	.75	82.50
1118A	75 #	Gel 2%	.17	12.75
5407	1.88 tons	Ton Mileage Bulk Truck	MIS	315.00
			RECEIVED	
			KANSAS CORPORATION COMMISSION	
			MAR 30 2009	
			CONSERVATION DIVISION	
			WICHITA, KS	
			Sales Tax	1861.25
			SALES TAX ESTIMATED	40.02
			TOTAL	1861.27

Rev'n 3737

AUTHORIZATION Witnessed By Rob Wolf TITLE Owner DATE _____
 THANK YOU 02/19/11 6.3%

