

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

12/10/08

Operator: License # 06926  
 Name: Advantage Resources, Inc.  
 Address: 1775 Sherman Street Suite 1700  
 City/State/Zip: Denver, CO 80203  
 Purchaser: \_\_\_\_\_  
 Operator Contact Person: Edward J. Ackman  
 Phone: (303) 831-1912  
 Contractor: Name: Advanced Drilling Technologies  
 License: 33532  
 Wellsite Geologist: Bryan Bynog  
 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. \_\_\_\_\_  
7/29/08 8/25/08  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

API No. 15 - 193-20747-0000  
 County: Thomas  
 SE SE SE Sec. 32 Twp. 8 S. R. 31  East  West  
330 feet from (S) / N (circle one) Line of Section  
330 feet from (E) / W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE (SE) NW SW  
 Lease Name: Schroeder Well #: 16-32  
 Field Name: \_\_\_\_\_  
 Producing Formation: None  
 Elevation: Ground: 3028' Kelly Bushing: \_\_\_\_\_  
 Total Depth: 4,350 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at 301 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/ \_\_\_\_\_<sup>5x cmt.</sup>  
A11-Dlg-4/30/08

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)  
 Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
 Dewatering method used \_\_\_\_\_  
 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: \_\_\_\_\_  
 Title: President Date: 12/10/08  
 Subscribed and sworn to before me this 10 day of December  
 2008.  
 Notary Public: J. Lopez  
 Date Commission Expires: \_\_\_\_\_

Jennifer A. Lopez  
 Notary Public  
 State of Colorado  
 MY COMMISSION EXPIRES 4/8/12

**KCC Office Use ONLY**

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

KANSAS CORPORATION COMMISSION  
 DEC 15 2008  
 RECEIVED

Operator Name: Advantage Resources, Inc. Lease Name: Schroeder Well #: 16-32  
 Sec. 32 Twp. 8 S. R. 31  East  West County: Thomas

**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 type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  <b>IES - GR., Caliper Sonic Density</b>	<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>Stone Coral</td> <td>2670</td> <td>-535</td> </tr> <tr> <td>Heebner</td> <td>4075</td> <td>-870</td> </tr> <tr> <td>Lansing</td> <td>4114</td> <td>-909</td> </tr> <tr> <td>Johnson Zone</td> <td>4674</td> <td>-1469</td> </tr> <tr> <td>Mississippian</td> <td>4756</td> <td>-1551</td> </tr> <tr> <td>Total Depth</td> <td>4802</td> <td>-1597</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Stone Coral	2670	-535	Heebner	4075	-870	Lansing	4114	-909	Johnson Zone	4674	-1469	Mississippian	4756	-1551	Total Depth	4802	-1597
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample																							
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Total Depth	4802	-1597																							

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	12 1/4"	8 5/8"	24#	301	Common	210	

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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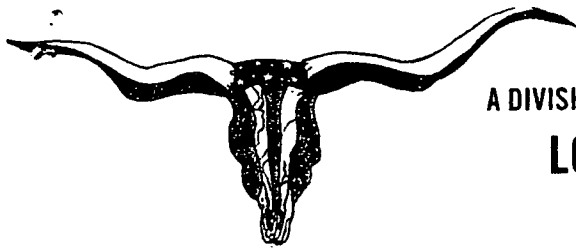
Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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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A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

**LONGHORN CEMENTING CO.**

P.O. BOX 203 YUMA, COLORADO 80759  
Phone: 970-848-0799 Fax: 970-848-0798

FIELD SERVICE TICKET AND INVOICE

DATE 7/31/08 TICKET NO. 1607

DATE OF JOB <u>7/31/08</u>	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:				
CUSTOMER <u>Advantage Resources, Inc.</u>	LEASE <u>SCHROEDER 16-32</u>	WELL NO.									
ADDRESS	COUNTY	STATE									
CITY	STATE	SERVICE CREW <u>Mike Joyce</u>									
AUTHORIZED BY	EQUIPMENT <u>112</u>										
TYPE JOB: <u>Surface</u>	DEPTH	FT.	CEMENT DATA: BULK <input type="checkbox"/>			SAND DATA: SACKS <input type="checkbox"/>		TRUCK CALLED	DATE	AM	TIME
			SACKS	BRAND	TYPE	% GEL	ADMIXES				
SIZE HOLE: <u>10 1/4</u>	DEPTH	FT.	<u>182</u>	<u>A</u>	<u>IK</u>			ARRIVED AT JOB		AM	PM
SIZE & WT. CASTING <u>NEW D 8 5/8 USED D</u>	DEPTH	FT.						START OPERATION		AM	PM
SIZE & WT. D PIPE OR TUBING	DEPTH	FT.						FINISH OPERATION		AM	PM
TOP PLUGS	TYPE:	WEIGHT OF SLURRY: <u>14.8</u>			LBS. / GAL.	LBS. / GAL.		RELEASED		AM	PM
		VOLUME OF SLURRY <u>1.32 CU FT</u>						MILES FROM STATION TO WELL			
<u>985</u>	MAX DEPTH <u>3209.6</u>	FT.	MAX PRESSURE			P.S.I.					<u>160</u>

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without written consent or an officer of Advanced Drilling Technologies, LLC.

SIGNED: \_\_\_\_\_ (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

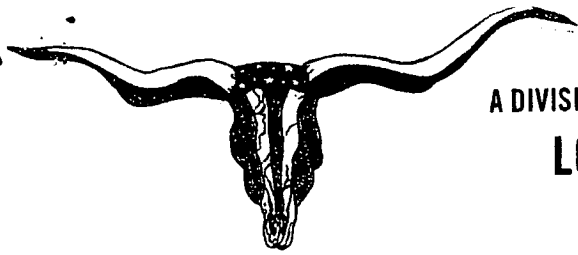
ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
001-2	Depth Charges				1,500.00
100-2	Mallees		320		3,472.00
200-1	Cement		182		3,195.00
					<del>8,137</del>
					8,157.00
	.90% excess				
	Pump - 43 BRLS. Cement @ 1.8 PPF				
	Pump 18 BRLS. Disp				
	Done displacing @ 7:00 A.M.				

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ACID DATA:			
GALLONS	%	ADDITIVES	
HCL			
HCL			

SUB TOTAL		
SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE Mike Cash THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_ (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)  
FIELD SERVICE ORDER NO.



A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

# LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80759  
 Phone: 970-848-0799 Fax: 970-848-0798

FIELD SERVICE TICKET  
 AND INVOICE

DATE 08-23-08 TICKET NO. 1608

DATE OF JOB: <u>08-23-08</u>	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:
CUSTOMER: <u>Advantage Resources</u>	LEASE: <u>Schroeder 16-32</u>	WELL NO.					
ADDRESS	COUNTY	STATE					
CITY	STATE	SERVICE CREW: <u>Mike-Jorge</u>					
AUTHORIZED BY	EQUIPMENT: <u>#112</u>						
TYPE JOB: <u>Plug</u>	DEPTH FT.	CEMENT DATA: BULK <input type="checkbox"/>			SAND DATA: SACKS <input type="checkbox"/>		TRUCK CALLED
		SACKS	BRAND	TYPE	% GEL	ADMIXES	DATE AM PM
SIZE HOLE: <u>7 7/8"</u>	DEPTH FT.	<u>200</u>	<u>A</u>	<u>1-11</u>			ARRIVED AT JOB
SIZE & WT. CASTING	DEPTH FT.						START OPERATION
SIZE & WT. D PIPE OR TUBING <u>4"</u>	DEPTH <u>4"</u> FT.						FINISH OPERATION
TOP PLUGS	TYPE:	WEIGHT OF SLURRY: <u>14.8</u> LBS. / GAL.		LBS. / GAL.			RELEASED
		VOLUME OF SLURRY: <u>1.32</u> cu ft		<u>15K</u>			MILES FROM STATION TO WELL: <u>163</u>
		200 SACKS CEMENT TREATED WITH _____ % OF _____					
	MAX DEPTH <u>4500</u> FT.	MAX PRESSURE		P.S.I.			

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without written consent or an officer of Advanced Drilling Technologies, LLC.

SIGNED: \_\_\_\_\_  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
001-2	Depth charge	1			1500 <u>00</u>
100-2	Mileage	326			3537 <u>11</u>
200-1	Cement	200			3500 <u>00</u>
					8537 <u>10</u>
255K5	2656 5.8 BBLs cement Displaced	27.5			
1005K5	1728 23.5 BBLs cement Displaced	12.7			
405K5	366 9.4 BBLs cement Displaced	2 BBLs			
105K5	40 2.3 BBLs cement Displaced	-3 BBLs			
255K5	2 Ratchet 105K5				
	Mosschyle 155K5				

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SUB TOTAL

ACID DATA:			
GALLONS	%	ADDITIVES	
HCL			
HCL			

SERVICE & EQUIPMENT	% TAX ON \$	
MATERIALS	% TAX ON \$	
<b>TOTAL</b>		

SERVICE REPRESENTATIVE: Mike  
 FIELD SERVICE ORDER NO. \_\_\_\_\_  
 THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: \_\_\_\_\_  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)