

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

ORIGINAL

Operator: License # 32016
Name: Pioneer Resources
Address: 177 W. Limestone Rd.
City/State/Zip: Phillipsburg, Kansas 67661
Purchaser: _____
Operator Contact Person: Rodger D. Wells
Phone: (785) 543-5556
Contractor: Name: Shields Drilling Co.
License: 5184
Wellsite Geologist: Todd Morgenstern

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. _____
11-27-06 12-09-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23244-0000
County: Graham
SW SE SW Sec. 10 Twp. 8 S. R. 23 East West
330 feet from S / N (circle one) Line of Section
1600 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Boxcar Well #: 1
Field Name: Hilger

Producing Formation: _____
Elevation: Ground: 2201 Kelly Bushing: 2206
Total Depth: 3676 Plug Back Total Depth: 1800

Amount of Surface Pipe Set and Cemented at 214 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 A14 II NH 7-9-08
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used Air Dry & Covered

Location of fluid disposal if hauled offsite: _____
Operator Name: _____ RECEIVED
KANSAS CORPORATION COMMISSION
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. S. R. 8 2007 East West
County: _____ Docket No. _____
CONSERVATION DIVISION
WICHITA, KS

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: Rodger D. Wells
Title: owner
Date: 5/7/07

BEVERLY A. SCHEMPER
NOTARY PUBLIC
STATE OF KANSAS
3-22-09
My App. Exp. _____

Subscribed and sworn to before me this 7th day of May,
2007
Notary Public: Beverly A. Schemper
Date Commission Expires: March 22, 2009

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

Operator Name: Pioneer Resources Lease Name: Boxcar Well #: 1
 Sec. 10 Twp. 8 S. R. 23 East West County: Graham

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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey Cores Taken Electric Log Run <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Name</td> <td style="width:30%;">Top</td> <td style="width:40%;">Datum</td> </tr> <tr> <td>Anhy.</td> <td>1855</td> <td>+351</td> </tr> <tr> <td>Topeka</td> <td>3230</td> <td>-1024</td> </tr> <tr> <td>Heebner</td> <td>3442</td> <td>-1236</td> </tr> <tr> <td>LKC</td> <td>3479</td> <td>-1273</td> </tr> <tr> <td>RTD</td> <td>3675</td> <td>-1469</td> </tr> </table>	Name	Top	Datum	Anhy.	1855	+351	Topeka	3230	-1024	Heebner	3442	-1236	LKC	3479	-1273	RTD	3675	-1469
Name	Top	Datum																		
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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	# Sacs Used	Type and Percent Additives
Surface	12 1/4 in.	8 5/8	7.875	214	60/40 Pozmix	150	2% Gel. 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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1880'	Common	160	Pozmix 2% Gel. Flo Seal

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

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 checked="" 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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

ALLIED CEMENTING CO., INC.

25790

Federal Tax I.D.#

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

SERVICE POINT:
Oakley

DATE <u>12-9-06</u>	SEC. <u>10</u>	TWP. <u>-8</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION <u>10:30 PM</u>	JOB START <u>11:00 PM</u>	JOB FINISH <u>2:00 AM</u>
LEASE <u>Boxcar</u>	WELL# <u>1</u>	LOCATION <u>Hill city 1/2 mi N into</u>			COUNTY <u>Graham</u>	STATE <u>Kansas</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Shields

TYPE OF JOB PTA

HOLE SIZE 7 1/8 T.D. 3675

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 1860

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER Some

CEMENT

AMOUNT ORDERED 200 sks 6 1/2 6 7/8 gel
1/4 # Flo-seal

COMMON	<u>120</u>	@	<u>12.20</u>	<u>1464.00</u>
POZMIX	<u>80</u>	@	<u>6.10</u>	<u>488.00</u>
GEL	<u>10</u>	@	<u>16.65</u>	<u>166.50</u>
CHLORIDE		@		
ASC		@		
	<u>#50 Flo-seal</u>	@	<u>2.00</u>	<u>100.00</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>210 sks</u>	@	<u>1.90</u>	<u>399.00</u>
MILEAGE	<u>90 sk/mile</u>			<u>1417.50</u>
TOTAL				<u>4035.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Dean

373-281 HELPER Andrew

BULK TRUCK

218 DRIVER Alan

BULK TRUCK

DRIVER

REMARKS:

<u>25 sks</u>	<u>1860'</u>
<u>100 sks</u>	<u>1050'</u>
<u>40 sks</u>	<u>260'</u>
<u>10 sks</u>	<u>40'</u>
<u>10 sks</u>	<u>mouse hole</u>
<u>15 sks</u>	<u>Rat hole</u>

CHARGE TO: Pioneer Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>1860</u>
PUMP TRUCK CHARGE	<u>815</u>
EXTRA FOOTAGE	@
MILEAGE	<u>75 miles @ 6.00</u> <u>450</u>
MANIFOLD	@
	@
	@
TOTAL <u>1265.00</u>	

PLUG & FLOAT EQUIPMENT

<u>1 8 1/2 Dry hole plug</u>	@	<u>35.00</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.

RECEIVED TOTAL 35.00
KANSAS CORPORATION COMMISSION

TAX MAY 08 2007

TOTAL CHARGE CONSERVATION DIVISION
WICHITA, KS

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

Jeremy Eilers
PRINTED NAME

ALLIED CEMENTING CO., INC.

21321

Federal Tax I.I

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

SERVICE POINT: K

DATE <u>11/28/06</u>	SEC <u>10</u>	TWP <u>8</u>	RANGE <u>23^W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:45</u>	JOB FINISH <u>4:00 AM</u>
LEASE <u>Boyer</u>	WELL # <u>1</u>	LOCATION <u>HILL CITY 1/2 mi</u>			COUNTY <u>Osage</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR SIELAS

TYPE OF JOB Sidew

HOLE SIZE 12 1/4 T.D. 226

CASING SIZE 8 7/8 DEPTH 222

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13 226

OWNER

CEMENT

AMOUNT ORDERED 100 cu yds 3200
25 FL

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

HANDLING @

MILEAGE

EQUIPMENT

PUMP TRUCK CEMENTER Modic

409 HELPER RIC

BULK TRUCK

2/10 DRIVER JOE

BULK TRUCK

DRIVER

REMARKS:

CEMENT OK

THANKS

CHARGE TO: PROFFER RESOURCES

STREET

CITY STATE ZIP

TOTAL

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD @

TOTAL

PLUG & FLOAT EQUIPMENT

8 7/8 @

@

@

@

@

TOTAL

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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.

RECEIVED
KANSAS CORPORATION COMMISSION

TAX

TOTAL CHARGE MAY 08 2007

DISCOUNT CONSERVATION DIVISION WICHITA, KS IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME