

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 # 5146
Name: Rains & Williamson Oil Co., Inc.
Address 1: 220 W. Douglas, Suite 110
Address 2: _____
City: Wichita State: KS Zip: 67202 + _____
Contact Person: Juanita Green
Phone: (316) 265-9686

CONTRACTOR: License # 30606
Name: Murfin Drilling Company, Inc.
Wellsite Geologist: Mikeal K. Maune
Purchaser: _____

Designate Type of Completion: **KCC WICHITA**
____ 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.: _____
5/29/09 6/6/09 6/6/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 083-21599-00-00
Spot Description: _____
N/2 SE SE Sec. 25 Twp. 21 S. R. 22 East West
990 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: Hodgeman
Lease Name: Hahn Well #: 2
Field Name: Marena Southwest
Producing Formation: _____
Elevation: Ground: 2243' Kelly Bushing: 2248'
Total Depth: 4550' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 221 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.} DH-DLG-7/20/09

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: Juanita M. Green
Title: President Date: 6/12/09
Subscribed and sworn to before me this 12th day of June
2009
Notary Public: Patricia A. Thome
Date Commission Expires: 6-18-2013

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

PATRICIA A. THOME
Notary Public - State of Kansas
My Appt. Expires 6-18-2013

Operator Name: Rains & Williamson Oil Co., Inc. Lease Name: Hahn Well #: 2
 Sec. 25 Twp. 21 S. R. 22 East West County: Hodgeman

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: Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input 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>Anhydrite</td> <td>1417</td> <td>+831</td> </tr> <tr> <td>Heebner</td> <td>3811</td> <td>-1563</td> </tr> <tr> <td>Lansing</td> <td>3866</td> <td>-1618</td> </tr> <tr> <td>BKC</td> <td>4233</td> <td>-1985</td> </tr> <tr> <td>Fort Scott</td> <td>4389</td> <td>-2141</td> </tr> <tr> <td>Cherokee</td> <td>4413</td> <td>-2165</td> </tr> <tr> <td>Mississippian Osage</td> <td>4474</td> <td>-2226</td> </tr> </table>	Name	Top	Datum	Anhydrite	1417	+831	Heebner	3811	-1563	Lansing	3866	-1618	BKC	4233	-1985	Fort Scott	4389	-2141	Cherokee	4413	-2165	Mississippian Osage	4474	-2226
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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"	23#	221	Common	165	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 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 <i>(Amount and Kind of Material Used)</i>	Depth
		<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>RECEIVED JUN 16 2009 KCC WICHITA</p> </div>	

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 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: <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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ALLIED CEMENTING CO., LLC. 036309

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

SERVICE POINT:
Great Bend KS

DATE <u>5-29-09</u>	SEC. <u>25</u>	TWP. <u>21S</u>	RANGE <u>22W</u>	CALLED OUT <u>6:00 PM</u>	ON LOCATION <u>8:00 PM</u>	JOB START <u>11:00 PM</u>	JOB FINISH <u>11:30 PM</u>
LEASE <u>Hahn</u>		WELL # <u>2</u>	LOCATION <u>Hanson US 2 East</u>			COUNTY <u>Hodgeman</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>3 1/2 North west in To</u>				

CONTRACTOR Murkin 24 OWNER Rain & Williamson oil Co. Inc

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 221 CEMENT AMOUNT ORDERED 160 sk class A 3% cr

CASING SIZE 8 5/8 DEPTH 221 2% Gel

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH 221

TOOL DEPTH

PRES. MAX 200 MINIMUM 0

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 BBhs fresh water

EQUIPMENT

PUMP TRUCK CEMENTER Wayne - D

181 HELPER Galien - D

BULK TRUCK

344-170 DRIVER Dennis - W

BULK TRUCK

DRIVER

REMARKS:

Pipe on bottom Break circulation
Mix 160 sk class A with 3% cr 2% Gel
shut down and Release plug
and Displace with 13 BBhs
of fresh water. Cement did
circulate wash up and
Rig Down

COMMON 160 @ 13.50 2160.00

POZMIX @

GEL 3 @ 20.25 60.75

CHLORIDE 5 @ 51.56 257.50

ASC @

@

@

RECEIVED @

JUN 16 2009 @

KCC WICHITA @

@

@

HANDLING 168 @ 2.25 378.00

MILEAGE 168 x 3.27 = 10 537.60

TOTAL 3,393.85

SERVICE

DEPTH OF JOB 221

PUMP TRUCK CHARGE 991

EXTRA FOOTAGE @

MILEAGE 32 @ 7.00 224.00

MANIFOLD @

@

@

TOTAL 1215.00

CHARGE TO: Rain & Williamson oil Co. Inc

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

1 8 1/4 wooden plug @ 66.00 66.00

@

@

@

@

TOTAL 66.00

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Anthony Martin

SIGNATURE Anthony Martin

ALLIED CEMENTING CO., LLC. 036248

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

SERVICE POINT:
Great Bend, KS

DATE <u>6-06-09</u>	SEC. <u>25</u>	TWP. <u>21</u>	RANGE <u>22</u>	CALLED OUT	ON LOCATION	JOB START <u>1:30 Am</u>	JOB FINISH <u>2:50 Am</u>
LEASE <u>Hahn</u>		WELL # <u>2</u>		LOCATION <u>Hanston C. to 2300th N. 2 1/2</u>		COUNTY <u>Hodgeman</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>W/into</u>			

CONTRACTOR Murfin #24

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 1470'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 1470'

TOOL _____ DEPTH _____

PRES. MAX 100# MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT Fresh water

OWNER _____

CEMENT

AMOUNT ORDERED 220sx 60/40 4/10 cwt

1/4# Flocal

COMMON	<u>132</u>	@	<u>13.50</u>	<u>1782.00</u>
POZMIX	<u>88</u>	@	<u>7.55</u>	<u>664.40</u>
GEL	<u>8</u>	@	<u>20.25</u>	<u>162.00</u>
CHLORIDE	_____	@	_____	_____
ASC	_____	@	_____	_____
<u>Flocal</u>	<u>55</u>	@	<u>2.45</u>	<u>134.75</u>
HANDLING	<u>229</u>	@	<u>2.25</u>	<u>515.25</u>
MILEAGE	<u>32/229/10</u>			<u>732.80</u>
TOTAL				<u>3991.20</u>

RECEIVED
JUN 16 2009
KCC WICHITA

EQUIPMENT

PUMP TRUCK CEMENTER Randy

181 HELPER Galien

BULK TRUCK

344-170 DRIVER Wayne

BULK TRUCK

_____ DRIVER _____

REMARKS:

On location Safety meeting Rig up

1st 1470' 50sx

2nd 750' 80sx

3rd 240' 40sx

4th 60' 20sx

Rathole 30sx

Rig down

SERVICE

DEPTH OF JOB	<u>1470'</u>			
PUMP TRUCK CHARGE			<u>990.00</u>	
EXTRA FOOTAGE	_____	@	_____	
MILEAGE	<u>32</u>	@	<u>7.00</u> <u>227.00</u>	
MANIFOLD	_____	@	_____	
_____	_____	@	_____	
_____	_____	@	_____	
TOTAL				<u>1214.00</u>

CHARGE TO: Rains + Williamson

STREET _____

CITY _____ STATE _____ ZIP _____

Thank You!

To Allied Cementing Co., LLC.
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PRINTED NAME Anthony Martin

SIGNATURE Anthony Martin

SALES TAX (If Any) _____

TOTAL CHARGES ~~3991.20~~ _____

DISCOUNT _____ IF PAID IN 30 DAYS