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

051-25712-000 DRIGINA API No. 15 - 25712 Operator: License # 32016 County: Ellis Name: Pioneer Resources SE - NW SWSec. 36 Twp. 11 s. R.20 East West Address: 80 Windmill Dr. Phillipsburg, KS. 67661 1610 feet from S N (circle one) Line of Section City/State/Zip: _ 990 feet from E /(W) circle one) Line of Section Purchaser:__ Footages Calculated from Nearest Outside Section Corner: Operator Contact Person: Rodger D. Wells (circle one) NE SE Phone: (_785) __543-5556_ Contractor: Name: Southwind Drilling Inc. Lease Name: JoAnn Stella Field Name:____ License: Wellsite Geologist: Roger Fischer Producing Formation:____ Elevation: Ground: 2111 Kelly Bushing: 2119 Designate Type of Completion: Total Depth: 3800 Plug Back Total Depth: 3800 ✓ New Well ____ Re-Entry Amount of Surface Pipe Set and Cemented at 264 __ SIOW __Temp. Abd. __ Gas ____ ENHR ____ SIGW Multiple Stage Cementing Collar Used? Yes No If yes, show depth set _____ _____ Other (Core, WSW, Expl., Cathodic, etc) If Alternate II completion, cement circulated from_____ If Workover/Re-entry: Old Well info as follows: feet depth to_____ Well Name: _ Drilling Fluid Management Plan PHA AIT I MIK Original Comp. Date: _____ Original Total Depth: ___ (Data must be collected from the Reserve Pit) 10-21-08 ____Re-perf. __Conv. to Enhr./SWD Deepening Chloride content ____ Plug Back Total Depth Plug Back___ Dewatering method used____ ... Commingled Docket No .___ Location of fluid disposal if hauled offsite: Docket No .__ ___ Dual Completion Operator Name: ____ __ Other (SWD or Enhr.?) Docket No.. Lease Name: License No.: 6-28-08 6-20-08 Completion Date or Spud Date or Date Reached TD Recompletion Date Recompletion Date 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. KCC Office Use ONLY Signature: Letter of Confidentiality Attached If Denied, Yes Date:___ Subscribed and sworn to before me this_ RECEIVED Wireline Log ReceivedKANSAS CORPORATION COMMISSION 11 2008 **Geologist Report Received** Notary Public: Konniel SEP 16 2008 **UIC Distribution** NOTARY PUBLIC STATE OF KANSAS CONSERVATION DIVISION My App. Exp.c3cク STATE OF KANSAS WICHITA, KS

Operator Name:P Sec36 Twp					Name: :Ell		•	_ Well #: _1		<u>, , , , , , , , , , , , , , , , , , , </u>	
NSTRUCTIONS: Shested, time tool open temperature, fluid recretectric Wireline Logs	and closed, flowing overy, and flow rates	and shut- if gas to	in pressures, s surface test, a	whether sh long with fi	out-in pres	sure reached s	tatic level, hydro	static pressur	es, bottom	hole	
Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey			Yes X No And			g Formatio	nd Datum	d Datum Sample			
						:		[*] Тор 1480 3147		Datum +635	
						-					
Cores Taken Ly Electric Log Run (Submit Copy)			res □No Hee			eb., 33		147 -1028 370 -1251 406 -1287		1	
Dual Com	uction Log pensated P istivity L		Ly Log		Arb TD	uckle		705 800	-158 -168		
		Repar		RECORD onductor, su	New	v Used	on, etc.			· · · · · · · · · · · · · · · · · · ·	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig		Setting Depth	Type of Cement	# Sacjs Used		d Percent litives	
Surface	12 4	85/8		20		264 '	Com	170	3%CC	2%Ge1	
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	•		ADDITIONAL	CEMENTIN	NG / SQU	EEZE RECORD		******			
Purpose:Perforate	Depth Top Bottom	Type of Cement		#Sacks Used		Type and Percent Additives					
Protect Casing Plug Back TD Plug Off Zone	3822	60/	40	215	5	4% Gel	⅓ FC p	oer sac	· · · · · · · · · · · · · · · · · · ·		
Shots Per Foot	ION RECORD - Bridge Plugs Set/Type Footage of Each Interval Perforated				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth						
							,				
TUBING RECORD	Size	Set At		Packer A	t	Liner Run	Yes No				
Date of First, Resumerd	Production, SWD or E	nhr.	Producing Met	_	Flowing	Pumpin	g 🔲 Gas Li	it 🗌 Ott	ner <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	86	ds. (Gravity	
Disposition of Gas	METHOD OF C	OMPLETIO	N			Production Interv	ai				
Vented Sold	Used on Lease		Open Hole Other (Speci	Perf.	O	ually Comp.	Commingled				

ALLIED CEMENTING CO., LLC.

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

SERVICE POINT:

DATE 6 20-06 SEC. TWP. RANGE	CALLED OUT ON LOCATIO	
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TUBING SIZE DEPTH	<u> </u>	Epo- Seal Fex SE
DRILL PIPE 41/2 X- H DEPTH@ 3689		
TOOL DEPTH PRES. MAX MINIMUM		
PRES. MAX MINIMUM MEAS. LINE SHOE JOINT	COMMON POZMIX	
CEMENT LEFT IN CSG.	GEL	@
PERFS.	CHLORIDE	<u> </u>
DISPLACEMENT	ASC	0
EQUIPMENT		@
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PUMPTRUCK CEMENTER College	— —	
# 398 HELPER (1984)		
BULK TRUCK		<u> </u>
# 410 DRIVER ************************************	_	@
# DRIVER		@
i date	- HANDLING	
DEMADES	MILEAGE	
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35 SK @ 1508 	DEPTH OF JOB	SEP 16 2008
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STREET		TOTAL
CITY STATE ZIP	–	OAT EQUIPMENT
		<u>@</u>
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		TOTAL
contractor. I have read and understand the "GENERAL		
TERMS AND CONDITIONS" listed on the reverse side	CAT TO TAY /IF A N	
	TOTAL CHARGES	
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PRINTED NAME TOY HAVEA	_ DISCOUNT	IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC.

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

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