

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3180
Name: Deutsch Oil Company
Address 1: 8100 E. 22nd Street North, Bldg. 600
Address 2: _____
City: Wichita State: Ks Zip: 67226 + _____
Contact Person: Kent Deutsch
Phone: (316) 681-3567
CONTRACTOR: License # 34190
Name: Vision Oil & Gas
Wellsite Geologist: Kent Deutsch
Purchaser: Central Crude Corporation

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

<u>11-14-08</u>	<u>11-23-08</u>	<u>11-24-08</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051258410000
Spot Description: _____
78° E SW SE NE Sec. 9 Twp. 11 S. R. 19 East West
2970 Feet from North / South Line of Section
915 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Darla Well #: 1-9
Field Name: Solomon
Producing Formation: Arbuckle
Elevation: Ground: 2088 Kelly Bushing: 2096
Total Depth: 3720 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 283 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1455 Feet
If Alternate II completion, cement circulated from: 1455
feet depth to: surface w/ 375 60/40poz 6%gel 11/2-17g-7/29/09 5x cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 20000 ppm Fluid volume: 150 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-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: Owner Date: 02-28-09

Subscribed and sworn to before me this 28th day of February

20 09.
Notary Public: Karri Knox-Wolken

Date Commission Expires: _____
KARRI KNOX-WOLKEN
Notary Public - State of Kansas
My Appt. Expires 9/28/09

KCC Office Use ONLY

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

RECEIVED
JUL 20 2009

KCC WICHITA

Operator Name: Deutsch Oil Company Lease Name: Darla Well #: 1-9
 Sec. 9 Twp. 11 S. R. 19 East West County: Ellis

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: Neutron/Density Dual Induction Micro 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>1418</td> <td>+ 678</td> </tr> <tr> <td>Heebner</td> <td>3274</td> <td>- 1178</td> </tr> <tr> <td>Lansing</td> <td>3316</td> <td>- 1220</td> </tr> <tr> <td>Arbuckle</td> <td>3625</td> <td>- 1529</td> </tr> </table>	Name	Top	Datum	Anhydrite	1418	+ 678	Heebner	3274	- 1178	Lansing	3316	- 1220	Arbuckle	3625	- 1529
Name	Top	Datum														
Anhydrite	1418	+ 678														
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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	283	common	180	2% gel 3% cc
Production	7 7/8	5 1/2	15	3714	common	175	10% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1455	60/40 poz	375	6% gel, 1/4# FS per sx.

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
4	3658-3660		
4	3650-3652		
4	3626-3628		
Bridge Plug	3645		

TUBING RECORD:	Size: <u>2 7/8</u>	Set At: <u>3628</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>02-19-09</u>		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. <u>12</u>	Gas Mcf <u>0</u>	Water, Bbls. <u>80</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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3626-3628</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

ALLIED CEMENTING CO., LLC. 034964

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell KS

DATE <u>11-24-08</u>	SEC. <u>9</u>	TWP. <u>11</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>11:00 am</u>	JOB FINISH <u>11:45 am</u>
LEASE <u>Darla</u>	WELL # <u>1-9</u>	LOCATION <u>Yocemento & I-70 14 North</u>			COUNTY <u>Ellis</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>West into.</u>				

CONTRACTOR Vision # 20

TYPE OF JOB Production string Top stage

HOLE SIZE 7 7/8 T.D. 3720' Log TD 3717'

CASING SIZE 5 1/2 14" DEPTH 3714'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL DV Tool DEPTH 1498'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 36.55 Bbl

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts

409 HELPER Travis

BULK TRUCK

481 DRIVER Mike

BULK TRUCK

_____ DRIVER _____

REMARKS:

DV Tool @ 1498' Open DV Tool circulate
30 min. Plug Rat hole w/ 30sk cement
mix 345 sk 60-40 6% Gel 1/4" Flo Cement
Displace plug w/ 36.55 Bbl H2O

Bump plug & Close DV Tool @ 1500 psi

Cement Did Circulate!

CHARGE TO: Deutsch Oil Company

STREET _____

CITY _____ STATE _____ ZIP _____

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 Bill Skeen

SIGNATURE Bill Skeen

John Roberts

OWNER _____

CEMENT

AMOUNT ORDERED 375 60/40 6% Gel 1/4" Flo

COMMON	<u>225</u>	@ <u>13.50</u>	<u>3037.50</u>
POZMIX	<u>150</u>	@ <u>7.55</u>	<u>1132.50</u>
GEL	<u>19</u>	@ <u>20.25</u>	<u>384.75</u>
CHLORIDE		@	
ASC		@	
<u>Flo seal</u>	<u>94 lbs</u>	@ <u>2.45</u>	<u>230.30</u>
RECEIVED			
<u>JUL 20 2009</u>			
KCC WICHITA			
HANDLING	<u>394.40</u>	@ <u>2.25</u>	<u>886.50</u>
MILEAGE	<u>SK/mf. 10</u>		<u>1182.00</u>
			TOTAL <u>6853.55</u>

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1159.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>30</u>	@ <u>7.00</u>	<u>210.00</u>
MANIFOLD		@	
		@	
		@	
			TOTAL <u>1369.00</u>

PLUG & FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
			TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

