

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

Operator: License # 30717
Name: DOWNING NELSON OIL COMPANY, INC
Address: PO BOX 372
City/State/Zip: HAYS, KS 67601
Purchaser: _____
Operator Contact Person: RON NELSON
Phone: (785) 621-2610
Contractor: Name: DISCOVERY DRILLING CO., INC.
License: 31548
Wellsite Geologist: RON NELSON

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

10/06/2005	10/12/2005	10/13/2005
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25,465-00-00

County: ELLIS

70'N W/2 SE NW Sec. 15 Twp. 14 S. R. 16 East West
1910 feet from S / N (circle one) Line of Section
1650 feet from E / W (circle one) Line of Section

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

Lease Name: HOFFMAN Well #: 1-15

Field Name: WILDCAT

Producing Formation: LKC

Elevation: Ground: 1919 Kelly Bushing: 1927

Total Depth: 3517' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 222.25 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1014 Feet

If Alternate II completion, cement circulated from 1014
feet depth to SURFACE w/ 110 sx cmt.

Drilling Fluid Management Plan Ait II MR
(Data must be collected from the Reserve Pit) 10-24-08
Chloride content 11,000 ppm Fluid volume 300 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.: _____

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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: Alan Downing
Title: VICE PRESIDENT Date: 03/22/2006

Subscribed and sworn to before me this 22 day of March

2006
Notary Public: Michele L Meier

Date Commission Expires: 7/28/09

MICHELE L. MEIER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 7/28/09

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

Operator Name: DOWNING NELSON OIL COMPANY, INC Lease Name: HOFFMAN Well: AM13190
 Sec. 15 Twp. 14 S. R. 16 East West County: ELLIS

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final completion systems 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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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: Micro, Sonic, Dual Induction, Compensated Density / Neutron	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>ANHYDRITE</td> <td>1015</td> <td>+912</td> </tr> <tr> <td>BASE</td> <td>1054</td> <td>+873</td> </tr> <tr> <td>TOPEKA</td> <td>2894</td> <td>-967</td> </tr> <tr> <td>HEEBNER</td> <td>3112</td> <td>-1185</td> </tr> <tr> <td>TORONTO</td> <td>3131</td> <td>-1204</td> </tr> <tr> <td>LKC</td> <td>3159</td> <td>-1232</td> </tr> <tr> <td>BKC</td> <td>3397</td> <td>-1470</td> </tr> <tr> <td>ARBUCKLE</td> <td>3471</td> <td>-1544</td> </tr> </table>	Name	Top	Datum	ANHYDRITE	1015	+912	BASE	1054	+873	TOPEKA	2894	-967	HEEBNER	3112	-1185	TORONTO	3131	-1204	LKC	3159	-1232	BKC	3397	-1470	ARBUCKLE	3471	-1544
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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"	20	222.25	COMMON	150	2% GEL & 3% CC
Production	7 7/8	5 1/2"	14	3513.45	EA/2	150	
			DV TOOL @	1014'	SMDC	110	

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
	SEE ATTACHMENT		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	3442.75		
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
01/03/06		<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
	25	0	40	

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
(If vented, Submit ACO-18.) Other (Specify) _____

Downing Nelson Oil Company, Inc.
PO Box 372
Hays, KS 67601

HOFFMAN #1-15
Sec. 15 Twp. 14 R. 16
County: Ellis

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
4	3329'-3332' & 3252'-3256'	500 gallons 15% Mud Acid
4	3231'-3236', 3186'-3190' & 3159'-3162'	
4	3202' - 3207'	Squeeze 50sxs 60/40 Poz Mix
4	3159' - 3162' & 2321'- 3236'	500 gallons 15% Mud Acid
4	3346'-3349', 3325'-3328' & 3303'-3306'	1000 gallons 15% Mud Acid
4	3252' - 3256' & 3186'- 3190'	

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ALLIED CEMENTING CO., INC. 25638

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>11-16-05</u>	SEC. <u>15</u>	TWP. <u>24</u>	RANGE <u>36</u>	CALLED OUT <u>9:00am</u>	ON LOCATION <u>12:45pm</u>	JOB START <u>1:00pm</u>	JOB FINISH <u>3:15pm</u>
LEASE <u>HOFFMAN</u>	WELL # <u>1-15</u>	LOCATION <u>Walker 1 1/2 S 1w 2 S 1/4 E</u>		COUNTY <u>Ellis</u>	STATE <u>KANSAS</u>		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR K-C Well Service OWNER _____

TYPE OF JOB Squeeze (KC)

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2" DEPTH _____

DRILL PIPE (DAN) DEPTH _____

TOOL DAN'S Packer DEPTH 3197'

PRES. MAX 1750# MINIMUM 500#

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. @ 3202 - 3207

DISPLACEMENT T-12.40 BBL

EQUIPMENT

PUMP TRUCK CEMENTER GLENN

366 HELPER FRED

BULK TRUCK

37E DRIVER Brian

BULK TRUCK

_____ DRIVER _____

REMARKS:

Perm Plug @ 3220'. PERFC-3202-07'
Set Packer @ 3197' + Took INJECTION RATE
OF 1 Bbl/E 600#. - Load BACKSIDE -
Mixed 50 SK Cement + Squeezed
To 1750 #. Release + WASH around Packer
Reset + Test To 500# (HOLD).
Came out of hole.

THANK'S

CHARGE TO: Downing & Nelson

STREET _____

CITY _____ STATE _____ ZIP _____

CEMENT (USED 50 SK)

AMOUNT ORDERED 150 SK 60/40 2% CC

COMMON	<u>50</u>	@	<u>870</u>	<u>435 00</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>1</u>	@	<u>38 00</u>	<u>38 00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>153</u>	@	<u>160</u>	<u>244 80</u>
MILEAGE	<u>16</u>		<u>64/SK</u>	<u>MILE</u>
				<u>180 00</u>
				<u>TOTAL: 897 00</u>

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SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 780 00

EXTRA FOOTAGE _____ @ _____

MILEAGE 16 @ 5 00 80 00

MANIFOLD yes @ _____

_____ @ _____

_____ @ _____

TOTAL 860 00

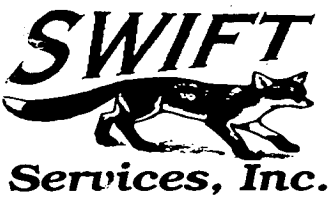
PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____



CHARGE TO: *Dunning - Nelson Oil*
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET
 No 8743

PAGE 1 OF 2

1. SERVICE LOCATIONS	WELL/PROJECT NO. <i>1-15</i>	LEASE <i>Huffman</i>	COUNTY/PARISH <i>Ellis</i>	STATE <i>TX</i>	CITY	DATE <i>10-13-05</i>	OWNER
2. <i>WESSLEY</i>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <i>Dunning - Nelson Oil</i>	SHIPPED VIA <i>CT</i>	DELIVERED TO <i>1400 W. 1st St. Suite 2110 Dallas TX</i>	ORDER NO.	
3.	WELL TYPE <i>Oil</i>	WELL CATEGORY <i>Dev</i>	JOB PURPOSE <i>2 Stage Long String</i>	WELL PERMIT NO. <i>15-251-25425-00-00</i>	WELL LOCATION <i>25,74,2110</i>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #105	40		mi		4.00	160.00
57		1			Pump Service 2 stage	1		cc		1600.00	1600.00
331		1			Leak Seal	1		gal		25.00	25.00
351		1			Blue Fluid	500		gal		75.00	375.00
400		1			Cat + Sealant	7		cc	5 1/2 in	60.00	420.00
400		1			Cat + Sealant	1		cc	5 1/2 in	235.00	235.00
407		1			Inject Fluid Same w/ A-4 F-11	1		cc	5 1/2 in	250.00	250.00
408		1			D.V. Tool & Plug Seal <i>10477</i>	1		cc	5 1/2 in	2800.00	2800.00
417		1			D.V. Leak Down Plug & Seal	1		cc	5 1/2 in	200.00	200.00
419		1			Plugging Hard Seal	1		cc	5 1/2 in	250.00	250.00

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*
 DATE SIGNED: *10-13-05* TIME SIGNED: A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				PAGE TOTAL	6380.00
WE UNDERSTOOD AND MET YOUR NEEDS?				262	4400.00
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				721	10785.00
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: _____ APPROVAL: _____

Thank You!

