

ORIGINAL

6/1/09

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5030
Name: Vess Oil Corporation
Address: 1700 Waterfront Parkway, Bldg. 500
City/State/Zip: Wichita, KS 67206
Purchaser:
Operator Contact Person: W.R. Horigan
Phone: (316) 682-1537 X103
Contractor: Name: Simmons Well Service, Inc.
License: 32991
Wellsite Geologist: none

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: OXY USA, Inc.

Well Name: Chesney A #228
Original Comp. Date: 10/18/93 Original Total Depth: 2399
 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.

5/4/09 5/13/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 015-23350-0001
County: Butler
NE NW SE Sec. 21 Twp. 25 S. R. 05 East West
2520 feet from S N (circle one) Line of Section
1660 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Chesney A Well #: 228
Field Name: El Dorado

Producing Formation: Hepler
Elevation: Ground: 1373 Kelly Bushing: 1378
Total Depth: 2399 Plug Back Total Depth: 2316
Amount of Surface Pipe Set and Cemented at 227 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 2378
feet depth to 0 w/ 365 _____ sx cmt.

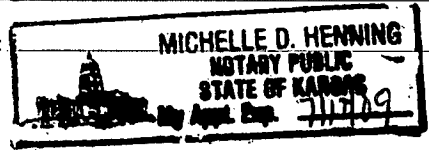
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite:
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

wo-log-7/23/09

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: Casey Bonta
Title: Operations Engineer Date: 6/1/09
Subscribed and sworn to before me this 15th day of June
20 09.
Notary Public: Michelle D. Henning
Date Commission Expires:



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
JUN 08 2009

KCC WICHITA

Operator Name: Vess Oil Corporation Lease Name: Chesney A Well #: 228
 Sec. 21 Twp. 25 S. R. 05 East West County: Butler

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 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 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| 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 | 2375/2399 | Class A | 20 | |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type | Acid, Fracture, Shot, Cement Squeeze Record | Depth |
|----------------|---|--|---------|
| | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used) | |
| 6 | 2363-2373 CIBP - 2316 | 200 gal acid | 2363-73 |
| 2 | 2170-2190 | 250 gal 15% acid; 165 bbl gel water 6000# 20/40 sand 1000# 12/20 sand | 2170-90 |

| TUBING RECORD | | Size | Set At | Packer At | Liner Run |
|---|-----------|---|-------------|---------------|---|
| | | 2-7/8" | 2231 | 0 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. | | Producing Method | | | |
| 5/14/09 | | <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 |
| | 60 | 0 | 1 | | |

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____
 Production Interval 2170-90