

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

ORIGINAL

OPERATOR: License # 33551

Name: Steve Jackson dba S & K Oil Company

Address 1: P.O. Box 184

Address 2: _____

City: Blue Mound State: Ks Zip: 66010

Contact Person: Steve Jackson

Phone: (913) 756-2622

CONTRACTOR: License # 31519

Name: Lone Jack Oil Company

Wellsite Geologist: _____

Purchaser: _____

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.: _____

07/11/09 7/12/09 7/14/09

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-011-23599-00-00

Spot Description: NE 1/4 26-24-21E

NWNE NENE Sec. 26 Twp. 24 S. R. 21 East West

165 Feet from North / South Line of Section

270 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Bourbon

Lease Name: Thompson Well #: SK 3

Field Name: Bronson/Xenia

Producing Formation: Cattleman

Elevation: Ground: 1075 Kelly Bushing: _____

Total Depth: 676 Plug Back Total Depth: 665

Amount of Surface Pipe Set and Cemented at: 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 0

feet depth to: 20 w/ 5 sx cmt.

Drilling Fluid Management Plan AH II NCR 8-27-09
(Data must be collected from the Reserve Pit)

Chloride content: None ppm Fluid volume: _____ bbls

Dewatering method used: Pumped out put in disposal well

Location of fluid disposal if hauled offsite:

Operator Name: Steve Jackson dba S & K Oil Company

Lease Name: Thompson License No.: 33551

Quarter NE 1/4 Sec. 26 Twp. 24 S. R. 21 East West

County: Bourbon Docket No.: 14355

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: Steve Jackson

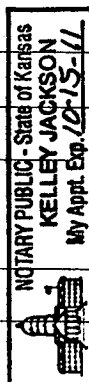
Title: owner Date: 8-21-09

Subscribed and sworn to before me this 21 day of August

2009

Notary Public: Kelley Jackson

Date Commission Expires: October 15, 2011



KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

AUG 24 2009

RECEIVED

Operator Name: Steve Jackson dba S& K Oil Compa Lease Name: Thompson Well #: SK 3
 Sec. 26 Twp. 24 S. R. 21 East West County: Bourbon

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Cattleman Top 659 Datum 664
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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	# Sacks Used	Type and Percent Additives
Surface	9 7/8	6 1/4	6	20	One	5	None
Casing	5 5/8	2 7/8	6	658	One	85	None

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 (Amount and Kind of Material Used)	Depth
Open Hole	658-664	5 sx 50 bbl. water	664

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input checked="" 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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KANSAS CORPORATION COMMISSION
AUG 24 2009
RECEIVED

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
7/15/2009	857

Bill To
S & K Oil Steve & Kelly Jackson Blue Mound, Ks 66010

P.O. No.	Terms	Project

Quantity	<i>THOMSON</i> Description	Rate	Amount
1	7/14/09, Well #SK-3, circulated 85 sacks of cement to surface, pumped 150 gallons of water behind cement and shut in.	400.00	400.00T
	Sales Tax	6.30%	25.20
<i>KCC 8/24/09</i>		KANSAS CORPORATION COMMISSION AUG 24 2009 RECEIVED	

Thank you for your business.	Total	\$425.20
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