

Kim Shoemaker

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 34158
Name: O'Brien Resources, LLC.
Address: P.O. Box 6149
City/State/Zip: Shreveport/LA/71136
Purchaser: Plains Marketing, LP.
Operator Contact Person: Byron E. Trust
Phone: (318) 865-8568
Contractor: Name: WW Drilling, LLC
License: 33724
Wellsite Geologist: Kim Shoemaker

KANSAS CORPORATION COMMISSION

MAY 26 2009

RECEIVED

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: _____
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. _____

3/28/2009 4/06/2009 04/08/2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 101-22163 ← 0000
County: Lane
SW SE NE NE Sec. 8 Twp. 18 S. R. 28 East West
1,313' feet from S / N (circle one) Line of Section
487' feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Yost Well #: 8-2
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 2,744' Kelly Bushing: 2,749'
Total Depth: 4,660' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 212' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____
PA-DIG-8/27/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 2,000 ppm Fluid volume 325 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: N/A
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: *Byron E. Trust*
Title: VP of Operations Date: 5/21/2009
Subscribed and sworn to before me this 21st day of May,
2009.
Notary Public: *Dianne L. Beers*
Date Commission Expires: 6/1/11 **DIANNE L. BEERS, Notary Public**
Notary ID # 26310
Caddo Parish, Louisiana
My Commission is for Life

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

Operator Name: O'Brien Resources, LLC. Lease Name: Yost Well #: 8-2
 Sec. 8 Twp. 18 S. R. 28 East West County: Lane

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: Sonic Log Micro Log Dual Induction Log Compensated Neutron/Density PE Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>B/Anhydrite</td> <td>2,152'</td> <td>+597'</td> </tr> <tr> <td>Heebner</td> <td>3,923'</td> <td>-1,174'</td> </tr> <tr> <td>Lansing</td> <td>3,964'</td> <td>-1,215'</td> </tr> <tr> <td>Fort Scott</td> <td>4,480'</td> <td>-1,731'</td> </tr> <tr> <td>Cherokee</td> <td>4,503'</td> <td>-1,754'</td> </tr> </table>	Name	Top	Datum	B/Anhydrite	2,152'	+597'	Heebner	3,923'	-1,174'	Lansing	3,964'	-1,215'	Fort Scott	4,480'	-1,731'	Cherokee	4,503'	-1,754'
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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	24#/Ft	212'	Common	160 sx.	3% CC, 2% gel

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
		KANSAS CORPORATION COMMISSION MAY 26 2009 RECEIVED	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
N/A				

Date of First, Resumerd Production, SWD or Enhr. N/A	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	N/A	N/A	N/A		

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

ALLIED CEMENTING CO., LLC. 043901

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

SERVICE POINT: Dakley

DATE <u>4-8-09</u>	SEC <u>8</u>	TWP <u>18s</u>	RANGE <u>28w</u>	CALLED OUT	ON LOCATION <u>11:00 AM</u>	JOB START <u>2:00 PM</u>	JOB FINISH <u>9:30 PM</u>
LEASE <u>Yost</u>	WELL # <u>8-2</u>		LOCATION <u>Dighton IN 1/2 E</u>			COUNTY <u>Lane</u>	STATE <u>Ks</u>
OLD OR <u>NEW</u> (Circle one)			<u>3/4 N E into</u>				

CONTRACTOR W + W Rig 10

TYPE OF JOB P.T.A

HOLE SIZE 7 7/8 T.D. 4660'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 2152'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER same

CEMENT

AMOUNT ORDERED 280 SKS 60/10 40gel
14# Flo-seal

COMMON <u>168 SKS</u>	@	<u>13.65</u>	<u>2293.20</u>
POZMIX <u>112 SKS</u>	@	<u>7.60</u>	<u>851.20</u>
GEL <u>10 SKS</u>	@	<u>20.40</u>	<u>204.00</u>
CHLORIDE _____	@		
ASC _____	@		
<u>Flo-seal 70#</u>	@	<u>2.45</u>	<u>171.50</u>
	@		
	@		
	@		
	@		
	@		
HANDLING <u>293 SKS</u>	@	<u>2.10</u>	<u>615.30</u>
MILEAGE <u>.084 sk/mile</u>			<u>750.08</u>
TOTAL			<u>4885.28</u>

EQUIPMENT

PUMP TRUCK CEMENTER Andrew

423-281 HELPER Larene

BULK TRUCK

386 DRIVER Darrin

BULK TRUCK

_____ DRIVER _____

REMARKS:

50 SKS @ 2152'

80 SKS @ 1450'

50 SKS @ 700'

50 SKS @ 240'

20 SKS @ 60'

30 SKS Rathole

Thank you

CHARGE TO: O'Brien Resources

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 2152'

PUMP TRUCK CHARGE 991.00

EXTRA FOOTAGE @ _____

MILEAGE 32 miles @ 7.00 224.00

MANIFOLD _____ @ _____

KANSAS CORPORATION COMMISSION _____ @ _____

MAY 26 2009

RECEIVED

TOTAL 1215.00

PLUG & FLOAT EQUIPMENT

_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
TOTAL			_____

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 Lanora Lang

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS _____