

Handwritten signature

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30259
Name: Werth Exploration Trust
Address 1: 1308 Schwaller Ave.
Address 2: _____
City: Hays State: KS Zip: 67601 + _____
Contact Person: Andy Werth
Phone: (785) 625-3531
CONTRACTOR: License # 31548
Name: Discovery Drilling
Wellsite Geologist: Ed Glassman
Purchaser: NA
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:
WERTH ANDY
Operator: Werth Exploration Trust
Well Name: Worcester SW #1
Original Comp. Date: 9-20-2008 Original Total Depth: 3879
 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.: _____
1-08-2009 1-10-2009 1-16-2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 065-23474-00-01
Spot Description: 4398' FNL & 678' FWL
SW NE SW SW Sec. 716 Twp. 47 S. R. 22 East West
4398 Feet from North / South Line of Section
678 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Worcester SW Well #: 1-A
Field Name: Alda
Producing Formation: LKC
Elevation: Ground: 2285 Kelly Bushing: 2293
Total Depth: 3984 Plug Back Total Depth: 3963
Amount of Surface Pipe Set and Cemented at: 268 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1690 Feet
If Alternate II completion, cement circulated from: 1690
feet depth to: surface w/ 375 sx cmt.

Drilling Fluid Management Plan Owwo-AH II NR
(Data must be collected from the Reserve Pit) 8-6-09
Chloride content: 3000 ppm Fluid volume: 800 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: *Ed Glassman*
Title: Agent/Geologist Date: 2-02-2009
Subscribed and sworn to before me this 2nd day of February,
2009.
Notary Public: *Diana Glassman*
Date Commission Expires: 12-7-11

DIANA GLASSMAN
Notary Public
State of Kansas
My Commission Expires 12-7-11

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

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 03 2009
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Werth Exploration Trust Lease Name: Worcester SW Well #: 1-A
 Sec. 7 Twp. 11 S. R. 22 East West County: Graham

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 <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 checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <input checked="" type="checkbox"/> Dual Receiver Cement Bond Note* Other E-logs and Geologist report were submitted with original ACO-1.	<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>1933</td> <td>360</td> </tr> <tr> <td>B/Anhydrite</td> <td>1965</td> <td>328</td> </tr> <tr> <td>Topeka</td> <td>3280</td> <td>-987</td> </tr> <tr> <td>Heebner</td> <td>3483</td> <td>-1190</td> </tr> <tr> <td>Lansing</td> <td>3523</td> <td>-1230</td> </tr> <tr> <td>Base Kansas City</td> <td>3715</td> <td>-1422</td> </tr> <tr> <td>Conglomerate</td> <td>3823</td> <td>-1530</td> </tr> </table>	Name	Top	Datum	Anhydrite	1933	360	B/Anhydrite	1965	328	Topeka	3280	-987	Heebner	3483	-1190	Lansing	3523	-1230	Base Kansas City	3715	-1422	Conglomerate	3823	-1530
Name	Top	Datum																							
Anhydrite	1933	360																							
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Base Kansas City	3715	-1422																							
Conglomerate	3823	-1530																							

*for
m
2/26/09*

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
Production	7.875	5.5	14	3984	Common	200	1/4# floeal, 5% 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	surface-1690	60/40 POZ	375	6% gel

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
2 spf	3596' - 3599'		
2 spf	3679' - 3682'		

TUBING RECORD: Size: <u>2.875</u> Set At: <u>3823</u> Packer At: <u>None</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>02-02-2009</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>35</u> Gas Mcf <u>None</u> Water Bbls. <u>5</u> Gas-Oil Ratio Gravity <u>33</u>

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>3596' - 3682' OA</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

MY Commission Expires
 State of Kansas
 Notary Public
 KANSAS
 67202



P. O. Box 466
Ness City, KS 67560
Off: 785-798-2300



Invoice

DATE	INVOICE #
1/10/2009	15341

BILL TO
Werth Exploration Trust 1308 Schwaller Ave Hays, KS 67601-0533

*Paid 1-19-09
ck# 4243
\$12,257.94
Worcester SW
02/10/09
^ 1A*

Acidizing
Cement
Tool Rental

*Jan
27/09*

TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Job Purpose	Operator
Net 30	#1A	Worcester SW	Graham	Discovery Drilling...	Oil	Development	LongString	Dave
PRICE REF.	DESCRIPTION				QTY	UM	UNIT PRICE	AMOUNT
575D	Mileage - 1 Way				60	Miles	7.00	420.00
578D-L	Pump Charge - Long String				1	Job	1,400.00	1,400.00
221	Liquid KCL (Clayfix)				2	Gallon(s)	26.00	52.00T
280	Flocheck 21				330	Gallon(s)	3.00	990.00T
290	D-Air				2	Gallon(s)	35.00	70.00T
402-5	5 1/2" Centralizer				3	Each	100.00	300.00T
403-5	5 1/2" Cement Basket				2	Each	300.00	600.00T
404-5	5 1/2" Port Collar				1	Each	2,300.00	2,300.00T
406-5	5 1/2" Latch Down Plug & Baffle				1	Each	260.00	260.00T
407-5	5 1/2" Insert Float Shoe With Auto Fill				1	Each	325.00	325.00T
325	Standard Cement				200	Sacks	13.00	2,600.00T
276	Flocele				50	Lb(s)	1.50	75.00T
283	Salt				1,000	Lb(s)	0.20	200.00T
284	Calseal				9	Sack(s)	30.00	270.00T
285	CFR-1				100	Lb(s)	4.50	450.00T
581D	Service Charge Cement				200	Sacks	1.90	380.00
583D	Drayage				625.5	Ton Miles	1.75	1,094.63
	Subtotal							11,786.63
	Sales Tax Graham County						5.55%	471.31

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KANSAS COMMISSION
FEB 13 2009
OIL & GAS DIVISION
TOPEKA, KS

<p>Thank You For Your Business In 2008! We Look Forward To Serving You In 2009!</p>	<p>Total \$12,257.94</p>
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COPELAND

Acid & Cement

BURRTON, KS (620) 463-5161
 GREAT BEND, KS (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

INVOICE

Paid
 1-25-09
 CK# 4258
 \$ 7179.93
 Worcester SW #1
 DWJ/DD

INVOICE NUMBER:
 C34074-IN

Ken
2/06/09

BILL TO:
 WERTH EXPLORATION
 1308 SCHWALLER AVE.
 HAYS, KS 67601

LEASE: WORCESTER SW #1

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
1/21/2009	C34074		1/16/2009		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
50.00	MI	MILEAGE PICKUP			1.00	50.00
50.00	MI	MILEAGE PUMP TRUCK			3.00	150.00
1.00	EA	PUMP CHARGE			1,000.00	1,000.00
7.00	SAX	CENTRALIZERS			65.00	455.00
2.00	SAX	CEMENT BASKETS			110.00	220.00
375.00	SAX	60-40 POZ MIX 2% GEL			9.05	3,393.75
15.00	SAX	4% ADDITIONAL GEL			14.00	210.00
390.00	EA	BULK CHARGE			1.25	487.50
858.00	MI	BULK TRUCK - TON MILES			1.10	943.80
1.00	EA	10% FUEL SURCHARGE			214.38	214.38
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		7,124.43
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		Sales Tax:		55.50
		NET 30 DAYS		Invoice Total:		7,179.93

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 03 2009
 CONSERVATION DIVISION
 WICHITA, KS

There will be a charge of 1.5% (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service, Inc.

Gressel Oil Field Service, Inc. reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.



FIELD ORDER No C 34074

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 1-16 20 09

IS AUTHORIZED BY: WERTH EXPLORATION TRUST
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease WORCESTER Well No. SW #1A Customer Order No. _____

Sec. Twp. Range 16-7s-22w County GRAHAM State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By [Signature] Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
1030	50	MILEAGE PICKUP	1 ⁰⁰	50 ⁰⁰
1030	50	MILEAGE PUMP TRUCK	3 ⁰⁰	150 ⁰⁰
1031	1	PUMP CHARGE		1000 ⁰⁰
4000	7	CENTRALIZERS	65 ⁰⁰	455 ⁰⁰
4000	2	CEMENT BASKETS		220 ⁰⁰
4000	375	60/40 P02 2% Gel	9 ⁰⁵	3393 ⁷⁵
4000	15	4% ADDITIONAL GEL	14 ⁰⁰	210 ⁰⁰
		Fuel Surcharge		214.38
4200	390	Bulk Charge	1 ²⁵	487 ⁵⁰
4201		Bulk Truck Miles 17.16 TX 50m = 858 TM	1 ¹⁰	943 ⁸⁰
		Process License Fee on _____ Gallons		
		TOTAL BILLING		6910 ⁰⁵

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative A.G. CURTIS

712443

Station 6B

JOHN BECKER
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

*Ken
m
2/16/09*

Acid Stage No.

Date: 1-16-09 District: 6B F. O. No. C 34074
 Company: WEATH EXPLORATION TRUST
 Well Name & No.: WORCESTER SW #1A
 Location: 16-75-22W Field: A
 County: GRAHAM State: KS

Casing: Size: 5 1/2 Type & Wt. Set at ft.
 Formation: Perf. to
 Formation: Perf. to
 Formation: Perf. to
 Liner: Size: Type & Wt. Top at ft. Bottom at ft.
 Cemented: Yes/No Perforated from ft. to ft.
 Tubing: Size & Wt. 2 7/8 Swung at ft.
 Perforated from ft. to ft.
 Open Hole Size: T.D. ft. P.D. to ft.

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
 Bkdown Bbl./Gal.
 Bbl./Gal.
 Bbl./Gal.
 Bbl./Gal.
 Flush Bbl./Gal.
 Treated from ft. to ft. No. ft.
 from ft. to ft. No. ft.
 from ft. to ft. No. ft.
 Actual Volume of Oil/Water to Load Hole: Bbl./Gal.
 Pump Trucks, No. Used: Std. 320 Sp. Twin
 Auxiliary Equipment 135 + 310 BULK
 Packer: Set at ft.
 Auxiliary Tools
 Plugging or Sealing Materials: Type: (Gals.) (Lb.)

Company Representative: John Becker Treater: A.G. CURTIS

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
09:30				ON LOC
				FIND PORT COLLAR @ 7690 *7690
				OPEN PORT COLLAR
				BREAK CIRCULATION w/ S.W.
				MIX CEMENT
				60/40 69 gal 1/4" Flocc (FURNISHED BY CUSTOMER)
				GOOD CIRCULATION THROUGHOUT
				CIRCULATED w/ 375 SKS
				DISPLACE 5 BBL'S
				SHUT IN PORT COLLAR
				PRESSURE TEST OK 750 #
				DROP IN 3 JTS
				REVERSE OUT
12:15				CHECK PORT COLLAR @ 600 #
				FOR 5 MINS. - OK

RECEIVED COMMISSION
 KANSAS CORPORATION
 FEB 11 3 2009
 CONSERVATION DIVISION
 WICHITA KS

Thank You A.G. CURTIS
 JOB Complete