

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

ORIGINAL

Operator: License # 33168  
Name: WOOLSEY OPERATING COMPANY, LLC  
Address: 125 N. Market, Suite 1000  
City/State/Zip: Wichita, Kansas 67202-1775  
Purchaser: n/a  
Operator Contact Person: Dean Pattisson, Operations Manager  
Phone: (316) 267-4379 ext 107  
Contractor: Name: Duke Drilling Co., Inc.  
License: 5929  
Wellsite Geologist: Mikeal K. Maune

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: Rupe Oil Company

Well Name: Clarke 1  
Original Comp. Date: 8/6/90 Original Total Depth: 4350  
 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. D - 28,492

<u>2/11/05</u>	<u>2/18/05</u>	<u>3/14/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-22325-00-02  
County: Barber  
    NW     NE     SW Sec. 8 Twp. 32 S. R. 12  East  West  
2310 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: CLARKE Well #: 1 SWD  
Field Name: Medicine River SW

Producing Formation: n/a  
Elevation: Ground: 1554 Kelly Bushing: 1565  
Total Depth: 5367 Plug Back Total Depth: Open hole (TD is PBSD)  
Amount of Surface Pipe Set and Cemented at 272 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/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan OWWO - AIT I NCR  
(Data must be collected from the Reserve Pit) 1-14-09  
Chloride content 6,000 ppm Fluid volume 1800 bbls  
Dewatering method used Haul off free fluids and allow to dehydrate  
Location of fluid disposal if hauled offsite:  
Operator Name: Oil Producers Inc.  
Lease Name: Leon May 1-13 SWD License No.: 8061  
Quarter \_\_\_\_\_ Sec. 13 Twp. 35 S. R. \_\_\_\_\_  East  West  
County: Barber Docket No.: D 28,472

**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.

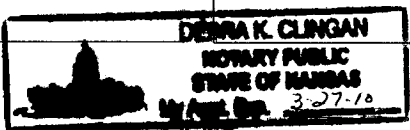
Signature: [Signature]  
Title: Dean Pattisson, Operations Manager Date: 10/01/2007  
Subscribed and sworn to before me this 1st day of October,  
20 07  
Notary Public: [Signature]  
Debra K. Clingan  
Date Commission Expires: 03/27/2010

**KCC Office Use ONLY**

Letter of Confidentiality Attached  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

RECEIVED  
KANSAS CORPORATION COMMISSION

OCT 03 2007



copy to uic

CONSERVATION DIVISION  
WICHITA, KS

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: CLARKE Well #: 1 SWD  
 Sec. 8 Twp. 32 S. R. 12  East  West County: Barber

**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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lansing	3739 - 2174
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mississippian	4308 - 2743
List All E. Logs Run:		Viola	4562 - 2997
Compensated Neutron Density	Sonic Cement Bond	Simpson	4656 - 3091
Dual Induction		Arbuckle	4764 - 3199
Temperature Survey			

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		8-5/8"	24 #/ft	272	already in place	190	
Production	7-7/8"	5-1/2"	15.5 #/ft	4863	Class H	125	10% salt, 10% gyp, 6% Kolsel, .8% FL

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	1516' (port collar)	65/35 poz	200	6% gel, 3% CC, 1/4# /sx floseal
		Class A	50	

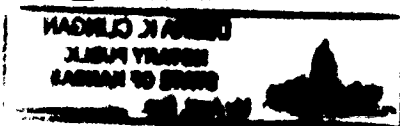
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
	Open hole at 4810 - 5345'	Acid: 5000 gal 20% HCl & MCA	4810-5345'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	4782'	none	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
05/06/2005		<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
	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  Other (Specify) \_\_\_\_\_

Production Interval  Packerless completion \_\_\_\_\_



# ALLIED CEMENTING CO., INC. 20409

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

SERVICE POINT: Med Lodge

DATE <u>3-14-05</u>	SEC <u>8</u>	TWP <u>32s</u>	RANGE <u>12W</u>	CALLED OUT <u>10:00Am</u>	ON LOCATION <u>12:30pm</u>	JOB START <u>12:40pm</u>	JOB FINISH
LEASE <u>Alank</u>	WELL # <u>SWD #1</u>	LOCATION <u>Med Lodge 281+160</u>			COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>3 1/2 W Sinto</u>				

CONTRACTOR \_\_\_\_\_ OWNER Woolsey

TYPE OF JOB Load Annular with Oil

HOLE SIZE 7 7/8 T.D. \_\_\_\_\_

CASING SIZE 5 1/2 DEPTH \_\_\_\_\_

TUBING SIZE 2 3/8 DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH 1

PRES. MAX 250 MINIMUM 100

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT 78 bbls

CEMENT AMOUNT ORDERED \_\_\_\_\_

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

EQUIPMENT

PUMP TRUCK CEMENTER Mark B

# 372 HELPER Darin

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:  
pump 78 bbls of crude oil  
down backhole to find  
hole

MAR 31 2005 TOTAL \_\_\_\_\_

CHARGE TO: Woolsey

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE 750 750.00

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE 4 @ 4.50 18.00

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL 768.00

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

**ANY APPLICABLE TAX  
WILL BE CHARGED  
UPON INVOICING**

PLUG & FLOAT EQUIPMENT

RECEIVED

\_\_\_\_\_ @ ANSAS CORPORATION COMMISSION

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ **OCT 03 2007**

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ CONSERVATION DIVISION  
WICHITA, KS

TOTAL \_\_\_\_\_

TAX \_\_\_\_\_

SIGNATURE Don T. Petterson x Don T. Petterson PRINTED NAME

*Thank you Don!*