

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 # 4871
Name: Curt's Oil Operations
Address 1: P. O. Box 8
Address 2: _____
City: Great Bend State: Ks Zip: 67530 + _____
Contact Person: Curtis Hitschmann
Phone: (620) 793-2540
CONTRACTOR: License # 4598
Name: Mallard JV Inc
Wellsite Geologist: Robert Schreiber
Purchaser: NCRA

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.: _____
2-25-09 3-2-09 3-16-09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-25312-0000
Spot Description: _____
NW 52 SW NW Sec. 5 Twp. 17 S. R. 12 East West
2970 Feet from North / South Line of Section
750 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: Kathy Well #: 1
Field Name: Wildcat
Producing Formation: Arbuckle
Elevation: Ground: 1929 Kelly Bushing: 1939
Total Depth: 3422 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 408 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/ _____

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

API-15-10/16/09

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: Curtis Hitschmann
Title: Operator Date: 9-15-09
Subscribed and sworn to before me this 15th day of September
20 09
Notary Public: Linda Pearson
Date Commission Expires: 7-20-12

KCC Office Use ONLY

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

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Operator Name: Curt's Oil Operations Lease Name: Kathy Well #: 1
 Sec. 5 Twp. 17 S. R. 12 East West County: Barton

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 (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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Dual Compensated Porosity Log, Microresistivity, Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 pipe	12-1/4	8-5/8	23#	408	common	190	2% gel-3%gs
Production	7-7/8	5-1/2	14-1/2	3417	EA-2	170	

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
0	Open hole 3417-3422 ft		

TUBING RECORD: Size: <u>2-7/8</u> Set At: <u>3415</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>03-23-09</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>20.07</u>	Gas Mcf _____ Water Bbls. <u>0</u> Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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: <u>3417-3422</u>
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QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
 Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 2043

Date	2-26-09	Sec.	5	Twp.	17	Range	12	Called Out		On Location		Job Start		Finish	3:30 AM
Lease	KATHY	Well No.	1			Location	Beaver - 1W-255.			Barton County	State	KS.			
Contractor	MAURD				Owner	E. INTO									
Type Job	8 5/8" S.P.				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.										
Hole Size					T.D.	409									
Csg.	8 5/8" x 23"				Depth	408									
Tbg. Size					Depth										
Drill Pipe					Depth										
Tool					Depth										
Cement Left in Csg.	15'				Shoe Joint	15'									
Press Max.					Minimum										
Meas Line					Displace	25 Bbl.									
Perf.					CEMENT										
EQUIPMENT					Amount Ordered	190 sk. Common 2% GEL 3% C.C.									
Pumptrk	5	No.	Cementor	Helper	TODD										
Bulktrk	3	No.	Driver	Driver	JOE										
Bulktrk	PU	No.	Driver	Driver	BOBBY										
JOB SERVICES & REMARKS					Consisting of	2% GEL & 3% C.C.									
					Common	190 @ 10 ⁰⁰									
					Poz. Mix										
					Gel.	3 @ 48 ⁰⁰	17,00	51,00							
					Chloride	6 @ 45 ⁰⁰	10,00	240,00							
					Hulls										
					Salt										
					Flowseal										
Pumptrk Charge 8 5/8 S.P.					400 ⁰⁰										
Mileage 24 @ 6 ⁰⁰					144 ⁰⁰										
Footage															
Total															
Remarks:															
Mix & Pump 190 sks. Common 2% GEL															
3% C.C. down csg.															
Release Plug															
Disp. Total 25 Bbl.															
Circulation thru Job															
Circulated Cement to Pit															
Thanks, Bobby - Todd Joe															
Please Call Again															
X Signature: <i>Frank Maurd</i>															
					Sales Tax										
					Handling	20 @ 199 @ 2 ⁰⁰	179	348,25							
					Mileage	8 @ per sk per mile	250	300 ⁰⁰							
					Sub Total										
					Total										
					Floating Equipment & Plugs	1-3 1/2" Warden Plug N/A									
					Squeeze Manifold										
					Rotating Head	RECEIVED									
					SEP 16 2009										
					KCC WICHITA										
					Tax										
					Discount										
					Total Charge										



CHARGE TO: *Carmen Schmitt*

ADDRESS:

CITY, STATE, ZIP CODE:

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TICKET
No 15839

PAGE 1 OF 2

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SERVICE LOCATIONS 1. <i>Hays, Ks.</i> 2. <i>Ness City, Ks.</i>	WELL/PROJECT NO. #1	LEASE <i>Kathy</i>	COUNTY/PARISH <i>Barton</i>	STATE <i>Ks</i>	CITY	DATE <i>3-2-09</i>	OWNER <i>same</i>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Mallard Drlg.</i>	RIG NAME/NO.	SHIPPED VIA <i>OT</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
	WELL TYPE <i>oil</i>	WELL CATEGORY <i>development</i>	JOB PURPOSE <i>Cement longstring</i>	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #111	80	mi			5.00	400.00
578		1			Pump Charge (Longstring)	1	ea	3422'		1400.00	1400.00
221		1			KCC Liquid	7	gal			25.00	175.00
281		1			Mud Flush	500	gal			1.00	500.00
402		1			Centralizers	10	ea	5 1/2"		55.00	550.00
403		1			Baskets	2	ea			180.00	360.00
405		1			Formation Pkr Shoe	1	ea			1250.00	1250.00
406		1			L.D. Plug & Baffle	1	ea			225.00	225.00
290		1			D-Air	2	gal			35.00	70.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *Carmen Schmitt*
DATE SIGNED *3-2-09* TIME SIGNED *1025* A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY		AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL 1	4930.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					page 2	4229.00
WE UNDERSTOOD AND MET YOUR NEEDS?					subtotal	9159.00
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					Barton TAX 6.3%	392.18
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					TOTAL	9551.18
ARE YOU SATISFIED WITH OUR SERVICE?		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: *Nick Koeber* APPROVAL: *Carmen Schmitt*

Thank You!



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 15839

CUSTOMER: *Carmen Schmitt* WELL #1 *Kathy* DATE: *3-2-09* PAGE *2* OF *2*

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			DESCRIPTION	UNITS				PRICE			
		ORG	UM	QTY		ORG	UM	QTY	PRICE	TOTAL			
<i>325</i>		<i>2</i>			<i>Standard Cement</i>	<i>200</i>	<i>sk</i>			<i>11</i>	<i>00</i>	<i>2200</i>	<i>00</i>
<i>276</i>		<i>2</i>			<i>Flocelz</i>	<i>50</i>	<i>#</i>			<i>1</i>	<i>50</i>	<i>75</i>	<i>00</i>
<i>283</i>		<i>2</i>			<i>Salt</i>	<i>1000</i>	<i>#</i>			<i>15</i>		<i>150</i>	<i>00</i>
<i>284</i>		<i>2</i>			<i>Calseal</i>	<i>9</i>	<i>sk</i>			<i>30</i>	<i>00</i>	<i>270</i>	<i>00</i>
<i>285</i>		<i>2</i>			<i>CFR-1</i>	<i>100</i>	<i>#</i>			<i>4</i>	<i>00</i>	<i>400</i>	<i>00</i>
<i>581</i>		<i>2</i>			SERVICE CHARGE								
<i>583</i>		<i>2</i>			MILEAGE CHARGE								
					TOTAL WEIGHT	<i>200</i>	<i>sk</i>						
					LOADED MILES	<i>80</i>							
					CUBIC FEET					<i>1</i>	<i>50</i>	<i>300</i>	<i>00</i>
					TON MILES					<i>1</i>	<i>00</i>	<i>834</i>	<i>00</i>

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CONTINUATION TOTAL *4229* 00

JOB LOG

SWIFT Services, Inc.

DATE 3-2-09 PAGE NO.

CUSTOMER *Carmen Schmitt* WELL NO. *#1* LEASE *Kathy* JOB TYPE *Cement Longstring* TICKET NO. *15839*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1750							on loc start FE
								RTD 3422' LTD 3420' 5 1/2" x 14" x 3422' x 18' Cents 1, 3, 5, 7 , 9, 10, 12, 14, 16, 18 Baskets 2, 11
	1840							Start FE
	2000					1100		Break Circ & set PKR Shoe
	2125	2.5	7/0					Plug RH + 30/20 sks EA-2
	2130	4	0			250		Start Mud Flush
	2138	4	12/0			250		Start KCL flush
	2138	5.5	20/0			400		Start Cement 170sks EA-2
	2146		40					End Cement Wash P&L Drop L.D. Plug
	2152	6.5	0			200		Start Displacement
	2101	5	56			300		Catch Cement
	2107		83			150/1500		Land Plug Release Pressure Float Held

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Thank you
Nick, Josh F. & Rob