

ORIGINAL

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

* OK to accept hand written form as an exception per Steve

Operator: License # 33519
Name: Alvin G. Yoder's DBA Yoder Oil
Address: 18742 W 1300 Rd Weldo, Kans 66091
City/State/Zip: Weldo Ks. 66091
Purchaser: _____
Operator Contact Person: Glen Yoder
Phone: (285) 489-2375
Contractor: Name: B+B Cooperative Ventures
License: 31280
Wellsite Geologist: _____

API No. 15 - 003-24483-0000
County: Anderson
NE NE Sec. 2 Twp. 21 S. R. 19 East West
5205 feet from N (circle one) Line of Section
185 feet from W (circle one) Line of Section

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW Disposal
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: West Benjamin Well #: 10
Field Name: Barnett Shoestring
Producing Formation: Mississippian
Elevation: Ground: 1045 Kelly Bushing: _____
Total Depth: 1324 Plug Back Total Depth: 1310
Amount of Surface Pipe Set and Cemented at 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 22
feet depth to Surface w/ 8 sx cmt.

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. _____

Drilling Fluid Management Plan AH-II NCR 1-8-09
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

7-9-08 7-15-08 7-16-08
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Yoder Oil Date: 10-1-08
Subscribed and sworn to before me this 1st day of October
2008
Notary Public: Dena McDaniel
Date: Commission Expires: 04-26-2009

Notary Public: State of Kansas
My appt expires: 04-26-2009
Dena McDaniel

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution 10/7
RECEIVED
KANSAS CORPORATION COMMISSION
OCT 06 2008
CONSERVATION DIVISION

ORIGINAL

Side Two

Operator Name: Allen Under Lease Name: West Benjamin Well #: 10
Sec. 2 Twp. 21 S. R. 19 East West County: Anderson

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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy)

List All E. Logs Run: rec'd: GR/NEUT./CCL LOG

Handwritten initials and date: 10/06/08

Log Formation (Top), Depth and Datum Sample
Name Top Datum

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	# Sacs Used	Type and Percent Additives
Salt Water Disposal	10 7/8	7"	23*	22	Portland A	8	199 Calcium
	6"	2 7/8	LS EYE 8 RD 45 lb / 310		50/50 POZ mix	230	495# Premium Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		
4	1272 to 1282	41 perfor			
	1290 to 1300	41 perfor			

TUBING RECORD Size 2 7/8 Set At 1310 Packer At _____ Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr. _____ Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify)

UNCONSOLIDATED OIL WELL SERVICES, ~~LLC~~ **LLC**

O. BOX 884, CHANUTE, KS 66720

0-431-9210 OR 800-467-8676

Received on Jul. 18, 2008 1:02PM No. 4811

TICKET NUMBER **16194**

LOCATION **Ottawa KS**

FOREMAN **Fred Mader**

**TREATMENT REPORT & FIELD TICKET
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/16/08	9414	W. Benjamin # 10.	2	21	19	AV
CUSTOMER Glen Yoder						
BILLING ADDRESS 18742 W. 1300 Rd						
STATE Welda KS		ZIP CODE 66091				

TRUCK #	DRIVER	TRUCK #	DRIVER
506	Fred		
495	Bret		
226	Chuck		
505/706	Ken		

B TYPE **Logging** HOLE SIZE **6"** HOLE DEPTH **1320'** CASING SIZE & WEIGHT **2 3/4" EUE**
 SING DEPTH **9310'** DRILL PIPE _____ TUBING _____ OTHER _____
 CARRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING **2 1/2 Plug**
 PLACEMENT **7.6 BBL** DISPLACEMENT PSI _____ MIX PSI _____ RATE **4 BPM**

MARKS: **Chuck casing depth w/ wireline. Mix + Pump 150 # Premium Gel Flush. Mix + Pump 235 SK. 50/50 For Mix Cement w/ 2 3/4 Gel. Cement to Surface. Flush pump + Lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 7.6 BBLs Fresh water. Pressure to 750# PSI. Release pressure to Set float valve.**

Fred Mader

Winn Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	495	925 ⁰⁰
5406	25 mi	MILEAGE Pump Truck	495	91 ²⁵
5407	Minimum	Tan Mileage	226	315 ⁰⁰
5501C	2 Hrs	Transport 505/706		224 ⁰⁰
1124	230 SKS	50/50 For Mix Cement		2242 ⁵⁰
1118B	495 #	Premium Gel		841 ⁵⁰
4402	1	2 1/2" Rubber Plug		23 ⁰⁰
Sub Total				3904 ⁹⁰
Tax @ 6.3%				
RECEIVED KANSAS CORPORATION COMMISSION OCT 06 2008 CONSERVATION DIVISION WICHITA, KS				
SALES TAX				159.77
ESTIMATED TOTAL				4064.67

L.O. A. Jr

2231084