

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 # 33629

Name: Great Plains Energy, Inc.

Address 1: PO Box 292

Address 2: 429 N. Linden

City: Wahoo State: NE Zip: 69066 + _____

Contact Person: Dan Blankenau

Phone: (402) 277-5336

CONTRACTOR: License # 33575

Name: WW Drilling, LLC

Wellsite Geologist: Richard Bell

Purchaser: None

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.: _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
<u>5/12/09</u>	<u>5/17/09</u>	<u>5/18/09</u>

API No. 15 - 039-21095-00-00

Spot Description: _____

SW _SW _NE _NW Sec. 35 Twp. 4 S. R. 30 East West

1270 Feet from North / South Line of Section

1616 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Decatur

Lease Name: Sauvage Family Well #: 2

Field Name: Swede Hollow

Producing Formation: None

Elevation: Ground: 2855' Kelly Bushing: 2860'

Total Depth: 4220 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 264 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 P+A AH I NR
(Data must be collected from the Reserve Pit) 10-5-09

Chloride content: 1800 ppm Fluid volume: 1100 bbls

Dewatering method used: Air dried then back filled.

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: [Signature]

Title: President Date: 9/24/09

Subscribed and sworn to before me this 24th day of September

2009

Notary Public: Patricia K. Styskal

Date Commission Expires: 1-21-2010

GENERAL NOTARY - State of Nebraska
PATRICIA K. STYSKAL
My Comm. Exp. Jan. 21, 2010

KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

SEP 28 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Great Plains Energy, Inc. Lease Name: Sauvage Family Well #: 2
 Sec. 35 Twp. 4 S. R. 30 East West County: Decatur

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: CD/NL, DIL, Micro, Frac Finder	<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>2629</td> <td>+231</td> </tr> <tr> <td>Base</td> <td>2662</td> <td>+198</td> </tr> <tr> <td>Topeka</td> <td>3740</td> <td>-880</td> </tr> <tr> <td>Heebner</td> <td>3906</td> <td>-1046</td> </tr> <tr> <td>Toronto</td> <td>3940</td> <td>-1080</td> </tr> <tr> <td>Lansing</td> <td>3955</td> <td>-1095</td> </tr> <tr> <td>BKC</td> <td>4167</td> <td>-1307</td> </tr> </table>	Name	Top	Datum	Anhydrite	2629	+231	Base	2662	+198	Topeka	3740	-880	Heebner	3906	-1046	Toronto	3940	-1080	Lansing	3955	-1095	BKC	4167	-1307
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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"	23#	264'	Common	185	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
		RECEIVED KANSAS CORPORATION COMMISSION	
		SEP 28 2009	
		CONSERVATION DIVISION WICHITA, KS	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method: <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

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: None, P&A
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REMIT TO
RR 1 BOX 90 D
HOXIE KS 67740

SCHIPPERS OIL FIELD SERVICE L.L.C.

357

9:00 p.m. 9:30 p.m. 12:45 a.m.

DATE 5/17 SEC. 35	RANGE/TWP. 45 th 30 W	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE Savage Family			WELL # 2		
			COUNTY OK	STATE KS	

CONTRACTOR	W W W	OWNER	Great Plains		
TYPE OF JOB	Rotary Plug				
HOLE SIZE	7 7/8	T.D.			
CASING SIZE		DEPTH	AMOUNT ORDERED	220	
TUBING SIZE		DEPTH			
DRILL PIPE		DEPTH			
TOOL		DEPTH			
PRES. MAX		MINIMUM	COMMON	132	@ 14 ⁰⁰ 1914
DISPLACEMENT		SHOE JOINT	POZMIX	28	@ 8 ⁰⁰ 704
CEMENT LEFT IN CSG.			GEL	8	@ 26 ⁰⁰ 208
PERFS			CHLORIDE		@
			ASC		@
EQUIPMENT					@
			1/4 Flo-seal per sk		@
PUMP TRUCK				55	@ 23 ⁵⁰ 1272 ⁵⁰
#					@
BULK TRUCK					@
#					@
BULK TRUCK					@
#					@
			HANDLING	270	@ 19 ⁵⁰ 429
			MILEAGE	77	@ 19 ⁰⁰ 534 ⁰⁰
					TOTAL

REMARKS	SERVICE	Rotary Plug		
1st 25 sks @ 2642	DEPT OF JOB		@	1350 ⁰⁰
2nd 100 sks @ 1935	PUMP TRUCK CHARGE		@	
3rd 40 sks @ 313	EXTRA FOOTAGE		@	
10 sks @ 40	MILEAGE	77	@ 6 ⁵⁰	175 ⁵⁰
30 sks - rat hole	MANIFOLD		@	
15 sks - mouse hole			@	
				TOTAL

CHARGE TO:	Great Plains
STREET	STATE
CITY	ZIP

To: Schippers Oil Field Service LLC

You are hereby requested to rent cementing equipment and furnish staff 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.

PLUG & FLOAT EQUIPMENT	
8 5/8 Wooder 600	@ 69
	@
	@
	@
	@
	TOTAL
TAX	
TOTAL CHARGE	
DISCOUNT (IF PAID IN 20 DAYS)	

SIGNATURE *Londie Lang*

PRINTED NAME Londie Lang

