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 # 5983	API No. 15 - 207-27467 -000				
Name: Victor J. Leis	Spot Description:				
Address 1: Box 223	SE_SW_NW_NE_Sec. 20 Twp. 24 S. R. 16 FEast West				
Address 2:	1200 Feet from 🕢 North / 🗌 South Line of Section				
City: Yates Center State: KS Zip: 66783 +					
Contact Person: Ryan M. Leis	Footages Calculated from Nearest Outside Section Corner:				
Phone: (785) 313-2567 RECEIVED	ZINE INW ISE ISW				
CONTRACTOR: License # 32079	County: Woodson				
Name: John E. Leis SEP 3 0 2009	Lease Name: Stockebrand Well #: 13				
Wellsite Geologist: n/a	Field Name: Vernon				
Purchaser: Pacer Energy Marketing KCC WICHITA	Producing Formation: Squirrel				
Designate Type of Completion:	Elevation: Ground: 1084 Kelly Bushing: n/a				
New Well Re-Entry Workover	Total Depth: 1060' Plug Back Total Depth: n/a				
✓ oilslow	Amount of Surface Pipe Set and Cemented at: 40° Feet				
Gas ENHR SIGW	Multiple Stage Cementing Collar Used? Yes No				
CM (Coal Bed Methane) Temp. Abd.	If yes, show depth set: N/a Feet				
Dry Other	If Alternate II completion, cement circulated from: 1060				
(Core, WSW, Expl., Cathodic, etc.)	feet depth to: surface w/ 133 sx cmt.				
If Workover/Re-entry: Old Well Info as follows: Operator:					
	Drilling Fluid Management Plan AH II NUL 10-8-09 (Data must be collected from the Reserve Pil)				
Well Name:	Chloride content: Na ppm Fluid volume: bbls				
Original Comp. Date: Original Total Depth: Deepening Re-perf Conv. to SWD	1				
Plug Back:Plug Back Total Depth	Dewatering method used:				
Commingled Docket No.:	Location of fluid disposal if hauled offsite:				
Dual Completion Docket No.:	Operator Name: n/a				
Other (SWD or Entr.?) Docket No.:	Lease Name: License No.:				
01/06/2009 1/8/2009 1/16/2009	Quarter Sec TwpS. R				
Spud Date or Date Reached TD Completion Date or Recompletion Date Completion Date Recompletion Date	County: Docket No.:				
Kansas 67202, within 120 days of the spud date, recompletion, workover or of side two of this form will be held confidential for a period of 12 months if re	the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information quested in writing and submitted with the form (see rule 82-3-107 for confidence of report shall be attached with this form. ALL CEMENTING TICKETS MUST orm with all temporarily abandoned wells.				
All requirements of the statutes, rules and regulations promulgated to regulate are complete and correct to the best of my knowledge.	the oil and gas industry have been fully complied with and the statements herein				
Signature: 1	KCC Office Use ONLY				
Title: Agent Date:	N				
Subscribed and sworn to before me this 10th day of September	Letter of Confidentiality Received / If Denied, Yes Date:				
20 09.	V Wireline Log Received				
() a Dill (da) but	Geologist Report Received				
Notary Public: August 4. May	UIC Distribution				
Date Commission Expires: /0-/8-2012	NI TO THE TOTAL PARTY OF THE TOT				

A. JUDITH A. SMITH

Notary Public - State of Kansas

My Appt. Expires 10 - 18 - 2012

Side Two

Well #:				
al tested, iture, fluid ine Logs				
nple				
um				
SEP : a				
KCC WICHITA				
Percent				
n/a				
n/a				
······································				
and Percent Additives				
Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth				
94'				
,				
Gravity 26.5				
-				



LOCATION Other KS
FOREMAN Fred Made

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT CEMENT

DATE	CUSTOMER#	WELL	NAME & NUME		SECTION	TOWNSHIP	RANGE	COUNTY
1/2/09	<i>5</i> 353	Stockeb	Yand	43	20	24	16	wo
CUSTOMER .	. 1	oil Co			TOUCK	DRIVER	TRUCK#	DRIVER
MAILING ADDRE		0, 1 45	·		TRUCK#	Fred	510	Gerid
	^ *				<u>506</u> 495	Casey	3/6	Geria
CITY	Box 10	STATE .	ZIP CODE		370	Ken		
m		OK	74354		237	Arlen		
JOB TYPE	oly)es		598	HOLE DEPTH		CASING SIZE & W	EIGHT 2	/D/RH
CASING DEPTH	~ ~	DRILL PIPE	<u> </u>	TUBING			OTHER	
SLURRY WEIGH		SLURRY VOL		WATER gal/s	k	CEMENT LEFT in	CASING 2/2	Plug
DISPLACEMENT		DISPLACEMENT	P\$I	MIX PSI		RATE SBPY		<i>O</i>
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CODE	QUARITY	or UNITS	<i>Uc</i>	SCRIP ITON O	SERVICES or PR		UNIT PRICE	TOTAL
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AUTHORIZTION	1/5- M	1. Jus			000	75	DATE	