

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3830
 Name: AX&P, Inc.
 Address: P.O. Box 1176
Independence, KS 67301
 City/State/Zip: _____
 Purchaser: Pacer
 Operator Contact Person: J.J. Hanke
 Phone: (620) 325-5212
 Contractor: Name: Patrick Tubbs
 License: 33079
 Wellsite Geologist: J J Hanke
 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: _____
 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. _____

<u>5/09/09</u>	<u>5/22/09</u>	<u>6/30/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-27766-00-00
 County: Wilson
S2-nE SW Sec. 29 Twp. 30 S. R. 16 East West
1520 feet from N (circle one) Line of Section
3300 feet from W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name Unit 1-Wolfe West Well #: WW#31G
 Field Name: Neodesha
 Producing Formation: Neodesha Sand
 Elevation: Ground: 785' Kelly Bushing: _____
 Total Depth: 830' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 35 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 828'
 feet depth to surface w/ 100 ^{sq ft} Alt 2-Dlg - 10/19/09

Drilling Fluid Management Plan
 (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.: _____

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.

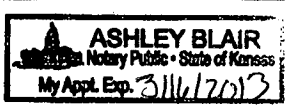
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
 Title: [Signature] Date: 10/13/09
 Subscribed and sworn to before me this 13 day of October
 2009.
 Notary Public: Ashley Blair
 Date Commission Expires: 3/16/2013

KCC Office Use ONLY

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

RECEIVED
OCT 15 2009



KCC WICHITA

Operator Name: AX&P, Inc. Lease Name: Unit 1 - Wolfe West Well #: WW#31G

Sec. 29 Twp. 30 S. R. 16 East West County: Wilson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> 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 <i>(Submit Copy)</i> List All E. Logs Run: <p style="text-align: center;">Gamma Ray - Neutron</p>	<input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample Formation (Top), Depth and Datum <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>Oswego</td> <td>600'</td> <td></td> </tr> <tr> <td>Sand</td> <td>790'</td> <td></td> </tr> </table>	Name	Top	Datum	Oswego	600'		Sand	790'	
Name	Top	Datum								
Oswego	600'									
Sand	790'									

CASING RECORD <input 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	11"	6 5/8"		35'	Portl.	8	none
Production	5 1/8"	2 7/8"	6.5	828'	Portl	100	2% Gel/ 1% Cal

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
1	Neodesha Sand	291-801	Acid / gel frac	791'

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TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
		none		

Date of First, Resumerd Production, SWD or Enhr. 7/7/09	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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	6	neg1	30		37

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Production Interval Open Hole Perf. Dually Comp. Commingled Other (Specify) _____



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 21189
LOCATION Eureka
FOREMAN Steve Mead

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-22-09	1124	Wolf Crest Unit 1 #31G	29	30	16E	Wilson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Axp			485	Alan		
MAILING ADDRESS			479	Justin		
P.O. Box 1176						
CITY		STATE	ZIP CODE			
Independence		KS	67301			

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 830' CASING SIZE & WEIGHT 2 3/4
 CASING DEPTH 828' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.6[#] SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 5 bbls DISPLACEMENT PSI 500[#] MIX PSI Bump plug 700[#] RATE _____

REMARKS: Safety Meeting: Rig up to 2 3/4 Tubing Break Circulation with Fresh water. Mix 50[#] Gel Flush. 5 bbls water spacer. Mix 100 sks Class A cement w/ 1% CaCl₂, 2% Gel. Shut down Wash pump & lines. Stuff 2 plugs. Displace with 5 bbls Fresh water AT 1/2 bbl per min Rate. Final Pumping Pressure 500[#] Bump Plug AT 700[#]. Shut well in with 700[#] Good Cement Returns to surface.
Job Complete Rig Down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5461	1	PUMP CHARGE	870.00	870.00
5406	60	MILEAGE	3.45	207.00
11045	100 SKS	Class A Cement	12.70	1270.00
1102	100 [#]	CaCl ₂ 1%	.71	71.00
1118A	200 [#]	Gel 2%	1.66	332.00
5407A	4.2 Tons	10 miles Ton Miles Bulk Truck	1.16	327.12
4202	2	2 3/4 Tap Rubber Plug	22.00	44.00
			RECEIVED	
			OCT 15 2009	
			KCC WICHITA	
			Sub Total	2821.12
			SALES TAX	89.87
			ESTIMATED TOTAL	2910.99

Ravin 3737

009139

AUTHORIZATION Called by JS

TITLE Owner

DATE _____