

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 # 32079
 Name: John E. Leis
 Address 1: 111 E. Mary
 Address 2: _____
 City: Yates Center State: KS Zip: 66783 + _____
 Contact Person: John Leis
 Phone: (620) 625-3676
 CONTRACTOR: License # 32079
 Name: John Leis- Company Tools
 Wellsite Geologist: _____
 Purchaser: Plains Marketing, LP
 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.: _____

<u>03/11/2008</u>	<u>03/14/2008</u>	<u>03/21/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-27362 -0000
 Spot Description: _____
NE SW SW SW Sec. 7 Twp. 24 S. R. 16 East West
400 Feet from North / South Line of Section
425 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Woodson
 Lease Name: Davidson Well #: 11
 Field Name: Vernon
 Producing Formation: Squirrel
 Elevation: Ground: 1078 Kelly Bushing: 1081
 Total Depth: 1101 Plug Back Total Depth: 1097
 Amount of Surface Pipe Set and Cemented at: 42 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: _____ Feet
 If Alternate II completion, cement circulated from: 42
 feet depth to: 0 w/ 8 ^{sx cm}
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content: NA ppm Fluid volume: 400 bbls
 Dewatering method used: allow to dry
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

AITZ-Dlg - 10/28/09

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: John E. Leis
 Title: Owner Date: Oct 22, 09
 Subscribed and sworn to before me this 22nd day of October,
20 09.
 Notary Public: Amber Morrison
 Date Commission Expires: 9-4-2012

AMBER MORRISON
 Notary Public - State of Kansas
 My Appt. Expires 9-4-2012

KCC Office Use ONLY

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

RECEIVED
OCT 22 2009

KCC WICHITA

Operator Name: John E. Leis Lease Name: Davidson Well #: 11
 Sec. 7 Twp. 24 S. R. 16 East West County: Woodson

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:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum see attached log <div style="text-align: center; font-size: 1.2em; font-weight: bold;"> RECEIVED OCT 22 2009 KCC WICHITA </div>
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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	10"	7"	23 lb/ft	42'	Portland	8	
Longstring	5 5/8"	2 7/8"	8 lb/ft	1097'	Pozmix 60-40	160	275# 2% gel 100# gel flush

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
2	Perforated from 1057-1067 with 21 shots	75 gal 15% acid	1057-1067
		6700 lbs of 12-20 Sand	1057-1067
		300 lbs of 20/40 Sand	1057-1067

TUBING RECORD: NA	Size: NA	Set At: NA	Packer At: NA	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 03/26/08	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. trace	Gas Mcf NA	Water Bbls. 25 bls	Gas-Oil Ratio	Gravity 26

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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MC ID # 165290
 Shop # 620 437-2661
 Cellular # 620 437-7582
 Office # 316 685-5908
 Office Fax # 316-685-5926
 Shop Address: 3613A Y Road
 Madison, KS 66860

Hurricane Services, Inc.
P.O. Box 782228
Wichita, KS 67278-2228

Cement, Acid or Tools
Service Ticket
02328

DATE 3-21-08

COUNTY Wichita CITY _____

CHARGE TO John Feis

ADDRESS _____ CITY Water Center ST Ks ZIP _____

LEASE & WELL NO. Donaldson # 17 CONTRACTOR C.D. Tools

KIND OF JOB Lease Tr. eq SEC. _____ TWP. _____ RNG. _____

DIR. TO LOC. _____ OLD NEW

Quantity	MATERIAL USED	Serv. Charge	
			700.00
160 SK	60/40 Pro mix cement		1392.00
275 lbs	Gel 27		55.00
100 lb	Gel Flush		20.00
2 1/2 Hrs	Water Truck "		187.50
3 Hrs	Water Truck " 193		225.00
6.9 Trk	BULK TRK. MILES		265.65
35	PUMP TRK. MILES		105.00
1	PLUGS 2 3/4 Top Rubber		15.00
		SALES TAX	93.37
		TOTAL	3058.52

Paid
 check # 1123
 Amount 3058.52

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T.D. 1100'

SIZE HOLE 5 1/2"

MAX. PRESS. _____

PLUG DEPTH _____

PLUG USED 1 7/8" Rubber

CSG. SET AT _____ VOLUME _____

TBG SET AT 1095' VOLUME 6.31 Bbls

SIZE PIPE 2 1/2" 7 1/2"

PKER DEPTH _____

TIME FINISHED _____

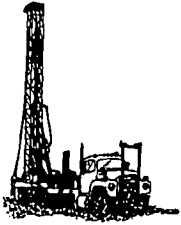
REMARKS: Regrout 27 tubing, Break circulation w/ 10 Bbls water, Pumped 5 RM Gel Flush, Followed w/ 25 Bbls water to condition hole. Mixed 1/2 lb Gel later poured cement w/ 27 Gel, shut down work. Pumped Plug - Displaced Plug w/ 6 1/2 Bbls water. Final Pumping = 500 PWT Pumped Plug. 1100 PWT Close Tubing w/ 1100 PWT. Grand cement returns to surface w/ 6 1/2 RM slurry

"Thank You"

EQUIPMENT USED

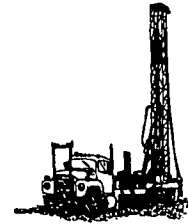
NAME Kelly, K. L. I. UNIT NO. 185
Beard Butler
 HSI REP.

NAME Prova "91, Roby "193, Feis "97
Wichita, Matt
 OWNER'S REP.



LEIS OIL SERVICES

111 East Mary • Yates Center, Kansas 66783 • (620) 625-3676



To whom it may concern:

We made a mistake when submitting ACO-1. We submitted an ACO-1 for Davidson #12, which was never drilled, in mistake for Davidson #11.

Here is the Davidson #11 paper work. You should have the cement tickets already. Davidson #12 was never drilled.

Also, we failed to send cement tickets with Davidson #16 and Davidson #18. They are also enclosed.

Sorry for the inconvenience.

RECEIVED

OCT 22 2009

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Thanks,

Matt Leis

7-245-16E

15-207-27359-0000

3/11/08