

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 9394
Name: D-Oil, Inc.
Address 1: P.O. Box 259
Address 2: _____
City: Victoria State: Ks. Zip: 67671 + _____
Contact Person: John M. Dreiling
Phone: (785) 735-9225
CONTRACTOR: License # 6426
Name: Express Well Service & Supply
Wellsite Geologist: Randall Kilian
Purchaser: NCRA

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 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.: _____
8-21-2009 8-25-2009 9-25-2009
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 051-25870-0000
Spot Description: _____
SE SW W2 NE NW Sec. 20 Twp. 13 S. R. 17 East West
1030 Feet from North / South Line of Section
1690 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis

Lease Name: Younger B Well #: 6
Field Name: Sugarloaf
Producing Formation: LKC, Arb.
Elevation: Ground: 2089 Kelly Bushing: 2094
Total Depth: 3623' Plug Back Total Depth: 3607'
Amount of Surface Pipe Set and Cemented at: 221 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1309 Feet
If Alternate II completion, cement circulated from: 1309
feet depth to: surface w/ 175 SMD sx cmt.

Drilling Fluid Management Plan Ait II NR 11-5-09
(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.: _____

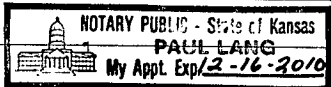
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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 M. Dreiling
Title: Gen. Mgr. Date: 10-29-2009

Subscribed and sworn to before me this 29th day of OCTOBER,
2009.

Notary Public: Paul Lang
Date Commission Expires: _____



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

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Operator Name: D-Oil, Inc. Lease Name: Younger B Well #: 6
 Sec. 20 Twp. 13 S. R. 17 East West County: Ellis

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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: <i>RECD ADDI W/1 LOG: RADIATION GUARD LOG</i>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>1303</td> <td></td> </tr> <tr> <td>Topeka</td> <td>3064</td> <td></td> </tr> <tr> <td>Heebner</td> <td>3311</td> <td></td> </tr> <tr> <td>Toronto</td> <td>3330</td> <td></td> </tr> <tr> <td>Lansing</td> <td>3354</td> <td></td> </tr> <tr> <td>Base KC</td> <td>3589</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td>3608</td> <td></td> </tr> </table>	Name	Top	Datum	Anhydrite	1303		Topeka	3064		Heebner	3311		Toronto	3330		Lansing	3354		Base KC	3589		Arbuckle	3608	
Name	Top	Datum																							
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*PLU
in
09/30/09*

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	12 1/4	8 5/8	23	221'	Common	150	3%gel, 5%cc
Production	7 7/8	5 1/2	14	3607'	EA-2	150	

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
	6 laterals @ 3617'	1500 gal. 71/2% acid	

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>3620'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First. Resumed Production, SWD or Enhr. <u>9-30-2009</u>		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. <u>18 bopd</u>	Gas Mcf	Water Bbls. <u>0 bwpd</u> Gas-Oil Ratio Gravity <u>29</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>Arbuckle</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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ALLIED CEMENTING CO., LLC. 037546

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <i>8-21-09</i>	SEC <i>20</i>	TWP. <i>13</i>	RANGE <i>17</i>	CALLED OUT	ON LOCATION	JOB START <i>5:00</i>	JOB FINISH <i>5:30 PM</i>
LEASE <i>Younger</i> WELL # <i>B-6</i>		LOCATION <i>HAY'S TOLON 4N</i>				COUNTY <i>Ellis</i>	STATE <i>KANSAS</i>
OLD OR NEW (Circle one)				<i>1/2 E 1/2 S 1/4</i>			

CONTRACTOR *W & W DRUG Right*

TYPE OF JOB *SURFACE*

HOLE SIZE *12 1/4* T.D. *221'*

CASING SIZE *8 5/8 New* DEPTH *221'*

TUBING SIZE *20 #* DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. *15'*

PERFS.

DISPLACEMENT *13 1/4 / BBL*

OWNER

CEMENT

AMOUNT ORDERED *150 SX 60/40*

29 GEL

39 cc

COMMON	<i>90</i>	@	<i>13.50</i>	<i>1215.00</i>
POZMIX	<i>60</i>	@	<i>7.55</i>	<i>453.00</i>
GEL	<i>3</i>	@	<i>20.25</i>	<i>60.75</i>
CHLORIDE	<i>5</i>	@	<i>51.50</i>	<i>257.50</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>450</i>	@	<i>2.25</i>	<i>337.50</i>
MILEAGE	<i>10/516/mile</i>			<i>300.00</i>
				<i>2622.00</i>
				<i>2623.75</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Glenn*

409 HELPER *John*

BULK TRUCK

481 DRIVER *MATT*

BULK TRUCK

DRIVER

REMARKS:

Cement Circulated

THANK'S

CHARGE TO: *D-Oil Inc.*

STREET

CITY STATE ZIP

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<i>991.00</i>
EXTRA FOOTAGE	@		
MILEAGE	<i>6</i>	@	<i>7.00</i>
MANIFOLD	@		
	@		
	@		
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TOTAL			<i>1033.00</i>

KCC WICHITA
PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment



CHARGE TO: D-OIL
 ADDRESS:
 CITY, STATE, ZIP CODE:

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TICKET
 No 16495

PAGE	OF
1	2

SERVICE LOCATIONS 1. <u>HAYS</u>	WELL/PROJECT NO. <u>B-6</u>	LEASE <u>YOUNGER</u>	COUNTY/PARISH <u>ELLIS</u>	STATE <u>KS</u>	CITY	DATE <u>08-25-09</u>	OWNER
2. <u>NESS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>WINDLEG #8</u>	SHIPPED VIA <u>C.T.</u>	DELIVERED TO <u>2/1/09 ESEMER TAYLOR</u>	ORDER NO.	
3.	WELL TYPE <u>OIL</u>	WELL CATEGORY <u>Develop</u>	JOB PURPOSE <u>2-STAGE LONGSTRING</u>	WELL PERMIT NO. <u>KS 09-25870</u>	WELL LOCATION <u>S20 T13 R17</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF									
525		1			MILEAGE #112	30		m.		5.00		150	00
579		1			Pump SERVICE 2-STAGE	1		EA		1750.00		1750	00
221		1			LIQUID HCL	4		Gal		25.00		100	00
281		1			MUD FLUSH	500		Gal		1.00		500	00
290		1			D-AIR	3		Gal		35.00		105	00
402		1			CENTRALIZER	7		EA	5 1/2 in	55.00		385	00
403		1			CMT BASKET	3		EA	5 1/2 in	180.00		540	00
405		1			BASKET SHOE	1		EA	5 1/2 in	1250.00		1250	00
408		1			D.V. TOOL & PENS 130 FT	1		EA	5 1/2 in	2550.00		2550	00
414		1			Limit CLAMP	1		EA	5 1/2 in	30.00		30	00
417		1			D.V. LATCH DOWN PENS & BAFFLE	1		EA	5 1/2 in	200.00		200	00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X
 DATE SIGNED 08-25-09 TIME SIGNED 1230 A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	P6-1 PAGE TOTAL	7560	00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				P6-2	5812	48
WE UNDERSTOOD AND MET YOUR NEEDS?				sub	13,372	48
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Ellis TAX	555	86
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				5.3%		
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	13,928	34
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 16498

CUSTOMER **D-DIL** WELL **B-6, YOUNGER** DATE **08-25-09** PAGE **2** OF **2**

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UM		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF			QTY	UM	QTY	UM				
325		2				STD EA-2	150	SK			11 00	1650	00	
330		2				SMD	175	SK			14 00	2450	00	
276		2				FLUCELL	81	LB			1 50	121	50	
283		2				SALT	750	LB			15	112	50	
284		2				CAL SEAL	7	SK			30 00	210	00	
285		2				CFR-1	71	LB			4 00	284	00	
581		2				SERVICE CHG-CMT	325	SK			1 50	487	50	
583		2				DRAPAGE	496.98	TM			1 00	496	98	

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CONTINUATION TOTAL 5812.48

JOB LOG

SWIFT Services, Inc.

DATE 07-25-09 PAGE NO. 1

CUSTOMER D-DIL WELL NO. B-6 LEASE YOUNGER JOB TYPE 2 STAGE TICKET NO. 16495

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1230							ONLOCATION 150EA-2 BOTTOM, 175SMD TOP 30SMD FOR RH RTD 3623, SET P. OC 3607, ST 20.38, 7.44.07 3526 5 1/2" 14" DIV. INT. #55, 1309 FT. CMT 1.3.5.7.9, 54.68, RM 10, SS. 69 1/4 LIMIT CLAMP BASKETSHOE, SDCMT, 4 HCL
	1315							START CS 6 OFF
	1445							TAG BREM CIRC
	1515						800	DROP BALL TO SET BASKETSHOE, SET BASKET CIRC
	1530	5.0	12.0				200	ST. MUD FLSH SDCMTS
			20.0					" HCL " 20BBS
			36.5					ST EA-2 CMT DROPLED PLUG, WASHOUT PL
	1550	6.0	0				200	START DRIP 1/4 H2O
			55				800	" RIG MUD
			70				400	" HCL
			75				500	
			80				600	
	1605		87.5				1400	LAND PLUG RELEASE - DRY
	1610							DROP DIV. OPENING DIRT
	1615		7.0					PLUG RH 1/30SKS SMD
							1100	OPEN DIV.
	1625	5.5	0				200	START SMD
		5	80.0					END CMT
								DROP DIV. CLOSING PLUG
	1640	5.0	0				200	START DRIP
			10				250	CIRC CMT TO PIT
	1647		31.9				1200	LAND PLUG, CLOSE PLUG
	1730							JOB COMPLETE THANK YOU! DAVE JESSE JESSE

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40SMD IN PIT!