

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

*File
12/07/09*

Operator: License # 33838
Name: J&J Operating, LLC.
Address: 10830 W 179th St
City/State/Zip: Bucyrus KS, 66013
Purchaser: Plains Marketing
Operator Contact Person: Jim Loeffelbein
Phone: (913) 856-1531
Contractor: Name: Town Oil Company
License: 6142
Wellsite Geologist: KCC WICHITA

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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. _____

7-10-08	7-11-08	7-12-08
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 045-21419-00-00
County: Douglas
N/2 SW NW SE Sec. 32 Twp. 13 S. R. 21 East West
1815 feet from S / N (circle one) Line of Section
2970 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE ~~NW~~ SW
Lease Name: Mullis Well #: 2
Field Name: Little Wakarusa

Producing Formation: Squirrel
Elevation: Ground: 870 Kelly Bushing: N/A
Total Depth: 702 Plug Back Total Depth: None
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 surface w/ 6 sx cmt.

Drilling Fluid Management Plan Alt II NR 12-23-09
(Data must be collected from the Reserve Pit)
Chloride content 1500-3000 ppm Fluid volume 80 bbls
Dewatering method used Used on lease
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 Loeffelbein
Title: owner Date: 10-30-08
Subscribed and sworn to before me this 30 day of October

20 08
Notary Public: Brad Ford
Date Commission Expires: 6-26-09

BRAD FORD
Notary Public - State of Kansas
My Appt. Expires 6-26-09

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
KANSAS CORPORATION COMMISSION
FEB 27 2009
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Operator Name: J&J Operating, LLC. Lease Name: Mullis Well #: 2
 Sec. 32 Twp. 13 S. R. 21 East West County: Douglas

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 (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: <div style="font-family: cursive; font-size: 1.2em;">Gunner Ray / Not on file</div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ <div style="font-size: 1.5em; font-family: cursive;">No Geologist on site</div>
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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	6 1/4" 85 lb	6 1/4"	8	42'	Portland	6	
Completion	5 5/8"	2 7/8"	6.5	676	Portland	86	50/50 POZ

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	32 Perforations from 618- 633	<div style="font-size: 1.5em; font-weight: bold;">RECEIVED</div> <div style="font-size: 1.2em; font-weight: bold;">DEC 04 2009</div> <div style="font-size: 1.2em; font-weight: bold;">KANSAS CORPORATION COMMISSION</div> <div style="font-size: 1.2em; font-weight: bold;">KCC WICHITA</div> <div style="font-size: 1.2em; font-weight: bold;">FEB 27 2009</div> <div style="font-size: 1.5em; font-weight: bold;">RECEIVED</div>	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 16209
 LOCATION Ottawa
 FOREMAN Alan Maden

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-12-08	7841	Mullis #2	32	13	21	06
CUSTOMER TDR			TRUCK #			
MAILING ADDRESS 1207 N 1st			DRIVER			
CITY Louisberg			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66053			TRUCK #			
JOB TYPE <u>long string</u>			HOLE DEPTH <u>700</u>			
CASING DEPTH <u>676</u>			CASING SIZE & WEIGHT <u>2 7/8</u>			
SLURRY WEIGHT			WATER gal/sk			
DISPLACEMENT			CEMENT LEFT in CASING <u>yes</u>			
HOLE SIZE <u>5 3/8</u>			MIX PSI			
DRILL PIPE			RATE			
SLURRY VOL			OTHER			

REMARKS: Checked casing depth. Mixed & pumped 200 # gel to flush hole. Mixed & pumped 96 sx 50/50 po2, 5 # Kal-seal 5% salt, 2% gel, 1/4 # Pheno seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Closed valve.

Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	925.00
3906	-	MILEAGE	368	-
5402	676'	casing footage	368	-
3407A	1/2 min	ton mileage	226	157.50
5502C	142	80 val	369	150.00
1107A	24 #	pheno seal		27.60
1110A	480 #	Kal-seal		201.60
1111	202 #	salt		66.66
1118B	361 #	gel		161.37
1124	86 sx	50/50 po2		839.50
4402	1	2 1/2 plug		23.00
				2451.23
SALES TAX				76.79
ESTIMATED TOTAL				2528.02

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AUTHORIZATION *[Signature]*

TITLE 223637

DATE 8/1