

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 # 33858
Name: J & J Operating, LLC.
Address 1: 10380 W. 179th Street
Address 2: _____
City: Bucyrus State: KS Zip: 66013 + _____
Contact Person: Patrick Everett
Phone: (913) 549-8442

CONTRACTOR: License # 6142
Name: Town Oil Company
Wellsite Geologist: _____
Purchaser: Pacer Energy Marketing

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.: _____
9-29-2008 9-30-2008 9-30-2008
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21473-00-00
Spot Description: NW NW NW NW
NW NW NW NW Sec. 30 Twp. 13 S. R. 21 East West
165 Feet from North / South Line of Section
165 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Douglas
Lease Name: A-South P (T) Well #: 1
Field Name: Wildcat

Producing Formation: Squirrel
Elevation: Ground: 914 Kelly Bushing: NA
Total Depth: 754 Plug Back Total Depth: NA
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 AH II NR 12-22-09
(Data must be collected from the Reserve Pit)
Chloride content: 1500-3000 ppm Fluid volume: 109 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: _____
Title: Authorized Agent Date: 12/14/09
Subscribed and sworn to before me this 14 day of December
20 09
Notary Public: _____
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: J & J Operating, LLC. Lease Name: A-South P (T) Well #: 1
 Sec. 30 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 <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: Gamma Ray Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum No Geologist at wellsite
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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	8 5/8	6 1/4	8	42	Portland	6	
Completion	5 5/8	2 7/8	6.5	746	Portland	114	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				

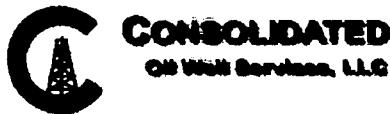
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	38 Perforations from 697.0-715.0		

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed 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: <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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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

TICKET NUMBER 19751
LOCATION Ottawa
FOREMAN Alan Mader

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-30-09	4028	A South PG#1	30	N3	21	D6	
CUSTOMER JOS Operating			TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDRESS 10380 W 179th			516	Alan M			
CITY Bucyrus			164	Ken H			
STATE KS			370	Brian J			
ZIP CODE 66013			510	Artem N			
JOB TYPE	long string	HOLE SIZE	5 7/8	HOLE DEPTH	754	CASING SIZE & WEIGHT	2 1/8
CASING DEPTH	746	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	yes
DISPLACEMENT		DISPLACEMENT PSI		MIX PSI		RATE	4 bpm
REMARKS: Checked casing depth. Mixed & pumped 100# gel followed by 114 sk 50/50 poz, 5# Kol-seal, 570 salt, 270 gel, 6# Phenoseal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI.							

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1641	925.00
5406	30	MILEAGE	1641	109.50
5402	746'	casing footage	164	
5407	min	ton mileage	510	315.00
5502C	2	BD vac	370	200.00
1107A	29#	Phenoseal		33.35
1110A	570#	Kol seal		239.40
1111	239#	salt		78.87
1118B	291#	gel		49.47
1124	102 sk	50/50 poz		994.50
4402	1	2 1/2 plug		23.00
			Sub	2968.09
			6.37%	
			SALES TAX	89.37
			ESTIMATED TOTAL	3057.46

Rev'n 3737

AUTHORIZATION *[Signature]* TITLE 226205

DATE 9/30/09

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