

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

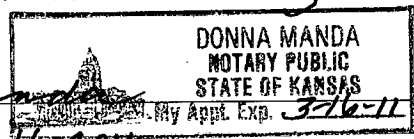
OPERATOR: License # 33977
Name: EK Energy, LLC
Address 1: P.O. Box 267
Address 2: _____
City: Colony State: KS Zip: 66015 + _____
Contact Person: David Kimzey
Phone: (620) 469-6257
CONTRACTOR: License # 33977
Name: EK Energy, LLC
Wellsite Geologist: n/a

Purchaser: n/a
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.: _____
February 4, 2009 February 5, 2009 February 12, 2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Donna Manda
Title: Agent for EK Energy, LLC Date: January 19, 2010
Subscribed and sworn to before me this 19th day of January
20 10
Notary Public: Donna Manda
Date Commission Expires: March 16, 2011



API No. 15 - -001-29,757-0000
Spot Description: _____
N2 N2 NE NW Sec. 6 Twp. 24 S. R. 19 East West
5,110 Feet from North / South Line of Section
3,300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: Hiser Well #: WD-1
Field Name: _____
Producing Formation: Mississippian
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 1,035 ft. Plug Back Total Depth: 1,011.5 ft.
Amount of Surface Pipe Set and Cemented at: 41 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: surface
feet depth to: 1,011.5 ft. w/ 125 sx cmt.

Drilling Fluid Management Plan Alt II ncr 1-25-10
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: Drilled with fresh water - air dry
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution (1/21)

RECEIVED
JAN 20 2010

KCC WICHITA

Operator Name: EK Energy, LLC Lease Name: Hiser Well #: WD-1
 Sec. 6 Twp. 24 S. R. 19 East West County: Allen

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Drillers Log

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 See attached Drillers Log

CASING RECORD New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Libs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface		7"		41'		15 sxs	
production		2-7/8"		1,011.5'		125	

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		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

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:		METHOD OF COMPLETION:			PRODUCTION INTERVAL:
<input type="checkbox"/> Vented	<input type="checkbox"/> Sold	<input type="checkbox"/> Used on Lease	<input checked="" type="checkbox"/> Open Hole	<input type="checkbox"/> Perf.	<input type="checkbox"/> Dually Comp.
(If vented, Submit ACO-18.)			<input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Commingled	

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
2/8/2009	779

Bill To
E. K. Energy c/o Dave Kimsey P.O. Box 267 Colony, KS 66015

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	Hiser Lease 2/6/09, Well #WD-1, circulated 125 sacks of cement to surface, pumped 220 gallons of water behind cement and shut in.	400.00	400.00T
	Sales Tax	6.30%	25.20
<i>pd</i>			
		RECEIVED JAN 20 2010 KCC WICHITA	

Thank you for your business.	Total	\$425.20
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