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Form ACO-1
September 1999
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA

ORIGINAL

Operator: License # 5030
 Name: Vess Oil Corporation
 Address: 1700 Waterfront Parkway, Bldg. 500
 City/State/Zip: Wichita, KS 67206
 Purchaser: MV Purchasing, LLC
 Operator Contact Person: W.R. Horigan
 Phone: (316) 682-1537 X103
 Contractor: Name: L. D. Drilling, Inc.
 License: 6039
 Wellsite Geologist: Roger Martin
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____

10/8/09	10/18/09	12/1/09
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

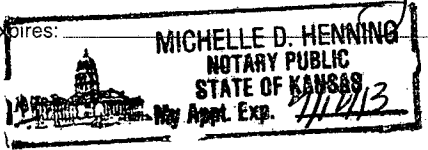
API No. 15 - 051-25895-00-00
 County: Ellis
 NW SW NE SE Sec. 26 Twp. 11 S. R. 17 East West
1780 1820 feet from (S) N (circle one) Line of Section
1620 feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW (SW)
 Lease Name: Hall B Well #: 28
 Field Name: Bemis Shutts
 Producing Formation: Arbuckle
 Elevation: Ground: 2000 Kelly Bushing: 2005
 Total Depth: 3605 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 1199' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH I NR 2-9-10
 (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: [Signature]
 Title: Operations Engineer Date: 2/2/10
 Subscribed and sworn to before me this 2nd day of February,
 20 10.
 Notary Public: [Signature]
 Date Commission Expires: _____



KCC Office Use ONLY

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

Operator Name: Vess Oil Corporation Lease Name: Hall B Well #: 28
 Sec. 26 Twp. 11 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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray Neutron CCL Log, Cement Bond Log,	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum see attached <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED FEB 03 2010 KCC WICHITA </div>
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CASING RECORD <input checked="" type="checkbox"/> New <input checked="" 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	# Sacs Used	Type and Percent Additives
surface new	17-1/2"	16		88	common	100	3% cc, 2% gel
surface new	14-3/4"	10-3/4"	32.75#	1199	common	900	3% cc, 2% gel
production used	9-7/8"	7"		3604	ASC	165	10% salt, 2% gel, 1/4#FS

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
	3460-66	250 gal MA	

TUBING RECORD		Size <u>2-7/8</u> Set At <u>3403</u> Packer At _____	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>12/1/09</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>71</u>	Gas Mcf <u>0</u>	Water Bbls. <u>2130</u> 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled _____	Production Interval <input type="checkbox"/> Other (Specify) _____
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ATTACHMENT TO ACO-1

Hall B #28
 1820'FSL 1620'FWL
 Sec. 26-11S-17W
 Ellis County, KS

<u>SAMPLE TOPS</u>	<u>HALL B 28</u>	
	SAMPLES	LOG TOPS
ANHYDRITE	1184 (+821)	
BASE ANH	1224 (+781)	
TOPEKA	2912 (-907)	
HEEBNER	3150 (-1145)	
TORONTO	3172 (-1167)	
LANSING	3197 (-1192)	
STARK	3388 (-1383)	
BKC	3432 (-1427)	
CONG		
ARBUCKLE LS	3452 (-1447)	
ARB DOLOMITE	3459 (-1454)	
RTD	3605 (-1605)	
LTD		

DST #1 3147-3301 Zone: Tor – Lans G
 Times: 30-45-45-60
 1st open: Strong blow – Bob – 14 min
 2nd open: Wk inc to 10" in 30 min, then dec (last 30 min plugged off)
 Rec.: 132' Mud; 124' Gsy OCM (20% gas, 2% oil, 78% mud); 256' TF
 IHP: 1567 FHP: 1533
 IFP: 86-108 FFP: 144-162
 ISIP: 618 FSIP: 629 TEMP: 94F

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DST #2 3425-65 Zone: Arb
 Times: 30-45-45-60
 1st open: Strong blow – Bob – 1.5 min
 2nd open: Strong blow BOB – 1.5 min
 Rec.: 92' GIP, 30' CO, 185' O&GCMW (5% gas, 20% oil, 45% mud), 400' SI
 OCMW (5% oil, 75% wtr, 20% mud), 1245' SI OCMW (2% oil, 88% wtr,
 10% mud)
 IHP: 1709 FHP: 1636
 IFP: 138-540 FFP: 569-819
 ISIP: 890 FSIP: 890 TEMP: 108F

KCC WICHITA

ALLIED CEMENTING CO., LLC. 33622

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

SERVICE POINT:
Russell KS

DATE <u>10-18-09</u>	SEC. <u>26</u>	TWP. <u>11</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START <u>3:30 pm</u>	JOB FINISH <u>4:45 pm</u>
LEASE <u>Hall B</u>	WELL # <u>28</u>		LOCATION <u>Codell Rd & River Rd jct.</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>3 South East into</u>				

CONTRACTOR LD Rig #1
 TYPE OF JOB Production String
 HOLE SIZE 9 7/8" T.D. 3605'
 CASING SIZE 7" 23" DEPTH 3607.01"
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 33.52'
 CEMENT LEFT IN CSG. 33.52'
 PERFS. _____
 DISPLACEMENT 140.79 BBL

OWNER _____
 CEMENT
 AMOUNT ORDERED 16.5 ASC 10% Salt 21 Gal 1/4" Flo
500 gal WFR-2

EQUIPMENT
 PUMP TRUCK # 398 CEMENTER John Roberts
 HELPER Glenn
 BULK TRUCK # 410 DRIVER Matt
 BULK TRUCK # _____ DRIVER _____

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____
 TOTAL _____

REMARKS:

Ran 120 lbs 7" casing Est. circulation
and circulate 90 min Plug Reticle 30ck
cement Mix 500 gal WFR-2 and Mix
125 ck cement Insert @ 3573 119'
Displace plug w/ 140.79 BBL H2O.

Land plug @ 1200 psi
Float Did Hold!

Thank You!

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 TOTAL _____

CHARGE TO: Vess Oil Corp.
 STREET _____
 CITY _____ STATE _____ ZIP _____

7" PLUG & FLOAT EQUIPMENT

Guide Shoe _____
2-Cement Baskets @ _____
7-Centralizers @ _____
AFU Insert @ _____
Rubber Plug @ _____
3-5 Sec Rotating Scratches @ _____
 TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment
 and furnish cementer and helper(s) to assist owner or
 contractor to do work as is listed. The above work was
 done to satisfaction and supervision of owner agent or
 contractor. I have read and understand the "GENERAL
 TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Roger Martin
 SIGNATURE _____

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

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KCC WICHITA

ALLIED CEMENTING CO., LLC. 33614

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

SERVICE POINT:
Russell KS

DATE <u>10-10-09</u>	SEC. <u>26</u>	TWP. <u>11</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30am</u>	JOB FINISH <u>7:00am</u>
LEASE <u>Hall B</u>		WELL # <u>28</u>		LOCATION <u>Codell & River Rd Int. & South</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>East into</u>				

CONTRACTOR LD Rig #1

TYPE OF JOB Surface

HOLE SIZE 14 3/4 T.D. 1200'

CASING SIZE 10 3/4 32.75" DEPTH 1200'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 34.22

CEMENT LEFT IN CSG. 34.22

PERFS. _____

DISPLACEMENT 117.62 BBL

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts

398 HELPER Glenn

BULK TRUCK

473 DRIVER Darren Oakley

BULK TRUCK

344 DRIVER Randy G.B

REMARKS:

Est Circulation

M x 900sk Cement

Duplic. plug w/ 117.62 BBL H2O

Cement Did Circulate!

Thank You!

CHARGE TO: Vess Oil Corp.

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME [Signature]

SIGNATURE [Signature]

OWNER _____

CEMENT

AMOUNT ORDERED 900sk Com 3% cc 2% Gel

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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KCC WICHITA

PLUG & FLOAT EQUIPMENT

10 3/4 Baffle Plate @ _____

10 3/4 Rubber Plug @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 33609

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

SERVICE POINT:
Russell KS

DATE <u>10-9-09</u>	SEC. <u>26</u>	TWP. <u>11</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>5:30</u>
LEASE <u>Hall B</u>		WELL# <u>28</u>		LOCATION <u>Codell & River Rd Jct 2 South</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				<u>East into</u>			

CONTRACTOR LD Rig #1

TYPE OF JOB Conductor

HOLE SIZE 17 1/2" T.D. 92'

CASING SIZE 16" DEPTH 80.7'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 10'

PERFS. _____

DISPLACEMENT 16 Bbl

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts

398 HELPER Glenn

BULK TRUCK

410 DRIVER Chris

BULK TRUCK

_____ DRIVER _____

REMARKS:

Est circulation

M x 100 sk Cement

Displace w/ 16 BBL H₂O

Cement Did Circulate!

Thank You!

CHARGE TO: Vess Oil Corp.

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE [Signature]

OWNER _____

CEMENT

AMOUNT ORDERED 100 com 3 1/2 cc 2 1/2 Gal

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

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TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS