

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 # 33858
 Name: J & J Operating, LLC.
 Address 1: 10380 W. 179th Street
 Address 2: _____
 City: Bucyrus State: KS Zip: 66067 + _____
 Contact Person: Patrick Everett
 Phone: (913) 549-8442
 CONTRACTOR: License # 32834
 Name: JTC Oil, INC.
 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.: _____

<u>10/21/2009</u>	<u>10/22/2009</u>	<u>11/13/2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

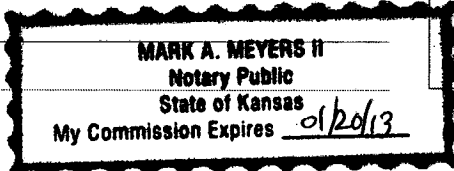
API No. 15 - 045-21598-00-00
 Spot Description: W/2 SW SW NE
W2 SW SW NE Sec. 31 Twp. 13 S. R. 21 East West
2310 Feet from North / South Line of Section
2610 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Douglas
 Lease Name: Kelco Well #: I-1
 Field Name: Wildcat
 Producing Formation: Squirrel
 Elevation: Ground: 970 Kelly Bushing: NA
 Total Depth: 830 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: Surface CLD
 feet depth to: 830 Surface w/ 8 sx cmt.

Drilling Fluid Management Plan A4 II NR 2-12-10
 (Data must be collected from the Reserve Pit)
 Chloride content: 1500-3000 ppm Fluid volume: 92 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: [Signature]
 Title: Agent Date: 2/5/10
 Subscribed and sworn to before me this 5th day of February
20 10
 Notary Public: [Signature]
 Date Commission Expires: 01/20/13



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

RECEIVED
 FEB 08 2010
 KCC WICHITA

Operator Name: J & J Operating, LLC. Lease Name: Kelco Well #: I-1
 Sec. 31 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 on well site
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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	8	
Casing	5 5/8	2 7/8	6.5	815	Portland	124	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 <i>(Amount and Kind of Material Used)</i>	Depth
2	21 perforations at 748.0 to 758.0		

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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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RECEIVED
 FEB 08 2010
 KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 20248
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/3/09	4028	W Kelec # I-1	NE 31	13	21	OG
CUSTOMER			TRUCK #			
J+J Operating LLC			DRIVER			
MAILING ADDRESS			TRUCK #			
10380 W 179th			DRIVER			
CITY			TRUCK #			
Bueyrus			DRIVER			
STATE			TRUCK #			
KS			DRIVER			
ZIP CODE			TRUCK #			
66013			DRIVER			

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 830' CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 815' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 4.7 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Chuck casing depth w/ Wireline Mix + Pump 200# Premium Gel Flush. Circulate 1hr from Pit to Condition hole. Mix + Pump 100# Premium Gel. Mix + Pump 124 SKS 50/50 Poz Mix Cement 270 Gel 1/2# Pheno Seal per sack. Cement to Surface Flush pump + lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 4.75 BBL Fresh Water. Pressure to 800# PSI Hold pressure for 30 minute MIT. Release pressure to set Float Valve. Shut in casing.
JTC Drilling Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		870 ⁰⁰
5406	-0-	MILEAGE Trucks on lease		N/C
5402	815'	Casing footage.		N/C
5407A	156.24	Ton miles.		181 ²⁴
5502C	2hrs	80 BBL Vac Truck		188 ⁰⁰
1124	121 SKS	50/50 Poz Mix Cement		1119 ²⁵
1118B	508 ⁰⁰	Premium Gel		81 ²⁸
1107A	62 ⁰⁰	Pheno Seal		66 ⁹⁶
4402	1	2 1/2" Rubber Plug		22 ⁰⁰
			RECEIVED	
			FEB 08 2010	
			W/O # 231822	
			KCC WICHITA	
			6.3%	
			SALES TAX	81 ²⁴
			ESTIMATED	
			TOTAL	2609 ⁹⁷

Ravin 3737 AUTHORIZATION [Signature] TITLE _____ DATE _____