

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 # 6569
Name: Carmen Schmitt, Inc
Address 1: P.O. Box 47
Address 2: 915 Harrison
City: Great Bend State: KS Zip: 67530 + 0 0 4 7
Contact Person: Carmen Schmitt, Inc
Phone: (620) 793-5100
CONTRACTOR: License # 4958
Name: Mallard, J.V., Inc.

Wellsite Geologist: M. Bradford Rine
Purchaser: _____
Designate Type of Completion:
 New Well _____ Re-Entry _____
_____ Oil _____ SWD _____ SLOW
 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.: _____
8/24/09 9/2/09 9/3/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 145-21588-00-00
Spot Description: 150' FNL, 550' FWL
N/2 N/2 NW NW Sec. 10 Twp. 22 S. R. 19 East West
150 Feet from North / South Line of Section
550 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pawnee
Lease Name: J-P Unit Well #: 1

Producing Formation: _____
Elevation: Ground: 2085 Kelly Bushing: 2090
Total Depth: 4375 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 5220 / 1198 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: n/a
feet depth to: _____ w/ _____

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 47000 ppm Fluid volume: 1000 bbls
Dewatering method used: Evaporate
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

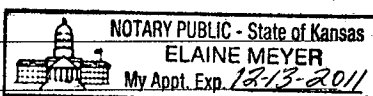
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Francis Stecher
Title: Operations Manager Date: 1/29/2010

Subscribed and sworn to before me this 11 day of February
20 10

Notary Public: Elaine Meyer
Date Commission Expires: 12-13-2011



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

UIC Distribution

RECEIVED
FEB 12 2010

KCC WICHITA

Operator Name: Carmen Schmitt, Inc Lease Name: J-P Unit Well #: 1
 Sec. 10 Twp. 22 S. R. 19 East West County: Pawnee

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 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>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Topeka</td> <td>3279</td> <td>-1189</td> </tr> <tr> <td>Heebner</td> <td>3641</td> <td>-1554</td> </tr> <tr> <td>Lansing</td> <td>3734</td> <td>-1642</td> </tr> <tr> <td>Kansas City</td> <td>4033</td> <td>-1908</td> </tr> <tr> <td>Marmaton</td> <td>4050</td> <td>-1969</td> </tr> <tr> <td>Fort Scott</td> <td>4173</td> <td>-2088</td> </tr> <tr> <td>Mississippian</td> <td>4265</td> <td>-2289</td> </tr> </table>	Name	Top	Datum	Topeka	3279	-1189	Heebner	3641	-1554	Lansing	3734	-1642	Kansas City	4033	-1908	Marmaton	4050	-1969	Fort Scott	4173	-2088	Mississippian	4265	-2289
Name	Top	Datum																							
Topeka	3279	-1189																							
Heebner	3641	-1554																							
Lansing	3734	-1642																							
Kansas City	4033	-1908																							
Marmaton	4050	-1969																							
Fort Scott	4173	-2088																							
Mississippian	4265	-2289																							

List All E. Logs Run:
Dual Induction; Dual Compensated Porosity

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	12.25	8.625"	23	825 \checkmark / 1198	Common	450	3% c.c., 2 % gel
Production	7.875	4.5	9.5	4373	EA-2	250	.2% floeal, 5% calseal

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)

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: _____ _____
---	--	--

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3340

Date	8/25/09	Sec.	10	Twp.	22	Range	19 W	County	Pawnee	State	KS	On Location		Finish	5:15 PM		
Lease	JP Unit	Well No.	1		Location: Rozel, 25, E into												
Contractor	Mallard Drilling				Owner:												
Type Job	Surface				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.												
Hole Size	12 1/4"		T.D.	1198'													
Csg.	8 5/8" 23#		Depth	1198'													
Tbg. Size			Depth	Street													
Drill Pipe			Depth	City State													
Tool			Depth	The above was done to satisfaction and supervision of owner agent or contractor.													
Cement Left in Csg.	42.60		Shoe Joint	42.60		4# per 5' Flowseal CEMENT											
Press Max.			Minimum	Amount Ordered 450 5x Com 3% cc 2% gel													
Meas Line			Displace	7 3/4 Bbls.		Common											
Perf.			Poz. Mix														
EQUIPMENT														Gel.			
Pumptrk	6	No.	Cementer	Paul											Calcium		
			Helper														
Bulktrk	4	No.	Driver	Toll											Mills		
			Driver														
Bulktrk	PU	No.	Driver	Dang											Salt		
			Driver														
JOB SERVICES & REMARKS														RECEIVED KANSAS CORPORATION COMMISSION JAN 29 2010 CONSERVATION DIVISION WICHITA, KS			
Pumptrk Charge																Handling	
Mileage																Mileage	
Footage																Pump Truck Charge	
Total																	
Remarks:	Cement Circulated																
FLOAT EQUIPMENT																	
Guide Shoe																	
Centralizer 8 5/8"																	
Baskets																	
AFU Inserts																	
Baffle Plate																	
Rubber Plug																	
Head + Manifold																	
Rotating Head																	
Squeez Mainfold																	
Tax																	
Discount																	
Total Charge																	
Signature: <i>Sub Jansen</i>																	

Thank You!!

