

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 # 32686
 Name: Reilly Oil Company, Inc.
 Address 1: PO Box 277
 Address 2: _____
 City: WaKeeney State: Ks Zip: 67672 + 0277
 Contact Person: Dusty Rhoades
 Phone: (785) 743-6774
 CONTRACTOR: License # 33575
 Name: WW Drilling, LLC
 Wellsite Geologist: Richard Bell
 Purchaser: None
 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>2/24/2009</u>	<u>3/02/2009</u>	<u>3/02/2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23533-00-00
 Spot Description: _____
SW SE SE SW Sec. 6 Twp. 7 S. R. 23 East West
170 Feet from North / South Line of Section
2190 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Graham
 Lease Name: Coffin-Eason Unit Well #: 1-6
 Field Name: wildcat
 Producing Formation: none
 Elevation: Ground: 2452 Kelly Bushing: 2457
 Total Depth: 3965 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 261 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 P+A Alt II MR
 (Data must be collected from the Reserve Pit) 3-4-10
 Chloride content: 3000 ppm Fluid volume: 800 bbls
 Dewatering method used: Air Dry - Back Fill
 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: Dusty Rhoades
 Title: President Date: 2/25/2010
 Subscribed and sworn to before me this 25th day of February
20 10
 Notary Public: Angela Sherfick
 Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 01 2010

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Reilly Oil Company, Inc. Lease Name: Coffin-Eason Unit Well #: 1-6
 Sec. 6 Twp. 7 S. R. 23 East West County: Graham

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Compensated/Density Neutron Log Dual Induction Log Micro Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attached Sheet
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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	12 1/4	8 5/8	20	261	Common	180	3% cc, 2% gel

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

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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**REILLY OIL COMPANY, INC.
PO BOX 277
WAKEENEY, KANSAS 67672
PH 785-743-6774**

**COFFIN-EASON UNIT # 1-6
170' FSL & 2190' FWL
SECTION 6-7S-23W
GRAHAM COUNTY, KANSAS**

API # 15-065-23533-00-00

Log Tops – Formation (Tops) – Depth and Datum

Elevation: Ground Level – 2452 KB – 2457

Formation	Top	Datum
Top Anhydrite	2152	+ 305
Base Anhydrite	2186	+ 271
Topeka	3485	- 1028
Heebner	3685	- 1228
Toronto	3723	- 1266
Lansing	3733	- 1276
Base Kansas City	3922	- 1465
RTD	3965	- 1508
LTD	3964	- 1507

Drill Stem Test Results

Dst # 1 – 3741-3763 (C)

**Open 30 minutes
Shut-in 60 minutes
Open 30 minutes
Shut-in 60 minutes
Recovered:
Total Fluid: 20'**

**Weak blow died in 15 minutes
No blow back
No blow
No blow back
20' drilling mud**

**IHP – 1876 psi
IFP – 13-19 psi
ISIP – 737 psi
Temperature: 109°**

**FHP – 1856 psi
FFP – 20-23 psi
FSIP – 501 psi**

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**CONSERVATION DIVISION
WICHITA, KS**

Dst # 2 – 3763-3780 (D)

**Open 30 minutes
Shut-in 30 minutes
Open 30 minutes
Shut-in 30 minutes
Recovered:
Total Fluid: 10'**

**IHP – 1885 psi
IFP – 13-17 psi
ISIP – 1164 psi
Temperature: 104°**

**Weak blow died in 6 minutes
No blow back
No blow
No blow
10' drilling mud with few oil specks**

**FHP – 1873 psi
FFP – 18-21 psi
FSIP – 1115 psi**

Dst # 3 – 3779-3800 (E & F)

**Open 30 minutes
Shut-in 60 minutes
Open 45 minutes
Shut-in 90 minutes
Recovered:
Total Fluid: 350'**

**IHP – 1882 psi
IFP – 19-105 psi
ISIP – 908 psi
Temperature: 119°**

**Off bottom bucket in 23 minutes
No blow back
Off bottom bucket in 28 minutes
No blow back
350' slightly mud cut water (45,000 CHI)**

**FHP – 1864 psi
FFP – 113-208 psi
FSIP – 904 psi**

Dst # 4 – 383-3890 (H,I, & J)

**Open 30 minutes
Shut-in 30 minutes
Open 30 minutes
Shut-in 60 minutes
Recovered:
Total Fluid: 30'**

**IHP – 1903 psi
IFP – 15-23 psi
ISIP – 1150 psi
Temperature: 106°**

**Weak blow died in 25 minutes
No blow back
No blow
No blow back
30' drilling mud**

**FHP – 1863 psi
FFP – 25-31 psi
FSIP – 1248 psi**

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CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 036232

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

SERVICE POINT: Great Bend
Russell, KS

DATE <u>3-2-09</u>	SEC <u>6</u>	TWP <u>7</u>	RANGE <u>23W</u>	CALLED OUT	ON LOCATION <u>12:00</u>	JOB START <u>2:45pm</u>	JOB FINISH <u>3:45pm</u>
COFFIN CURSOR LEASE UNIT				WELL# <u>1-6</u>	LOCATION <u>Hill City 8n 4 1/2 W 51/4</u>	COUNTY <u>Graham</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR W & W Rig #8
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8" I.D. 2169'
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2" DEPTH 2169'
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Fw

EQUIPMENT

PUMP TRUCK CEMENTER Randy
 # HELPER Robert
 BULK TRUCK
 # DRIVER Rocky
 BULK TRUCK
 # DRIVER _____

REMARKS:

On location Safety meeting Rig up
1- 255x - 2169'
2- 1005x - 1567'
3- 405x - 311'
4- 105x - 40'
Rethrow - 305x
Wash up
Rig down

CHARGE TO: Reilly Oil Co. Inc.
 STREET _____
 CITY _____ STATE _____ ZIP _____

Thank you!

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 x Sig Deutscher
 SIGNATURE x Sig Deutscher

OWNER Reilly Oil Co. Inc.

CEMENT
 AMOUNT ORDERED 205 5x 60/40 1/4" Flosca

COMMON	<u>125</u>	@ <u>13.50</u>	<u>1687.50</u>
POZMIX	<u>80</u>	@ <u>7.55</u>	<u>604.00</u>
GEL	<u>7</u>	@ <u>20.25</u>	<u>141.75</u>
CHLORIDE		@	
ASC		@	
<u>Flow Seal</u>	<u>50 #</u>	@ <u>2.45</u>	<u>122.50</u>
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CONSERVATION DIVISION WICHITA, KS			
HANDLING	<u>212</u>	@ <u>2.25</u>	<u>477.00</u>
MILEAGE	<u>55/212/10</u>		<u>1166.00</u>
			TOTAL <u>4,198.75</u>

SERVICE

DEPTH OF JOB	<u>2169'</u>		
PUMP TRUCK CHARGE			<u>1159.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>55</u>	@ <u>7.00</u>	<u>385.00</u>
MANIFOLD		@	
TOTAL <u>1544.00</u>			

PLUG & FLOAT EQUIPMENT

<u>1- 8 5/8 wooden Plug</u>	@ <u>66.00</u>	<u>66.00</u>
	@	
	@	
	@	
TOTAL <u>66.00</u>		

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

ALLIED CEMENTING CO., LLC. 34956 A

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

SERVICE POINT:
Russell KS

DATE <u>2-24-09</u>	SEC. <u>6</u>	TWP. <u>7</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>5:15</u>	JOB FINISH <u>5:45 pm</u>
LEASE <u>Coffin Eason Unit</u>	WELL # <u>1-6</u>	LOCATION <u>Hill City KS 8 North to Y Rd</u>			COUNTY <u>Graham</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)		<u>4 1/2 West South into</u>					

CONTRACTOR W/W Drilling #8
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 262'
 CASING SIZE 8 5/8 20# DEPTH 262'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 15.73 Bbl

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts
 # 409 HELPER Travis
 BULK TRUCK
 # 345 DRIVER CH
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Est circulation
Mix 180 sk Cement
Displace w/ 15.73 Bbl H2O
Cement Did Circulate!
Thank You!

CHARGE TO: Reilly oil
 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 Syd Deutscher
 SIGNATURE [Signature]

OWNER _____
 CEMENT AMOUNT ORDERED 180 com 3 1/2 cc 2 1/2 Gel

COMMON	<u>180</u>	@	<u>13.50</u>	<u>2430.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>6</u>	@	<u>51.50</u>	<u>309.00</u>
ASC		@		
RECEIVED KANSAS CORPORATION COMMISSION				
MAR 01 2010				
CONSERVATION DIVISION WICHITA, KS				
HANDLING	<u>180</u>	@	<u>2.25</u>	<u>405.00</u>
MILEAGE	<u>110/sk/mile</u>			<u>990.00</u>
				TOTAL <u>4194.75</u>

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>600.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>55</u>	@	<u>7.00</u>	<u>385.00</u>
MANIFOLD		@		
				TOTAL <u>985.00</u>

PLUG & FLOAT EQUIPMENT

	@		
<u>8 5/8 Wood Plug</u>	@		<u>NA</u>
TOTAL _____			

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