

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 # 6239

Name: Zinszer Oil Company, Inc.

Address 1: P.O. Box 211

Address 2: _____

City: Hays State: KS Zip: 67601 + _____

Contact Person: Perry S. Henman

Phone: (785) 625-9448

CONTRACTOR: License # 31548

Name: Discovery Drilling Co., Inc.

Wellsite Geologist: Kent Crisler

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- 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.: _____

<u>10/13/09</u>	<u>10/20/09</u>	<u>10/21/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 083-21,612-00-00

Spot Description: 50' north of,

NE SE NW Sec. 26 Twp. 22 S. R. 24 East West

1600 Feet from North / South Line of Section

2310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Hodgeman

Lease Name: Springer Well #: 5

Field Name: Jetmore

Producing Formation: none

Elevation: Ground: 2384 Kelly Bushing: 2392

Total Depth: 4646 Plug Back Total Depth: 0

Amount of Surface Pipe Set and Cemented at: 223.40 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/ _____

PA-DIG-2/8/10

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 16,000 ppm Fluid volume: 240 bbls

Dewatering method used: evaporation

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: _____

Title: Production Manager/Geologist Date: 2/9/10

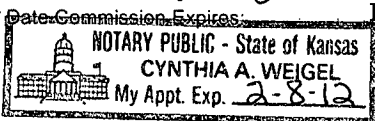
Subscribed and sworn to before me this 9th day of February

20 10

Notary Public: Cynthia A. Weigel

Cynthia A. Weigel

February 8, 2012



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED

FEB 11 2010

KCC WICHITA

Operator Name: Zinszer Oil Company, Inc. Lease Name: Springer Well #: 5
 Sec. 26 Twp. 22 S. R. 24 East West County: Hodgeman

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: RAG, Micro	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input 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>Anhydrite</td> <td>1608</td> <td>+784</td> </tr> <tr> <td>LKC</td> <td>3963</td> <td>-1571</td> </tr> <tr> <td>Mississippi</td> <td>4605</td> <td>-2213</td> </tr> </table>	Name	Top	Datum	Anhydrite	1608	+784	LKC	3963	-1571	Mississippi	4605	-2213
Name	Top	Datum											
Anhydrite	1608	+784											
LKC	3963	-1571											
Mississippi	4605	-2213											

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	223.40	Common	150	2%gel 3%cc

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

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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CHARGE TO: **ZINSZER OIL Co.**
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No **17062**
 PAGE **1** OF **1**


SERVICE LOCATIONS: 1. **NESS City, Ks**
 WELL/PROJECT NO. **#5** LEASE **SPRINGER** COUNTY/PARISH **HONGEMAN** STATE **Ks** CITY
 DATE **10-13-09** OWNER **SAME**
 TICKET TYPE SERVICE SALES CONTRACTOR **DISCOVERY DRIG #3** RIG NAME/NO. SHIPPED VIA **CT** DELIVERED TO **LOCATION** ORDER NO.
 WELL TYPE **OIL** WELL CATEGORY **DEVELOPMENT** JOB PURPOSE **8 5/8" SURFACE** WELL PERMIT NO. WELL LOCATION **JETMOOR, Ks - 2N, 13/4W, S**
 REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 114	40		ME		5.00	200.00
576S		1			PUMP CHARGE	1	223	FEET		750.00	750.00
325		1			STANDARD CEMENT	150		SKS		11.00	1650.00
278		1			CALCIUM CHLORIDE	4		SKS		35.00	140.00
279		1			BENTONITE GEL	3	300	SKS LBS		20.00	60.00
290		1			D-ADR	1		Gal		35.00	35.00
581		1			SERVICE CHARGE CEMENT	150		SKS		1.50	225.00
583		1			DRAVAGE	1472	294.4	CUBS FT		1.00	294.40

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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X 

DATE SIGNED **10-13-09** TIME SIGNED **2130** P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	3354.40
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY? ARE YOU SATISFIED WITH OUR SERVICE?					
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	3354.40

SWD d/or TAX 4/17/10 Well

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR **WAXIE WISSON** APPROVAL

Thank You!



CHARGE TO:
ZUSZER OIL

ADDRESS

CITY, STATE, ZIP CODE

TICKET
No 17070

PAGE 1 OF 1

SERVICE LOCATIONS 1. Ness City, Ks	WELL/PROJECT NO. #5	LEASE SPRINGER	COUNTY/PARISH HONGEMAN	STATE Ks	CITY	DATE 10-21-09	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR DISCOVERY DRIG #3	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY ABANDONED	JOB PURPOSE PTA	WELL PERMIT NO.	WELL LOCATION JEMORE, Ks - 2N, 13/4W, S2E		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 110	40		ME		5.00	200.00
576P		1			PUMP CHARGE - PTA	1		JOB		750.00	750.00
328		1			SWIFT LIGHT 60/40 A2 (4% GEL)	230		SKS		9.00	2070.00
276		1			FLOCELE	60		URS		1.50	90.00
290		1			D-ADD	2		Gal		35.00	70.00
581		1			SERVICE CHARGE COMPT	230		SKS		1.50	345.00
583		1			DRAVAGE	19321		URS	386.42 TM	1.00	386.42

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 KCC NICHITA

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X
DATE SIGNED 10-21-09 TIME SIGNED 1145 A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	3911.42
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				SWD 4/8 TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			Amj. Well	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	3911.42

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR WAVE WILSON APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 10-21-09 PAGE NO. 7

CUSTOMER ZINSEER OIL WELL NO. #5 LEASE SPENCER JOB TYPE PTA TICKET NO. 17070

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1145							ON LOCATION
								TD - 4646 8 5/8 - 223'
	1425		13					1ST PLUG - 50 SKS = 1620'
	1500		18 1/2					2ND PLUG - 70 SKS = 770'
	1530		10 1/2					3RD PLUG - 40 SKS = 240'
	1630		5.2					4TH PLUG - 20 SKS = 60'
	1640		8					RH - 30 SKS
	1650		5.2					MH - 20 SKS
								WASH TRUCK
	1800							JOB COMPLETE
								THANK YOU WAYNE, BUZNE, LAWE
								RECEIVED FEB 11 2010 KCC WICHITA