

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: Bob Schreiber
Purchaser: _____
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.: _____
1/11/2010 1/16/2010 1/22/2010
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 163-23839-00-00
Spot Description: _____
SE SE NE NE Sec. 20 Twp. 9 S. R. 16 East West
1060 4240 Feet from North / South Line of Section
170 153 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rooks
Lease Name: Dorr Well #: 709
Field Name: Dorr
Producing Formation: Arbuckle
Elevation: Ground: 2020 Kelly Bushing: 2025
Total Depth: 3700 Plug Back Total Depth: 3670
Amount of Surface Pipe Set and Cemented at: 207 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1302
feet depth to: surface w/ 125

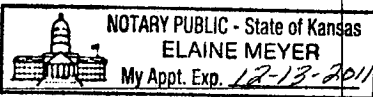
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 17000 ppm Fluid volume: 1000 bbls
Dewatering method used: Evaporate
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

A142-Dig 2/19/10

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 W. Schumann
Title: Operations Manager Date: 1/3/2010
Subscribed and sworn to before me this 3rd 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 04 2010

KCC WICHITA

Side Two

Operator Name: Carmen Schmitt, Inc Lease Name: Dorr Well #: 709
 Sec. 20 Twp. 19 S. R. 16 East West County: Rooks

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 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:	<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>Heebner</td> <td>3112</td> <td>-1087</td> </tr> <tr> <td>Base Kansas City</td> <td>3499</td> <td>-1374</td> </tr> <tr> <td>Arbuckle</td> <td>3483</td> <td>-1458</td> </tr> </table>	Name	Top	Datum	Heebner	3112	-1087	Base Kansas City	3499	-1374	Arbuckle	3483	-1458
Name	Top	Datum											
Heebner	3112	-1087											
Base Kansas City	3499	-1374											
Arbuckle	3483	-1458											

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	207	Common	150	60/40 3%cc, 2% gel
Production	7.875	5.5	14	3557	SMD	125	20%cal seal

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
	Open Hole		

TUBING RECORD:	Size: <u>2.875</u>	Set At: <u>3538</u>	Packer At: <u>3538</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	---	--

RECEIVED

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

FEB 04 2010

KCC WICHITA

Carmen Schmitt Inc
P.O. BOX 47
Great Bend KS 67530
New Wealth Comes From the Land
620-793-5100

2/3/10

Kansas Corporation Commission

Re: ACO-1
Dorr # 709
NE NE SE SE 20-T9S-R16W
Rooks, Kansas

Please hold side two of this form confidential for 2 years.

If and when we are given the green flag to dispose of water into the #709 well, can you please notify us by email and/or fax at the address/number below?

Thank you,

Francis Hitschmann
Operations Manager
(620)793-5100 (office)
(620)793-5099 (fax)
(785)550-2702 (mobile)
francis@schmittinc.net

RECEIVED
FEB 04 2010
KCC WICHITA

ALLIED CEMENTING CO., LLC. 33693

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

SERVICE POINT:
Russell KS

DATE <u>1-11-10</u>	SEC. <u>20</u>	TWP. <u>9</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION	JOB START <u>8:30 pm</u>	JOB FINISH <u>9:00 pm</u>
LEASE <u>Dorr</u>		WELL # <u>709</u>		LOCATION <u>Hwy 281 + Hwy 18 Jct. 10 West</u>		COUNTY <u>Rooks</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				5 North 6 West south into			

CONTRACTOR Mallard Rig #1
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 207'
 CASING SIZE 8 5/8 23# DEPTH 207
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'

OWNER _____
 CEMENT AMOUNT ORDERED 150 60/40 3'-cc 2'-Gel

DISPLACEMENT 12.25 BBL
 EQUIPMENT _____

COMMON	<u>90</u>	@	<u>13.50</u>	<u>1215.00</u>
POZMIX	<u>60</u>	@	<u>7.55</u>	<u>453.00</u>
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>5</u>	@	<u>51.50</u>	<u>257.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>100</u>	@	<u>1.00</u>	<u>100.00</u>
MILEAGE	<u>.10/sk/mile</u>			<u>100.00</u>
TOTAL				<u>2186.25</u>

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

REMARKS:

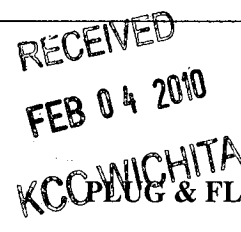
Est. Circulation
Mix 150 sk Cement
Displace w/ 12.25 Bbl H₂O
Cement Did Circulate!
Thank You!

CHARGE TO: Carmen Schmitt
 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 Lyle Juergensen
 SIGNATURE Lyle Juergensen

SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE 650.00
 EXTRA FOOTAGE @ _____
 MILEAGE 85 @ 7 175.00
 MANIFOLD @ _____
 @ _____
 @ _____



TOTAL 825.00
 SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT IF PAID IN 30 DAYS

TOTAL _____