

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33328  
Name: Lynn Packard  
Address 1: 8113 NW River Rd  
Address 2: \_\_\_\_\_  
City: Medicine Lodge State: Ks Zip: 67104 +  
Contact Person: Lynn Packard  
Phone: ( 620 ) 886-0135  
CONTRACTOR: License # 33549  
Name: Landmark Drilling  
Wellsite Geologist: Scott Alberg  
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.: \_\_\_\_\_  
11-27-09 12-6-09 12-7-09  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-2347-00-00  
Spot Description: S1/2-SW-SE-SW  
S1/2 SW SE SW Sec. 22 Twp. 31 S. R. 13  East  West  
140 Feet from  North /  South Line of Section  
1650 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Barber  
Lease Name: Packard Well #: 5  
Field Name: Nurse  
Producing Formation: Dry  
Elevation: Ground: 1571 Kelly Bushing: 1578  
Total Depth: 4510 Plug Back Total Depth: 4507  
Amount of Surface Pipe Set and Cemented at: 222 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 I nce  
(Data must be collected from the Reserve Pit) 2-10-10  
Chloride content: 13,000 ppm Fluid volume: 1,800 bbls  
Dewatering method used: Truck disposal  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Prairie Resources  
Lease Name: Packard SWD License No.: 31406  
Quarter SW Sec. 23 Twp. 31 S. R. 13  East  West  
County: Barber 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: Lynn Packard  
Title: Owner/operator Date: \_\_\_\_\_  
Subscribed and sworn to before me this 4<sup>th</sup> day of February,  
20 10.  
Notary Public: Loretta Boor  
Date Commission Expires: 12/07/2010

**KCC Office Use ONLY**

Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

**LORETTA BOOR**  
Notary Public - State of Kansas  
My Appt. Expires 12/07/2010

Operator Name: Lynn Packard Lease Name: Packard Well #: 5  
 Sec. 22 Twp. 31 S. R. 13  East  West County: Barber

**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  Yes  No  
 (Attach Additional Sheets)  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No  
 Electric Log Run  Yes  No  
 (Submit Copy)

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
Elgin	3370	(-1792)
Heb Sh	3525	(-1947)
Mississippi	4217	(-2639)
Viola	4467	(-2889)

List All E. Logs Run:

**Dual Porosity Micro / Dual Induction**

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	23	222	Class A common	99	66 Post mix

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
	Dry		

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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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____ _____

# ALLIED CEMENTING CO., LLC. 036937

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

SERVICE POINT:  
*Medicine Tobacco*

DATE <i>12-7-09</i>	SEC. <i>22</i>	TWP. <i>31S</i>	RANGE <i>13W</i>	CALLED OUT <i>1:30pm</i>	ON LOCATION <i>3:30pm</i>	JOB START <i>5:00pm</i>	JOB FINISH <i>6:00p.</i>
LEASE <i>Prsires</i>	WELL # <i>5</i>	LOCATION <i>Medicine Tobacco 8 West</i>			COUNTY <i>Betha</i>	STATE <i>KS</i>	
OLD OR <u>NEW</u> (Circle one)			<i>North cross CG, West 1/4 mile to R's</i>				

CONTRACTOR *L G N M S R K*

TYPE OF JOB *Rotary Plus*

HOLE SIZE *7 7/8* T.D.

CASING SIZE *8 3/4* DEPTH *227'*

TUBING SIZE DEPTH

DRILL PIPE *4 1/2* DEPTH *600'*

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT *3 bbls fresh water*

OWNER *Prsire Resources*

CEMENT AMOUNT ORDERED *150s, 60:40:4*

EQUIPMENT

PUMP TRUCK CEMENTER *Dgrin F.*

# *360-265* HELPER *Scott P.*

BULK TRUCK

# *364* DRIVER *Matt T.*

BULK TRUCK

# DRIVER

COMMON <i>Class A</i>	<i>90</i>	@ <i>15.45</i>	<i>1390.50</i>
POZMIX	<i>60</i>	@ <i>8.00</i>	<i>480.00</i>
GEL	<i>4</i>	@ <i>20.80</i>	<i>83.20</i>
CHLORIDE		@	
ASC		@	
HANDLING	<i>150</i>	@ <i>2.40</i>	<i>360.00</i>
MILEAGE	<i>150/5/1.10</i>		<i>75.00</i>
TOTAL			<i>2,388.70</i>

REMARKS:

*1st plug - 600' - Pump 8 1/2 bbls fresh water check, mix 60lbs 50% of cement, Dis place 3 bbls of fresh water.*

*2nd plug - 250' - Pump 3 bbls check, mix 50% of cement, Dis place 1/2 bbls*

*3rd plug - 60' - mix 90 lbs of cement*

*Ret hole - mix 30% of cement*

SERVICE

DEPTH OF JOB	<i>600'</i>		
PUMP TRUCK CHARGE			<i>1273.00</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>5</i>	@ <i>7.00</i>	<i>35.00</i>
MANIFOLD		@	
TOTAL			<i>1,308.00</i>

CHARGE TO: ~~Prsire Resources~~ *Lynn Packard*

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

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PLUG & FLOAT EQUIPMENT

<i>none</i>	@		
	@		
	@		
	@		
TOTAL			

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 Dicky A Collins*

SIGNATURE *x Dicky A Collins*

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAY: \_\_\_\_\_

# ALLIED CEMENTING CO., LLC. 043059

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

SERVICE POINT: Medicine Lodge

DATE <u>11-27-2009</u>	SEC <u>22</u>	TWP. <u>31</u>	RANGE <u>13</u>	CALLED OUT <u>5:30 PM</u>	ON LOCATION <u>4:30 PM</u>	JOB START <u>5:30 PM</u>	JOB FINISH <u>6:00 PM</u>
LEASE <u>Packard</u>	WELL # <u>S</u>	LOCATION <u>Medicine Lodge KS.</u>			COUNTY <u>Barber</u>	STATE <u>KS.</u>	

CONTRACTOR Landmark

TYPE OF JOB Surface

HOLE SIZE 12 5/8 T.D.

CASING SIZE 8 5/8 DEPTH 227'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 1/2 Bbls Fresh

OWNER Prarie Resources

CEMENT AMOUNT ORDERED 165 SX 60:40:2+3/1R

COMMON	<u>99</u>	@ <u>15.45</u>	<u>1529.55</u>
POZMIX	<u>66</u>	@ <u>8.00</u>	<u>528.00</u>
GEL	<u>3</u>	@ <u>20.80</u>	<u>62.40</u>
CHLORIDE	<u>6</u>	@ <u>58.20</u>	<u>349.20</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>165</u>	@ <u>2.40</u>	<u>396.00</u>
MILEAGE	<u>165 / .10 / 5</u>		<u>300.00</u>
			TOTAL <u>3165.15</u>

REMARKS:

Run 227' 8 5/8 casing  
break circulation  
Mix 165 SX 60:40:2+3/1R  
Release plug  
Displace with 13 1/2 Bbls  
freshwater  
Leave 15' cement in pipe + shut in

SERVICE

DEPTH OF JOB	<u>227'</u>		
PUMP TRUCK CHARGE		@ <u>1018.00</u>	
EXTRA FOOTAGE		@	
MILEAGE	<u>5</u>	@ <u>7.00</u>	<u>35.00</u>
MANIFOLD		@	
		@	
		@	
			TOTAL <u>1053.00</u>

CHARGE TO: Prarie Resources

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

<u>Wooden</u>	@ <u>N/C</u>	
	@	
	@	
	@	
	@	
TOTAL _____		

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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.

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SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAY \_\_\_\_\_

PRINTED NAME Del Collins

SIGNATURE [Signature]

MID-WEST OILFIELD SERVICE, LLC  
 PO BOX 150  
 MEDICINE LODGE, KS 67104-0150

# Invoice

Date	Invoice #
12/16/2009	3563

Bill To
PACKARD OIL & GAS, LLC 8113 NW RIVER ROAD MEDICINE LODGE, KS 67104-8144

Driver(s)
RON.SHAWN

Lease	Called By	Terms	Due Date	Ship Date
PACKARD 5	LYNN	Net 30	1/15/2010	12/9/2009

Item	Description	Qty	Rate	Amount
HAULING-150 BBL...	12/9 RON HAULED 300 BBL PIT WATER TO PACKARD SWD	4	67.00	268.00
HAULING-130 BBL...	12/9 SHAWN HAULED 260 BBL PIT WATER TO PACKARD SWD BARBER COUNTY	4	83.00	332.00
			6.30%	0.00

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Phone #	Fax #	<b>Balance Due</b>	\$600.00
DJ (620)886-1000 or CURTIS (620)886-2416	(620)886-3334		

Thank You For Your Business!  
 Mid-West Oilfield Service, LLC FEIN 26-3025301



**TRILOBITE  
TESTING, INC**

# DRILL STEM TEST REPORT

Lynn Packard  
8113 NW River Road  
Medicine Lodge, KS 67104  
ATTN: Scott Alberg

**PACKARD #5**  
**22-31s-13w-BA-KS**  
Job Ticket: 35762      DST#: 1  
Test Start: 2009.12.06 @ 13:33:00

## GENERAL INFORMATION:

Formation: **Mississippian**  
Deviated: **No Whipstock**      ft (KB)  
Time Tool Opened: 15:35:10  
Time Test Ended: 21:03:39  
Interval: **4322.00 ft (KB) To 4350.00 ft (KB) (TVD)**  
Total Depth: **4507.00 ft (KB) (TVD)**  
Hole Diameter: **7.88 inches** Hole Condition: **Good**

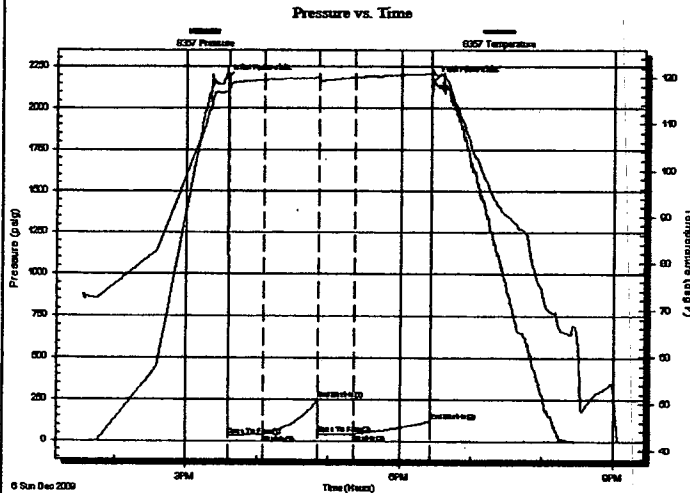
Test Type: **Conventional Straddle**  
Tester: **Jake Fahrenbruch**  
Unit No: **43**  
Reference Elevations: **1578.00 ft (KB)**  
**1573.00 ft (CF)**  
KB to GRVCF: **5.00 ft**

## Serial #: 8357

Press@RunDepth: **43.19 psig @**      ft (KB)  
Start Date: **2009.12.06**      End Date: **2009.12.06**  
Start Time: **13:33:00**      End Time: **21:03:39**

Capacity: **8000.00 psig**  
Last Calib.: **2009.12.06**  
Time On Btrr: **2009.12.06 @ 15:33:20**  
Time Off Btrr: **2009.12.06 @ 18:27:50**

**TEST COMMENT:** F: Weak blow, built to 2" in bucket, slowly died to .5".  
IS: No blow back.  
FF: No blow.  
FS: No blow back.



## PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2175.54	117.01	Initial Hydro-static
2	29.09	116.93	Open To Flow (1)
32	38.82	119.49	Shut-In(1)
78	250.08	119.99	End Shut-In(1)
78	40.46	119.79	Open To Flow (2)
108	43.19	120.02	Shut-In(2)
173	122.61	120.83	End Shut-In(2)
175	2170.97	120.98	Final Hydro-static

## Recovery

Length (ft)	Description	Volume (bbl)
50.00	Drilling Mud 100% m	0.25
0.00	Oil Spots In Tool	0.00

## Gas Rates

Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)

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