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FEB 24 2010

KCC WICHITA

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 # 33858
Name: J & J Operating, LLC.
Address 1: 10380 W. 179th Street
Address 2: _____
City: Bucyrus State: KS Zip: 66013 + _____
Contact Person: Patrick Everett
Phone: (913) 549-8442
CONTRACTOR: License # 32834
Name: JTC. Oil, CO.
Wellsite Geologist: _____
Purchaser: Pacer Energy Marketing, LLC.

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.: _____
9-15-2009 9-16-2009 10-05-2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21594-00-00
Spot Description: NE NE SE NW
NE NE SE NW Sec. 31 Twp. 13 S. R. 21 East West
1485 Feet from North / South Line of Section
2475 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Douglas
Lease Name: Schmidt Well #: 4
Field Name: Wildcat
Producing Formation: Squirrel
Elevation: Ground: 952 Kelly Bushing: NA
Total Depth: 830 Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 40
feet depth to: Surface w/ 6 sx cmt.

Drilling Fluid Management Plan Alt II NR 3-11-10
(Data must be collected from the Reserve Pit)
Chloride content: 1500-3000 ppm Fluid volume: 97 bbls
Dewatering method used: Used on lease
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: John [Signature]
Title: Agent Date: 02-23-2010
Subscribed and sworn to before me this 23 day of Febr.
20 10
Notary Public: [Signature]
Date Commission Expires: 9/2/12

NOTARY PUBLIC STATE OF KANSAS
PATRICK EVERETT
MY COMMISSION EXPIRES 9/2/12

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

Operator Name: J & J Operating, LLC. Lease Name: Schmidt Well #: 4
 Sec. 31 Twp. 13 S. R. 21 East West County: Douglas

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 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> List All E. Logs Run: Gamma Ray / Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum No Geologist at wellsite
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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	8 5/8	6 1/4	8	40		6	
Casing	5 5/8	2 7/8	6.5	812	Portland	136	50/50 poz

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
2	Perforated at 750.0 to 763.0	22 Perfs	

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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: <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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CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 20208
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/5/09	4028	Schmidt-S #4	NW 31	13	21	DG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
J+J Operating LLC			503	FREMAD		
MAILING ADDRESS			368	KENHAM		
10380 W 179th St			369	CHULAM		
CITY	STATE	ZIP CODE	237	ALAMAD		
Bucyrus	KS	66013				

JOB TYPE Longstring HOLE SIZE 6 HOLE DEPTH 630' CASING SIZE & WEIGHT 2 7/8" FUE
 CASING DEPTH 812' 0 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 4.72 DISPLACEMENT PSI _____ MIX PSI _____ RATE 43 PM

REMARKS: Check casing depth w/wireline. Mix + Pump 350# Premium
Gel Flush to condition hole. Mix + Pump 136 SKS 50/50
Poz Mix Cement. 2% Gel 5# Pheno Seal per sack. Cement
to surface. Flush Pump + lines clean. Displace 2 1/2"
rubber plug to casing TD w/ 4.72 BBL Fresh Water
Pressure to 750# PSI. Release pressure to Set
Float Valve. Shut in casing

ITC Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		870 ⁰⁰
5406	00-	MILEAGE Pump Truck		N/C
5402	512'	Casing footage		N/C
5407A	171.36	Ton Miles.		198 ²⁸
5502C	2 hrs	80 BBL Vac Truck		188 ⁰⁰
1124	133 gks	50/50 Poz Mix Cement		1230 ²⁵
1118B	579 #	Premium Gel		92 ⁶⁹
1107A	68 #	Pheno Seal		73 ⁴⁴
4402A	1	2 1/2" Rubber Plug		22 ⁰⁰
<u>WO # 231491</u>				
RECEIVED KANSAS CORPORATION COMMISSION				
			6.3%	SALES TAX
				ESTIMATED
				TOTAL
				893 ³⁷
				2764 ⁴⁸

Ravin 3737

FEB 24 2010

AUTHORIZATION [Signature]

TITLE
CONSERVATION DIVISION
WICHITA, KS

DATE _____