

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 9067
 Name: DaMar Resources, Inc.
 Address 1: P. O. Box 70
 Address 2: _____
 City: Hays State: KS Zip: 67601 + _____
 Contact Person: Curtis R. Longpine
 Phone: (785) 625-0020
 CONTRACTOR: License # 30606
 Name: Murfin Drilling Co., Inc.
 Wellsite Geologist: Jim Musgrove
 Purchaser: none
 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.: _____
11/28/09 12/03/09 12/23/09
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 051-25920-0000
 Spot Description: _____
NE SW SE Sec. 21 Twp. 13 S. R. 16 East West
410 Feet from North / South Line of Section
2010 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ellis
 Lease Name: Karlin Family Well #: 1
 Field Name: Air Base
 Producing Formation: _____
 Elevation: Ground: 1973' Kelly Bushing: 1978'
 Total Depth: 3559' Plug Back Total Depth: surface
 Amount of Surface Pipe Set and Cemented at: 220 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 AH I NR
 (Data must be collected from the Reserve Pit) 3-25-10
 Chloride content: 7000 ppm Fluid volume: 3000 bbls
 Dewatering method used: _____
 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: [Signature]
 Title: Vice President/Geologist Date: March 11, 2009
 Subscribed and sworn to before me this 11th day of MARCH
20 10
 Notary Public: [Signature]
 Date Commission Expires: 10-18-2012

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



MAR 19 2010
KCC WICHITA

Operator Name: DaMar Resources, Inc. Lease Name: Karlin Family Well #: 1
 Sec. 21 Twp. 13 S. R. 16 East West County: Ellis

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 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: By Log Tech Radiation Guard Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached geo report
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CASING RECORD <input 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#	220'	common	150	3% cc 2% gel
Production	7 7/8"	5 1/2"	14#	3557'	EA-2	130	Hal 1

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
4	3248' - 3252'	500 gal. acid	
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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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ALLIED CEMENTING CO., LLC. 33666

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

SERVICE POINT:
Russell KS

DATE <u>11-28-09</u>	SEC. <u>21</u>	TWP. <u>13</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30 pm</u>	JOB FINISH <u>8:00 pm</u>
Karlín Family LEASE		WELL # <u>1</u>	LOCATION <u>Walker KS West to Vincent</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			Rd <u>2 1/2 North East North East into</u>				

CONTRACTOR Murfin #16

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 220'

CASING SIZE 8 5/8 23 1/2 DEPTH 220'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 Bbl

OWNER _____

CEMENT AMOUNT ORDERED 150 com 3% cc 2% Gel

COMMON	<u>150</u>	@	<u>13⁵⁰</u>	<u>2025⁰⁰</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20²⁵</u>	<u>60⁷⁵</u>
CHLORIDE	<u>5</u>	@	<u>51⁵⁰</u>	<u>257⁵⁰</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING		@	<u>2²⁵</u>	<u>200⁰⁰</u>
MILEAGE				<u>200⁰⁰</u>
TOTAL				<u>2743²⁵</u>

EQUIPMENT

PUMP TRUCK # 417 CEMENTER John Roberts
HELPER Matt

BULK TRUCK # 378 DRIVER Alvin

BULK TRUCK # _____ DRIVER _____

REMARKS:

Est. Circulation

Mix 150 sk cement

Displace w/ 13 Bbl H2O

Cement Did Circulate!
Thank You!

CHARGE TO: Damar Resources

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 A

SIGNATURE Azy [Signature]

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>991⁰⁰</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>15</u>	@	<u>7</u>	<u>105⁰⁰</u>
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1096⁰⁰</u>

PLUG & FLOAT EQUIPMENT

_____	@		
_____	@		
_____	@		
_____	@		
_____	@		
TOTAL _____			

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

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QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3518

Date	Sec.	Twp.	Range	County	State	On Location	Finish
1-12-10	21	13	16	Ellis	KS		1:30 pm
Lease <i>Karlin Family</i>		Well No. <i>1</i>		Location <i>Walker 2 W 2 N to Air base</i>			
Contractor <i>Express Well Service</i>				Owner <i>E & N 3/4</i>			
Type Job <i>PTA</i>				To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size <i>7 7/8</i>		T.D.		Charge To <i>Damar</i>			
Csg. <i>52</i>		Depth		Street			
Tbg. Size		Depth		City State			
Drill Pipe		Depth		City State			
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg.		Shoe Joint		5 Hubs CEMENT used			
Press Max.		Minimum		Amount Ordered <i>250 @ 20 4% gel</i> 220			
Meas Line		Displace		Common <i>132 @ 10</i> 1386.00			
Perf.				Poz. Mix <i>88 @ 6</i> 572.00			
				Gel. <i>8 @ 17</i> 136.00			
				Calcium			
				Mills Hubs <i>5 @ 25.00</i> 125.00			
				Salt			
				Flowseal			
EQUIPMENT							
Pumptrk	No.	Cementor	<i>Brawlan</i>				
		Helper					
Bulktrk	No.	Driver	<i>Doug</i>				
		Driver					
Bulktrk	No.	Driver	<i>Dave</i>				
		Driver					
JOB SERVICES & REMARKS							
Pumptrk Charge <i>PTA</i>		<i>500.00</i>					
Mileage <i>17 @ 7.00</i>		<i>119.00</i>					
Footage							
		Total <i>619.00</i>		Handling <i>263 @ 2.00</i> 526.00			
Remarks:				Mileage <i>400.00</i>			
<i>pulled casing to 1115 mixed lot spot</i>				Pump Truck Charge <i>619.00</i>			
<i>50 sk w/ 2 Hubs</i>				FLOAT EQUIPMENT			
<i>pulled to 517 mixed</i>				Guide Shoe			
<i>150 sk + 3 Hubs +</i>				Centralizer			
<i>cin to surface</i>				Baskets			
<i>pulled casing out</i>				AFU Inserts			
<i>top off w/ 30 sk</i>				Rotating Head			
<i>Thanks</i>				Squeez Mainfold			
X Signature				117.61 Tax			
				Discount <i>(753.00)</i>			
				3128.61 Total Charge			

117.61 Tax
Discount (753.00)
3128.61 Total Charge

JOB LOG

SWIFT Services, Inc.

DATE 12-4-09 PAGE NO. 1
 TICKET NO. 116835

CUSTOMER Dennis Resources

WELL NO. #1

LEASE Karlins Family

JOB TYPE Cement Lining

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		TD 3558	DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING		
	1400					14 3/4"	5 1/2"		On location w/ F.E.
	1415								Ris changing over to run casing Start 5 1/2" 14 3/4" casing - to 3561' Insert Float Shoe w/ Auto-Fill Lock Down Baffle - 55 14' Cent. 1-3-5-7-9-11-13-60 Cmt Bxt. JTs #14 to 61 P.C. #61 collar @ 1092' Drop Fall-up Ball - 10ths out
	1540								Fin run casing - Tag
	1550								Start Cir & Rotate casing
	1620								Fin cir casing
			10						Plug RH 30 SKS MH-15SK
	1630	5	12				300		Pump 500 gal Mud Flush
		6	32				350		Pump 20 BBL KCl Flush
		4 1/2					250		Start 130 SKS EA-2 cmt
	1655						220		Fin cmt.
									Wash Pump & Lines
									Drop Latch Down Plug
	1700	8 1/2					350		Start Displ & Rotate casing
		7 1/2	55				300		stop Rotate & Slow rate
		7 3/4	75				400		Caught press
		6	80				500		
		5 1/2	86				650		
	1710		86 1/2				1500		Plug Down - Hold - Release & Hold
	1715								JTs Complete
									Washup & Rookup

Thanks Alan, Doug & Jeff D.

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MAR 19 2010

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