

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 # 34084  
Name: Brass Oil, Inc  
Address 1: 2920 Kensington Road  
Address 2: \_\_\_\_\_  
City: Lawrence State: Ks Zip: 66046 + 5451  
Contact Person: Randy Nuckolls  
Phone: (785) 865-4086  
CONTRACTOR: License # 33977  
Name: E.K. Energy  
Wellsite Geologist: Russel Rickerson  
Purchaser: High Sierra Crude Oil & Marketing, LLC  
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: Russell Rickerson dba Rickerson Oil  
Well Name: Trester #9  
Original Comp. Date: July 9, 2009 Original Total Depth: 1022  
\_\_\_\_ 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.: \_\_\_\_\_

July 2, 2009 July 6, 2009 July 9, 2009  
Spud Date or 10/22/09 Date Reached TD 10/22/09  
Recompletion Date per oper Completion Date or  
Recompletion Date

API No. 15 - 001-29917-00080  
Spot Description: E/2 NW 1/4  
SE NE NE NW Sec. 8 Twp. 24 S. R. 19  East  West  
495 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: Allen  
Lease Name: Trester Well #: 9C  
Field Name: Iola  
Producing Formation: Tucker  
Elevation: Ground: 1082 Kelly Bushing: \_\_\_\_\_  
Total Depth: 1022' Plug Back Total Depth: 1009'  
Amount of Surface Pipe Set and Cemented at: 20' 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.

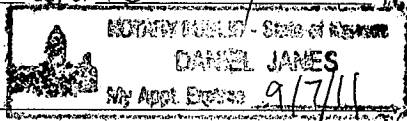
Drilling Fluid Management Plan OWWO - A14 II NR  
(Data must be collected from the Reserve Pit) 3-24-10  
Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
Dewatering method used: \_\_\_\_\_  
Location of fluid disposal if hauled offsite:  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ 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 2019, 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: Randy Nuckolls  
Title: President Date: 2/27/10

Subscribed and sworn to before me this 27<sup>th</sup> day of February  
20 10  
Notary Public: D. James  
Date Commission Expires: 9/7/11



**KCC Office Use ONLY**

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

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Operator Name: Brass Oil, Inc Lease Name: Trester Well #: 9C  
 Sec. 8 Twp. 24 S. R. 19  East  West County: Allen

**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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum See Attached
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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	9 7/8"	7"		20'		5	
Production	5 5/8"	2 7/8"		1,009		125	

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

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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 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: _____ _____
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**CASING MECHANICAL INTEGRITY TEST**

DOCKET # \_\_\_\_\_

Disposal  Enhanced Recovery: \_\_\_\_\_

\_\_\_\_\_, Sec 8, T 24 S, R 19 E/W

NW-9 P Repressuring   
 Flood   
 Tertiary

5115 Feet from South Section Line  
4785 Feet from East Section Line

Date injection started \_\_\_\_\_  
 API #15 (XX) - 29,662

Lease Truster Well # 9  
 County Allen

Operator: Rickerson Oil  
 Name & Address 7413 Pagent  
Wichita Ks. 67206

Operator License # 34684  
 Contact Person Jim Rickerson  
 Phone 620-763-4556

Max. Auth. Injection Press. \_\_\_\_\_ psi; Max. Inj. Rate \_\_\_\_\_ bbl/d;  
 If Dual Completion - Injection above production \_\_\_\_\_ Injection below production \_\_\_\_\_

Size	Conductor	Surface	Production	Liner	Size	Tubing
Set at _____	_____	<u>20'</u>	<u>2 7/8"</u>	_____	Set at _____	_____
Cement Top _____	_____	<u>circ</u>	<u>1008</u>	_____	Type _____	_____
" Bottom _____	_____	<u>20'</u>	<u>circ</u>	_____	_____	_____

DV/Perf. \_\_\_\_\_ TD (and plug back) \_\_\_\_\_ ft. depth  
 Packer type \_\_\_\_\_ Size \_\_\_\_\_ Set at \_\_\_\_\_  
 Zone of injection 1008 ft. to ft. Perf.  open hole  open hole

Type Mit: Pressure  Radioactive Tracer Survey  Temperature Survey

F Time: Start 20 Min. 40 Min. 60 Min.  
 I Pressures: 50 50 50 Set up 1 System Pres. during test \_\_\_\_\_  
 L Set up 2 Annular Pres. during test \_\_\_\_\_  
 D Set up 3 Fluid loss during test \_\_\_\_\_ bbls.  
 D  
 A  
 T  
 A

Tested: Casing  or Casing - Tubing Annulus

The bottom of the tested zone is shut in with Fluid Depression Test

Test Date 10/22/09 Using Midwest surveys Company's Equipment

The operator hereby certifies that the zone between 0 feet and 1008 feet was the zone tested  
Raymond J. Titl Signature Contractor Title

The results were Satisfactory , Marginal \_\_\_\_\_, Not Satisfactory \_\_\_\_\_  
 State Agent Clayton P. Titl Title P.I.R.T. Witness: Yes  No   
 REMARKS: F11 Was 923' from surface. 1008 - 923 = 85 x .43 = 37

Origin. Conservation Div.;  KDHE/T;  Dist. Office;  
 Computer Update

**POSTED**

KCC Form U-7 6/84

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Lone Jack Oil Company  
 509 East Walnut  
 Blue Mound, KS 66010

# Invoice

Date	Invoice #
7/7/2009	850

**Bill To**  
 Jim Rickerson  
 Box 3  
 Iola, KS 66749

P.O. No.                      Terms                      Project

Due on receipt

Quantity	Description	Rate	Amount
	Trestor Lease		
1	7/6/09, Well #9, circulated 125 sacks of cement to surface, pumped 220 gallons of water behind cement and shut in.	600.00	600.00T
	Sales Tax	6.30%	37.80

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*Pd together  
 1073.63*

*Pd 7/18  
 CK 1314*

Thank you for your business.

**Total**                      \$637.80

**BRASS CONCRETE PRODUCTS, INC.**  
 BOX 664  
 802 N. INDUSTRIAL RD.  
 IOLA, KS 66749

**INVOICE**  
 Invoice Number: 24116-17,24166-67  
 Invoice Date: Jul 9, 2009  
 Page: 1  
 Duplicate

Voice: 620-365-5588  
 Fax:

**Bill To:**  
 CASH FOR C.O.D.'S  
 802 N. INDUSTRIAL RD.  
 IOLA, KS 66749

**Ship to:**  
 BRASS OIL CO., INC.  
 7413 PAGENT  
 WICHITA, KS 67206

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CASH/C.O.D.	BRASWELL#TRESTOR9,11	C.O.D.	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	TRUCK		7/9/09

Quantity	Item	Description	Unit Price	Amount
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/6/09 TICKET#24116	7.60	456.00
1.25	TRUCKING	TRUCKING CHARGE 7/6/09 TICKET#24116	50.00	62.50
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/6/09 TICKET#24117	7.60	456.00
55.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/9/09 TICKET#24166	7.60	418.00
1.25	TRUCKING	TRUCKING CHARGE 7/9/09 TICKET#24166	50.00	62.50
55.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 7/9/09 TICKET#24167	7.60	418.00

PAID 7/15/09  
 1328

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Subtotal	1,873.00
Sales Tax	118.00
Total Invoice Amount	1,991.00
Payment/Credit Applied	
<b>TOTAL</b>	<b>1,991.00</b>

Check/Credit Memo No: