

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 # 33830

Name: Hewitt Energy Group Inc

Address 1: 15 W. South Temple Suite 1050

Address 2: \_\_\_\_\_

City: Salt Lake City State: UT Zip: 84101 + \_\_\_\_\_

Contact Person: Doug Hewitt Jr

Phone: ( 801 ) 519-8500

CONTRACTOR: License # 3004

Name: Gressel Oil

Wellsite Geologist: \_\_\_\_\_

Purchaser: NCRA

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: Driscoll

Well Name: Boxberger A3

Original Comp. Date: 8/24/81 Original Total Depth: 3360'

\_\_\_\_ 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.: \_\_\_\_\_

1/21/2010 3/18/2010 3/19/2010

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 167-21763-00-01

Spot Description: \_\_\_\_\_

SW NW NW \_\_\_\_\_ Sec. 32 Twp. 13 S. R. 14  East  West

4290' Feet from  North /  South Line of Section

4290' Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Russell

Lease Name: Boxberger Well #: A #3

Field Name: Gorham

Producing Formation: \_\_\_\_\_

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: 1877'

Total Depth: 3432' Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: \_\_\_\_\_ 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 OWNO- AIT I NR2  
(Data must be collected from the Reserve Pit) 4-16-10

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 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: \_\_\_\_\_

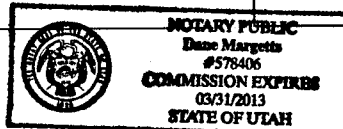
Title: PROSPECT Date: 3/19/2010

Subscribed and sworn to before me this 19 day of MARCH,

20 10.

Notary Public: DM

Date Commission Expires: 03/31/2013



**KCC Office Use ONLY**

Letter of Confidentiality Received

If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

**RECEIVED**

**MAR 22 2010**

**KCC WICHITA**

Side Two

Operator Name: Hewitt Energy Group Inc Lease Name: Boxberger Well #: A #3  
 Sec. 32 Twp. 13 S. R. 14  East  West County: Russell

**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 type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input checked="" 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"		529'		n/a	
Production		5 1/2"		3359'		150	

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

TUBING RECORD: Size: <u>3 1/2</u> Set At: <u>3300'</u> Packer At: <u>3300'</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: <div style="text-align: center; border: 1px solid black; padding: 2px;">RECEIVED</div> <div style="text-align: center; border: 1px solid black; padding: 2px;">MAR 22 2010</div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA



FIELD ORDER N° C 35837

BOX 438 • HAYSVILLE, KANSAS 67060  
316-524-1225

DATE 2-10-10 20\_\_

IS AUTHORIZED BY: Hewitt Energy (NAME OF CUSTOMER)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

To Treat Well As Follows: Lease Boxburse Well No. A-3 Customer Order No. \_\_\_\_\_

Sec. Twp. \_\_\_\_\_ Range \_\_\_\_\_ County Russell State ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED \_\_\_\_\_ By \_\_\_\_\_ Agent

Well Owner or Operator

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	40	mileage pickup	1. <sup>00</sup> /	40. <sup>00</sup>
	40	mileage pump truck	3. <sup>00</sup>	120. <sup>00</sup>
	1	Pump Charge		900. <sup>00</sup>
	350	60/40 per.	9. <sup>25</sup> /	3273. <sup>50</sup>
	5	Fluid Loss C-20L	35. <sup>00</sup>	175. <sup>00</sup>
	1	5 1/2' packer rental		750. <sup>00</sup>
	80	mileage tool man R.T.	1. <sup>00</sup> /	80. <sup>00</sup>
RECEIVED				
MAR 22 2010				
KCC WICHITA				
	350	Bulk Charge	1. <sup>25</sup> /	437. <sup>50</sup>
		Bulk Truck Miles 15.4 TX 40m = 616 Tm x 1.10/	1.10/	677. <sup>60</sup>
		Process License Fee on _____ Gallons		
TOTAL BILLING				6453. <sup>00</sup>

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Nathan W.

Station G.R.

Aaron  
Well Owner, Operator or Agent

Remarks \_\_\_\_\_

NET 30 DAYS



TREATMENT REPORT

Acid Stage No. ....

Date 2-10-10 District G.B. P. O. No. C35837  
 Company Havitt Energy  
 Well Name & No. Boxhuser A-3  
 Location \_\_\_\_\_ Field \_\_\_\_\_  
 County Russell State KS  
 Casing: Size 5 1/2" Type & Wt. \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Formation: \_\_\_\_\_ Perf. \_\_\_\_\_ to \_\_\_\_\_  
 Liner: Size \_\_\_\_\_ Type & Wt. \_\_\_\_\_ Top at \_\_\_\_\_ ft. Bottom at \_\_\_\_\_ ft.  
 Cemented: Yes/No \_\_\_\_\_ Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Tubing: Size & Wt. 2 1/2" Spung at \_\_\_\_\_ ft.  
 Perforated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Iron Hole Size \_\_\_\_\_ T. I. \_\_\_\_\_ ft. P. I. to \_\_\_\_\_ ft.

Type Treatment: Amt. \_\_\_\_\_ Type Fluid \_\_\_\_\_ Sand Size \_\_\_\_\_ Pounds of Sand \_\_\_\_\_  
 Shown: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Flush \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Treated from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. No. ft. \_\_\_\_\_  
 Actual Volume of Oil/Water to Lead Hole: \_\_\_\_\_ Bbl./Gal. \_\_\_\_\_  
 Pumps Trucks: No. Used: Std. 370 Sp. \_\_\_\_\_ Twin \_\_\_\_\_  
 Auxiliary Equipment 377  
 Packer: \_\_\_\_\_ Set at \_\_\_\_\_ ft.  
 Auxiliary Tools \_\_\_\_\_  
 Hoisting or Sealing Materials: Type \_\_\_\_\_ (Inch) \_\_\_\_\_ (Inch)

Company Representative Acion Treater Nathan W.

TIME a.m. (P.M.)	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
12:00	2 1/2"	5 1/2"		On location. Rig up.
				Packer @ 2107'
				Perfs @ 2310'-12'
				Load Annulus w/ 20 bbls water.
				Tie on tubing Take inj. rate @
				3 bpm @ 300#
				Mix 35 sts. 60/wt oz w/ fluid loss.
				Mix 40 sts. 60/wt oz. Total = 75 sts.
				Displace w/ 21 bbls. wash up. wait 30 min
				Tubing on vacuum.
				Mix 50 sts. 60/wt oz Displace w/ 21 bbls.
				wait 30 min. Released. Stayed in place
				Packer @ 2598'
				Perfs @ 2780'-28' - 2946'-64'
				Load Annulus.
				Take inj rate @ 3 bpm @ 250#
				Mix 225 sts. Displace w/ 17 1/2 bbls.
3:30				@ 1/2 bpm @ 150# Shut in.
				Thank you!
				Nathan W.

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