

RECEIVED
KANSAS CORPORATION COMMISSION

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

MAR 17 2010

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5056
Name: F.G. Holl Company, L.L.C.
Address 1: 9431 E. Central, Suite 100
Address 2: _____
City: Wichita State: KS Zip: 67206 + _____
Contact Person: Franklin R. Greenbaum
Phone: (316) 684-8481, Ext. 206
CONTRACTOR: License # 5929
Name: Duke Drilling Company Inc.
Wellsite Geologist: Rene Husted
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: F.G. Holl Company, L.L.C.
Well Name: ESSMILLER 1-36
Original Comp. Date: 02/18/2009 Original Total Depth: 3650'
____ 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.: _____
RU: 01/27/2010 11/21/2008 RD: 02/01/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 009-25,289-0001
Spot Description: 50' West of
E2_NW_SW_SW Sec. 36 Twp. 19 S. R. 14 East West
990 Feet from North / South Line of Section
610 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: ESSMILLER "OWWO" Well #: 1-36
Field Name: Caskey
Producing Formation: Toronto & Lansing-Kansas City
Elevation: Ground: 1867' Kelly Bushing: 1875'
Total Depth: 3650' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 779 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- Alt I NR
(Data must be collected from the Reserve Pit) 4-20-10
Chloride content: 48,000 ppm Fluid volume: 500 bbls
Dewatering method used: No free fluids
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: Franklin R. Greenbaum
Title: Exploration Manager Date: 03/11/2010

Subscribed and sworn to before me this 11th day of March 2010
State of Kansas; Sedgewick County
Notary Public: Betty H. Spotswood

Date Commission Expires: 04/30/2010

Notary Public - State of Kansas
BETTY H. SPOTSWOOD
My Appointment Expires 4/30/2010

KCC Office Use ONLY

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

Operator Name: F.G. Holl Company, L.L.C. Lease Name: ESSMILLER "OWWO" Well #: 1-36
 Sec. 36 Twp. 19 S. R. 14 East West County: Barton

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 checked="" type="checkbox"/> Yes <input 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: DIL/CDL/CNL BHC S/CPI/Resistivity	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Same original ACO-1
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CASING RECORD <input checked="" 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	12-1/4"	8-5/8"	23#	779'	A-Con & Common	175 & 150	
Production	7-7/8"	4-1/2"	10.5#	3649'	AA-2	175 & 75	

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 <i>(Amount and Kind of Material Used)</i>	Depth
4 SPF	3355' - 3361' LKC	500 gal 10% mira acid & 1500 gal nefe acid	
4 SPF	3214' - 3217' LKC	500 gal 10% nefe acid	
4 SPF	3117' - 3122' Toronto	1000 gal 15% nefe acid & 1000 gal 15% nefe acid	
	3255' - 3378' 1st completion perfs (February, 2009)		

TUBING RECORD: Size: <u>2-3/8"</u>		Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>1/26/2010</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. <u>13</u>	Gas Mcf	Water Bbls. <u>18</u>	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 checked="" type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3117' - 3122' Toronto</u> <u>3214' - 3378' OA LKC</u>
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