

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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Form AGO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33551
Name: Steve Jackson dba S & K Oil Company
Address 1: PO Box 184
Address 2: _____
City: Blue Mound State: Ks Zip: 66010
Contact Person: Steve Jackson
Phone: (913) 756-2622
CONTRACTOR: License # 31519
Name: Leland Jackson dba Lone Jack Oil Company
Wellsite Geologist: _____

Purchaser: _____
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.: _____
09-05-09 10-1-09 09-06-09 10-8-09 11-09-09
Spud Date of Date Reached TD Completion Date or
Recompletion Date per oper Recompletion Date

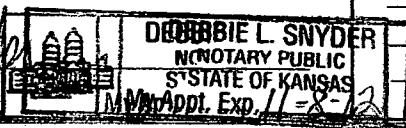
API No. 15 - 011-23659-00-00
Spot Description: SW 1/4 18-25-22E
SE SWNE SW Sec. 18 Twp. 25 S. R. 22 East West
NE NW SE SW
1455 1125 Feet from North / South Line of Section
3465 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Bourbon
Lease Name: Swisher Well #: 1516
Field Name: Bronson/Xenia
Producing Formation: Bartlesville
Elevation: Ground: 1054 Kelly Bushing: _____
Total Depth: 730 Plug Back Total Depth: 721
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: 0
feet depth to: 20 w/ 5 sx cmt.

Drilling Fluid Management Plan AH II NVR 4-27-10
(Data must be collected from the Reserve Pit)
Chloride content: None ppm Fluid volume: 30 bbls
Dewatering method used: Pumped in truck back to injectic
Location of fluid disposal if hauled offsite: _____
Operator Name: S & K Oil Company
Lease Name: Swisher License No.: 33551
Quarter SW Sec. 18 Twp. 25 S. R. 22 East West
County: Bourbon 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: owner Date: 11-24-09
Subscribed and sworn to before me this 24 day of November,
09.
Notary Public: Debbie L. Snyder
Date Commission Expires: 11-8-12



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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Operator Name: Steve Jackson dba S & K Oil Comp Lease Name: Swisher

Well #: 1516

Sec. 18 Twp. 25 S. R. 22 East West

County: Bourbon

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Squirrel</u>	<u>644</u> <u>647</u>
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Bartlesville</u>	<u>654</u> <u>662</u>
		<u>Bartlesvill</u>	<u>693</u> <u>708</u>

List All E. Logs Run: ACO1 REC'D W/ 1 LOG:
GR/NEUTRON/CCL

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CASING RECORD New Used

CONSERVATION DIVISION
WICHITA, KS

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	6 1/4	6	20	One	5	None
Casing	5 5/8	2 7/8	6	721	One	95	None

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
Two	460 to 470	8 Sacks	470
Two	642 to 647	5 Sacks	647
Two	652 to 662	7 Sacks	662
Two	694 to 700	6 Sacks	700
Two	701 to 707	6 Sacks	707

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. _____ Producing Method: Flowing Pumping Gas Lift 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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERFERED RECEIVED KANSAS CORPORATION COMMISSION APR 21 2010
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Lone Jack Oil Company
Blue Mound, KS
1-913-756-2307 1-620-363-0492

Lease: Swisher Operator: S & K Oil API # 15-011-23659-00-00
 Contractor: Lone Jack Oil Company Date Started: 10/7/09 Date Completed: 10/15/09
 Total Depth: 731 feet Well # 16 Hole Size: 5 5/8
 Surface Pipe: 20'6 1/4 Surface Bit: 9 7/8 Sacks of Cement: 5
 Depth of Seat Nipple: _____ Rag Packer At: _____
 Length and Size of Casing: _____ 721' - 2 7/8 Sacks of Cement: 90
 Legal Description: NE NW SE SW Sec: 18 Twp: 25S Range: 22E County: Bourbon

Thickness	Depth	Type of Formation	Thickness	Depth	Type of Formation
2	2	Top Soil	10	706	Oil Sand (Good Bleed)
2	4	Loose Rock	5	711	Black Sand & Shale
7	11	Lime	20	731	Shale
2	13	Shale		731	TD
2	15	Lime			
9	24	Shale			
29	53	Lime			
3	56	Shale			
4	60	Lime			
6	66	Shale			
28	94	Lime			
3	97	Shale			
11	108	Lime			
32	140	Shale			
5	145	Lime			
99	244	Shale			
6	250	Red Bed			
2	252	Lime			
5	257	Shale			
12	269	Lime			
18	287	Shale			
4	291	Red Bed			
63	354	Shale			
21	375	Lime			
45	420	Shale			
16	436	Lime			
25	461	Shale			
1	462	Oil Sand (Shaley)			
3	465	Oil Sand			
1	466	Oil Sand (Shaley)			
91	557	Shale (Sandy)			
1	558	Lime			
87	645	Shale			
2	647	Oil Sand (Shaley)			
3	650	Oil Sand (Good Bleed)			
8	658	Oil Sand (Saturated)			
38	696	Shale			

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