

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33858
 Name: J & J Operating, LLC.
 Address 1: 10380 W. 179th Street
 Address 2: _____
 City: Bucyrus State: KS Zip: 66013 + _____
 Contact Person: Patrick Everett
 Phone: (913) 549-8442
 CONTRACTOR: License # 32834
 Name: JTC Oil, Inc.
 Wellsite Geologist: NA
 Purchaser: Pacer Energy Marketing
 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.: _____

<u>1/26/2010</u>	<u>1/27/2010</u>	<u>2/4/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 045-21616-00-00
 Spot Description: S/2 SW NE
S2 SW NE Sec. 31 Twp. 13 S. R. 21 East West
2970 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Douglas
 Lease Name: West Kelco Well #: I-7
 Field Name: Wildcat
 Producing Formation: Squirrel
 Elevation: Ground: 918 Kelly Bushing: NA
 Total Depth: 720 Plug Back Total Depth: NA
 Amount of Surface Pipe Set and Cemented at: 40 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: _____ Feet
 If Alternate II completion, cement circulated from: 40
 feet depth to: Surface w/ 5 sx cmt.

Drilling Fluid Management Plan AH II NR 4-27-10
 (Data must be collected from the Reserve Pit)
 Chloride content: 1500-3000 ppm Fluid volume: 105 bbls
 Dewatering method used: Used on Lease
 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: Authorized Agent Date: 4/19/10
 Subscribed and sworn to before me this 19 day of April,
20 10
 Notary Public: [Signature]
 Date Commission Expires: 9/2/12



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
APR 22 2010
CONSERVATION DIVISION
WICHITA, KS

Operator Name: J & J Operating, LLC. Lease Name: West Kelco Well #: I-7
 Sec. 31 Twp. 13 S. R. 21 East West County: Douglas

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray / Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ No Geologist at well site
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------

CASING RECORD <input checked="" 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	8 5/8	6 1/4	8	40	Portland	5	
Longstring	5 5/8	2 7/8	6.5	714	Portland	125	50/50 POZ

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
21 Shots	Perforated at 687.0 to 697.0	2" DML RTG 180 Phase	

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: _____ _____
-------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
KANSAS CORPORATION COMMISSION
APR 22 2010
CONSERVATION DIVISION
WICHITA, KS

CASING MECHANICAL INTEGRITY TEST

DOCKET # _____

Disposal Enhanced Recovery:

S2 SW NE, Sec 31, T 13 S, R 21 EW

NW-ND

Repressuring
Flood
Tertiary

2970 Feet from South Section Line
1980 Feet from East Section Line

Date injection started _____
API #15 - 045 - 21616

Lease West Kelco Well # I-7
County Douglas

Operator: J+J Operating, LLC
Name & Address 10380 W. 179th St.
Bucyrus, KS 66013

Operator License # 33858
Contact Person Jim Loeffelbein
Phone 913-709-0219

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____
Conductor _____ Surface _____ Production _____ Liner _____ Tubing _____
Size _____ Set at _____ Size _____
Cement Top _____ 40' _____ 715' _____ Set at _____
" Bottom _____ 0 _____ 0 _____ Type _____
DV/Perf. _____ TD (and plug back) _____ 720 _____ ft. depth
Packer type _____ Size _____ Set at _____
Zone of injection _____ ft. to ft. _____ Perf. or open hole _____

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

F I E L D D A T A
Time: Start 10 Min. 20 Min. 30 Min.
Pressures: 800 800 800 Set up 1 | System Pres. during test _____
Set up 2 | Annular Pres. during test _____
Set up 3 | Fluid loss during test _____ bbls.

Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with Rubber Plug

Test Date 2-4-10 Using Consolidated Company's Equipment

The operator hereby certifies that the zone between 0 feet and 715 feet was the zone tested
Signature [Signature] Title Agent

The results were Satisfactory , Marginal _____, Not Satisfactory _____

State Agent Taylor C. Horvath Title Perit # Witness: Yes _____ No

REMARKS: Well not perforated.

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

Computer Update

RECEIVED
KANSAS CORPORATION COMMISSION

KCC Form U-7 6/84

APR 22 2010

CONSERVATION DIVISION
WICHITA, KS



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER _____
LOCATION Ottawa KS
FOREMAN Fred Mader

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
2/4/10	4028	W Kelco # J-7	N 20 E 31	13	21	DG
CUSTOMER <u>J + J Operating LLC</u>			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS <u>10380 W 179th</u>			<u>506 Fred</u>			
CITY STATE ZIP CODE <u>Bucyrus KS 66013</u>			<u>368 Ken</u>			
			<u>369 Chuck</u>			
			<u>510 Jason</u>			

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 720' CASING SIZE & WEIGHT 2 7/8 10RB
 CASING DEPTH 714' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 4.15 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Chuck casing depth w/ wireline. Mix + Pump 300# Premium Gel flush. Mix + Pump 125 sks 50/50 Poz Mix Cement 2 1/2" Gel 1/2" Pheno Seal per sack. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber plug to casing ID w/ 4.15 BBL Fresh Water. Pressure to 700# PSI. Hold pressure for 30 min MIT. Release pressure to set float valve. Shut in casing

JTC Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Cement Pump</u>		900 ⁰⁰
5406	30 mi	MILEAGE <u>Pump Truck</u>		106 ⁵⁰
5402	714'	Casing footage		N/C
5407	Minimum	Turn Miles		305 ⁰⁰
5502C	3hrs	80 BBL Vac Truck		288 ⁰⁰
1124	118 sks	50/50 Poz Mix Cement		1126 ⁹⁰
1118B	510 gals	Premium Gel		86 ⁷⁰
1107A	63 #	Pheno Seal		70 ⁵⁰
4402	1	2 1/2" Rubber Plug		23 ⁰⁰
RECEIVED KANSAS CORPORATION COMMISSION				
APR 22 2010				
CONSERVATION DIVISION WICHITA, KS				
<u>W/O # 232914</u>				
				6.3%
				SALES TAX
				ESTIMATED TOTAL
				82 ⁹⁵
				2989 ⁰¹

Ravin 3737

AUTHORIZATION

D. L.

TITLE

DATE