

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3830
Name: AX&P, Inc.
Address: P.O. Box 1176
City/State/Zip: Independence, KS 67301
Purchaser: Pacer
Operator Contact Person: J. J. Hanke
Phone: (620) 325-5212
Contractor: Name: Patrick Tubbs
License: 33079
Wellsite Geologist: J.J. Hanke
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 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./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____
11/1/09 11/20/09 12/10/09
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 205-278070000
County: Wilson
NW SW Sec. 29 Twp. 30 S. R. 16 East West
1610 feet from (S) N (circle one) Line of Section
4620 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Unit 1- Wolfe West Well #: WW#31C
Field Name: Neodesha
Producing Formation: Neodesha Sand
Elevation: Ground: 785' Kelly Bushing: _____
Total Depth: 840' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 35 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 837
feet depth to surface w/ 100 sx cmt.

Drilling Fluid Management Plan AH II NR 4-27-10
(Data must be collected from the Reserve Pit)
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: [Signature]
Title: PTB Date: 9/19/10
Subscribed and sworn to before me this 19 day of April
20 10.
Notary Public: Ashley Blair
Date Commission Expires: 3/16/2013

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

ASHLEY BLAIR
Notary Public - State of Kansas
My Appt. Exp. 3/16/13

CONSERVATION DIVISION
WICHITA, KS.

Operator Name: AX&P, Inc. Lease Name: Unit 1 Wolfe West Well #: NW 31C
 Sec. 29 Twp. 30 S. R. 16 East West County: Wilson

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: <p style="text-align: center;">Gamma Ray - Neutron</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Oswego</td> <td>600'</td> <td></td> </tr> <tr> <td>Neodesha Sd.</td> <td>790'</td> <td></td> </tr> </table>	Name	Top	Datum	Oswego	600'		Neodesha Sd.	790'	
Name	Top	Datum								
Oswego	600'									
Neodesha Sd.	790'									

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	11"	6 5/8"		35'	Portl.	8	none
Production	5 1/8"	2 7/8"	6.5'	837'	Portp.	100	2% gel

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
1	Neodesha Sand 807-17'	Acid / gel frac	807'

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 12-12-09	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	5	3	30		37

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 23793

LOCATION EUREKA

FOREMAN Kevin McCoy

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-20-09	1124	WOLF West unit 1 WWSIC	29	305	16E	WILSON
CUSTOMER <u>AX & P</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 1176</u>			445	Justin		
CITY <u>Independence</u>			543	Dave		
STATE <u>KS</u>		ZIP CODE <u>67301</u>				

JOB TYPE Longstring HOLE SIZE 5 5/8 HOLE DEPTH 841 CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING 2 7/8 838' OTHER _____
 SLURRY WEIGHT 13.6* SLURRY VOL 22 BBL WATER gal/sk 6.5 CEMENT LEFT in CASING 0'
 DISPLACEMENT 5 BBL DISPLACEMENT PSI 700 MAX PSI 1100 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 2 7/8 Tubing. BREAK Circulation w/ 10 BBL fresh water. Mixed 100 sks class "A" Cement w/ 1% CaCl2, 2% Gel @ 13.6*/gal. Shut down. Wash out Pump & Lines. Drop 2 Plugs. Displace w/ 5 BBL fresh water @ 1/2 BBL/min. FINAL Pumping Pressure 700 psi. Bump Plugs to 1100 psi. Shut Tubing in @ 1100 psi. Good Cement Returns to Surface = 5 BBL Slurry to Pit. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	870.00	870.00
5406	60	MILEAGE	3.45	207.00
1104S	100 sks	CLASS "A" Cement	12.70	1270.00
1102	100 *	CaCl2 1%	.71 *	71.00
1118 A	200 *	Gel 2%	.16 *	32.00
5407 A	4.7 TONS	Ton Mileage Bulk Truck	1.16	327.12
4402	2	2 7/8 Top Rubber Plugs	22.00	44.00
RECEIVED KANSAS CORPORATION COMMISSION APR 22 2010 COMPLETED BY WICHITA, KS				
		Sub Total		2821.12
		SALES TAX 6.3%		89.27
		ESTIMATED TOTAL		2910.39

Ravin 3737

AUTHORIZATION Witnessed By JJ

TITLE owner

DATE _____

THANK YOU
232011