

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 ☐ SIOW ☐ 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. _____
1/20/10 2/2/10 2/25/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

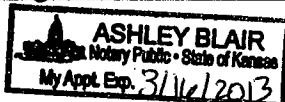
API No. 15 - 205-27817-0000
County: Wilson
SW SW Sec 29 Twp. 30 S. R. 16 ☒ East ☐ West
1280 feet from (S) N (circle one) Line of Section
4340 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Unit 1- Wolfe West Well #: WW#32D
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 Alt 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: President Date: 4/19/10
Subscribed and sworn to before me this 19 day of April,
2010.
Notary Public: Ashley Blair
Date Commission Expires: 3/16/13



KCC Office Use ONLY	
<input checked="" type="checkbox"/> N	Letter of Confidentiality Received
<input checked="" type="checkbox"/>	If Denied, Yes <input type="checkbox"/> Date: _____
<input checked="" type="checkbox"/>	Wireline Log Received
<input type="checkbox"/>	Geologist Report Received
<input type="checkbox"/>	UIC Distribution

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APR 22 2010

CONFIDENTIAL - DIVISION
WICHITA

Operator Name: AX&P, Inc. Lease Name: Unit 1 Wolfe West Well #: WW#32D
 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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: <div style="text-align: center;">Gamma Ray - Neutron</div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <div style="display: flex; justify-content: space-between;"> Name Top Datum </div> <div style="margin-top: 20px;"> <div style="display: flex; justify-content: space-between;"> Oswego 600' </div> <div style="display: flex; justify-content: space-between;"> Neodesha Sd. 790' </div> </div>
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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'	P0rtp.	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	not perf. not fraced	

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. not started		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	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Solid <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	RECEIVED KANSAS CORPORATION COMMISSION <div style="text-align: right;">APR 22 2010</div>

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date

1/22/2010

Invoice #

A-44761

Cement Treatment Report

AX&P, Inc.
20147 200 Road
Neodesha, KS 66757

- (x) Landed Plug on Bottom at 500 PSI
(x) Shut in Pressure 500
(x) Good Cement Returns
() Topped off well with _____ sacks
() Set Float Shoe - shut it

TYPE OF TREATMENT: Production Casing
HOLE SIZE: 5 1/8"
TOTAL DEPTH: 840

Well Name	Terms	Due Date			
Wolfe West	Net 15 days	2/21/2010			
Service or Product		Qty	Per Foot Pricing/Unit Pricing	Amount	
Run and cement 2 7/8"		836	2.50	2,090.00	
Sales Tax			6.30%	0.00	
<div>#WW #32D Unit #1 Wolfe West Wilson County Sec: 29 Twn: 30 Rge: 16 API:</div>					

Hooked onto 2 7/8" casing. Established circulation with 5 barrels of water. 1 GEL.
METSO, COTTONSEED ahead, blended 2% gel, dropped rubber plug, and pumped 5
barrels of water

Total \$2,090.00

Payments/Credits \$0.00

Balance Due \$2,090.00

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WICHITA, KS