

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, LLC.
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: _____
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.: _____

12/08/09	12/10/09	1/28/10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

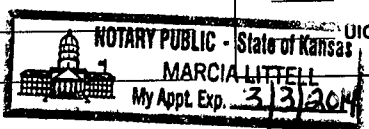
API No. 15 - 045-21611-00-00
Spot Description: SE NE SE SE
SE NE SE SE Sec. 24 Twp. 13 S. R. 20 East West
825 Feet from North / South Line of Section
165 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Douglas
Lease Name: Bland Well #: 7
Field Name: Wildcat
Producing Formation: Squirrel
Elevation: Ground: 947 Kelly Bushing: NA
Total Depth: 800 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 40 42 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 42
feet depth to: Surface w/ 12 sx cmt.

Drilling Fluid Management Plan AH II NR 5-7-10
(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: _____
Title: Authorized Agent Date: 4/29/10
Subscribed and sworn to before me this 29 day of April,
20 10.
Notary Public: Marcia Littell
Date Commission Expires: 3/3/2014

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
RECEIVED
MAY 03 2010
KCC WICHITA



Operator Name: J & J Operating, LLC Lease Name: Bland Well #: 7
 Sec. 24 Twp. 13 S. R. 20 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	42	Portland	12	
Longstring	5 5/8	2 7/8	6.5	777	Portland	124	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
2	Perforated at 728.0 to 738.0	Shot 2" DML RTG	

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 Bbbs. _____	Gas Mcf _____	Water Bbbs. _____ 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
 MAY 03 2010
 KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 22524
LOCATION Ottawa KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/22/09	4028	Bland #7	SE 24	13	20	DG
CUSTOMER J+J Operating LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 10380 W 179th			506	Fred		
CITY Bucyrus	STATE KS	ZIP CODE 66013	368	Ken		
			369	Chuck		
			510	Jason		

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 790' CASING SIZE & WEIGHT 2 7/8" EUE
CASING DEPTH 777' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Plug
DISPLACEMENT 4:5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Check casing depth w/wire line. Mix Pump 200# Premium Gel Flush
Circulate from pit to condition hole. Mix Pump 124 SKS
50/50 Per 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 TD w/ 4 1/2" ABL Fresh Water Pressure to
808# PSI. 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>		870 ⁰⁰
5406	30 mi	MILEAGE <u>Pump Truck</u>		103 ⁵⁰
5402	<u>777'</u>	<u>Casing Footage</u>		N/C
5407A	156.24	<u>Ton Miles</u>		181 ²⁴
5502C	2 hrs	<u>50 BBL Vac Truck</u>		188 ⁰⁰
1124	121 SKS	<u>50/50 Per Mix Cement</u>		1119 ²⁵
1115B	408 ²⁴	<u>Premium Gel</u>		65 ²⁵
1107A	62 ²⁴	<u>Pheno Seal</u>		66 ⁹⁶
4402	1	<u>2 1/2" Rubber Plug</u>		22 ⁰⁰
			RECEIVED	
			MAY 03 2010	
			KCC WICHITA	
			.63%	SALES TAX
				ESTIMATED TOTAL
				80 ²⁵
				2696 ⁴⁶

WO# 232528

Rev'n 3737

AUTHORIZATION [Signature] TITLE _____ DATE _____