

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 34089
Name: AGRICULTURAL ENERGY SERVICES, INC
Address 1: 1755 W BROADWAY STREET
Address 2: _____
City: OVIEDO State: FL Zip: 32765 + _____
Contact Person: MONTGOMERY ESCUE
Phone: (407) 365-2500
CONTRACTOR: License # 30606
Name: MURFIN DRILLING
Wellsite Geologist: GARY KING
Purchaser: ONEOK FIELD SERVICES
Designate Type of Completion:
 New Well _____ Re-Entry _____
_____ 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.: _____
4-27-08 10-14-08 12-18-08
Spud Date or Date Reached TD Completion Date or Recompletion Date

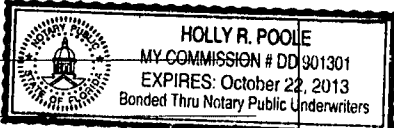
API No. 15 - 175-22161-0000
Spot Description: _____
_____ SW SW Sec. 15 Twp. 33 S. R. 33 East West
660 Feet from North / South Line of Section
660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: SEWARD
Lease Name: PETERS Well #: 3-15
Field Name: EVELYN - CONDIT
Producing Formation: LOWER MORROW
Elevation: Ground: 2825 Kelly Bushing: 2836'
Total Depth: 6440' Plug Back Total Depth: 6390'
Amount of Surface Pipe Set and Cemented at: 1702' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ATT INVS 70-70
(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: Vice President Date: 8/20/09
Subscribed and sworn to before me this 20th day of August
20 09
Notary Public: _____
Date Commission Expires: 10/22/2013



KCC Office Use ONLY

Letter of Confidentiality Received _____
If Denied, Yes Date: _____
 Wireline Log Received (2/16/10) **RECEIVED**
 Geologist Report Received (2/23/10) **AUG 24 2009**
_____ UIC Distribution _____
KCC WICHITA

Operator Name: AGRICULTURAL ENERGY SERVICES, INC Lease Name: PETERS Well #: 3-15
 Sec. 15 Twp. 33 S. R. 33 East West County: SEWARD

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 checked="" type="checkbox"/> Yes <input 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: SONIC BOND, ARRAY INDUCTION, NEUTRON DENSITY + MICRO RESISTIVITY	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>ST LOUIS</td> <td>6248'</td> <td></td> </tr> <tr> <td>STE GEN</td> <td>6175'</td> <td></td> </tr> <tr> <td>B/CHESTER SD</td> <td>6038'</td> <td></td> </tr> <tr> <td>CHESTER</td> <td>5853'</td> <td></td> </tr> <tr> <td>MORROW</td> <td>5630'</td> <td></td> </tr> </table>	Name	Top	Datum	ST LOUIS	6248'		STE GEN	6175'		B/CHESTER SD	6038'		CHESTER	5853'		MORROW	5630'	
Name	Top	Datum																	
ST LOUIS	6248'																		
STE GEN	6175'																		
B/CHESTER SD	6038'																		
CHESTER	5853'																		
MORROW	5630'																		

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"	24#	1702	LITE & TAIL, COMMON	790	
PRODUCTION		5 1/2"	15.5#	6439'	CLASS A ASC	100	5% KD - soac/SK

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	5250' TO 5741'	CLASS H	100	10% SALT

Shots Per Foot	PERFORATION RECORD - Bridge Plugs, Set Types Specify Footage of Each Interval	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	5806' TO 5820'	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED FEB 16 2010 KCC WICHITA </div>	
1	5833' TO 5837'		
1	5740' TO 5741'		SQUEEZE
2			
4			

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>5804'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>12-20-08</u>		Producing Method: <input checked="" 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
		120	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 INTERVAL: <u>5806' TO 5837'</u> <div style="text-align: right; border: 1px solid black; padding: 2px;"> RECEIVED AUG 24 2009 </div>
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ALLIED CEMENTING CO., INC.

26990

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal KS

DATE <u>9-29-08</u>	SEC. <u>15</u>	TWP <u>33</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION	JOB START <u>3:30AM</u>	JOB FINISH <u>4:30AM</u>
LEASE <u>Peter</u>	WELL # <u>3-15</u>	LOCATION <u>Liberal N to HWY 51, 1E, E+N to Seward</u>			COUNTY	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR <u>Murfin # 22</u>
TYPE OF JOB <u>8 5/8 Surface</u>
HOLE SIZE <u>12 1/4</u> T.D. <u>1702</u>
CASING SIZE <u>8 5/8</u> DEPTH
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX MINIMUM
MEAS. LINE SHOE JOINT <u>42.21</u>
CEMENT LEFT IN CSG.
PERFS.
DISPLACEMENT <u>105.5 BBL</u>
EQUIPMENT

OWNER	CEMENT
	AMOUNT ORDERED <u>640sk Lite - 3% CC, 1/4 Fl</u> <u>150sk Common - 3% CC</u>
COMMON <u>150 sk</u>	@ <u>15.45</u> <u>2317.50</u>
POZMIX	@
GEL	@
CHLORIDE <u>26 sk</u>	@ <u>58.20</u> <u>1513.20</u>
ASC	@
<u>Lite 640 sk</u>	@ <u>14.80</u> <u>9472.00</u>
<u>seal 160 sk</u>	@ <u>2.50</u> <u>400.00</u>
	@
	@
	@
	@
HANDLING <u>821 sk</u>	@ <u>2.40</u> <u>1970.40</u>
MILEAGE <u>sk MT</u>	<u>1231.50</u>
	TOTAL <u>16,904.60</u>

PUMP TRUCK # <u>470</u>	CEMENTER <u>Birby</u>	KCC WICHITA
	HELPER <u>Ryan</u>	
BULK TRUCK # <u>457</u>	DRIVER <u>Francisco</u>	
BULK TRUCK # <u>482</u>	DRIVER <u>Wayne</u>	

REMARKS:
On Location - Casing on Bottom
Break Circ.
Mix 640 sk Lite @ 12.2 PPG
Mix 150 sk Common @ 14.9 PPG
Drop Plug -
Displace with 105.5 BBL
Shot down - Release Pressure - Float held
Circulate Cement

CHARGE TO: AES
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE	
DEPTH OF JOB <u>1702</u>	
PUMP TRUCK CHARGE	<u>2011.00</u>
EXTRA FOOTAGE	@
MILEAGE <u>15 mi</u>	@ <u>7.00</u> <u>105.00</u>
MANIFOLD <u>+ Head</u>	@ <u>113.00</u>
	@
	@
	TOTAL <u>2229.00</u>

PLUG & FLOAT EQUIPMENT	
<u>8 5/8</u>	
Guide Shoe	@ <u>282.00</u>
Afd Insert	@ <u>377.00</u>
Centralizers <u>4 EA</u>	@ <u>62.00</u> <u>248.00</u>
Top Plug	@ <u>113.00</u>
	@
	TOTAL <u>1,020.00</u>

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS
 SIGNATURE Rodney Gonzalez PRINTED NAME Rodney Gonzalez

ALLIED CEMENTING CO., LLC. 30498

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
LIBERAL KS

DATE <u>10/26/08</u>	SEC. <u>15</u>	TWP. <u>33S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION	JOB START <u>3:00 PM</u>	JOB FINISH <u>9:00 PM</u>
LEASE <u>PETERS</u>	WELL # <u>3-15</u>	LOCATION <u>LIBERAL KS Nxt Rd #9</u>			COUNTY <u>SEWARD</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)		<u>1E NEW INT.</u>					

CONTRACTOR BLACK HAWK

TYPE OF JOB SQUEEZE

HOLE SIZE 07 1/4 T.D.

CASING SIZE 5 1/2 DEPTH TO

TUBING SIZE 2 3/8 DEPTH

DRILL PIPE DEPTH

TOOL 5/8 RETAINER DEPTH 5680

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS. 5740'

DISPLACEMENT

OWNER SAME

CEMENT

AMOUNT ORDERED 100 SK "H"

10% SACT

COMMON	<u>100 "H"</u>	@	<u>16.75</u>	<u>1675.00</u>
POZMIX		@		
GEL		@		
CHLORIDE		@		
ASC		@		
	<u>SACT 9 SK</u>	@	<u>23.95</u>	<u>215.55</u>
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>107</u>	@	<u>2.40</u>	<u>256.80</u>
MILEAGE	<u>10 SK mi</u>			<u>312.00</u>
TOTAL				<u>2459.35</u>

EQUIPMENT

PUMP TRUCK CEMENTER BOB

479/469 HELPER RYAN/WAYNE

BULK TRUCK

421/468 DRIVER FRANCISCA/DOUG

BULK TRUCK

DRIVER

REMARKS:

ON JOB / SAFETY MEETING

Pump 10 BBL KCL H₂O EST AMT

1.5 600 PSI RUN RETAINER IN ON WIRELINE

PSI CSN 560 MIX 100 SK INT

Disp RETURNS @ 4 BBL GONR

Pump 2 BBL SHT SURFACE LINE

Pump 1.5 BBL STING OUT OF TAIL

Reverse out TAG @ 40 BBL

THANK YOU

SERVICE

DEPTH OF JOB 5740'

PUMP TRUCK CHARGE N/C

EXTRA FOOTAGE @

MILEAGE 11 @ N/C

MANIFOLD @ N/C

CHARGE TO: AES

STREET

CITY STATE ZIP

TOTAL

PLUG & FLOAT EQUIPMENT

@

@

@

@

TOTAL

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any)

TOTAL CHARGES

DISCOUNT IF PAID IN 30 DAYS

PRINTED NAME Douglas Paul

SIGNATURE [Signature]