

ORIGINAL

Form ACO-1

October 2008

Form Must Be Typed

5/07/10

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASEOPERATOR: License # 6889 6569Name: Carmen Schmitt Inc.Address 1: P.O. Box 47Address 2: 915 HarrisonCity: Great Bend State: KS Zip: 67530 + 0047Contact Person: Carmen SchmittPhone: (620) 793-5100 **CONFIDENTIAL**CONTRACTOR: License # 4958 MAY 07 2009Name: Mallard J.V. Inc.Wellsite Geologist: Tom Funk **KCC**

Purchaser: _____

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.: _____

2-12-09 2-8-09 2/16/09 2-7-09Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____API No. 15 - 009-25305-0000

Spot Description: _____

E/2 NE NE Sec. 19 Twp. 16 S. R. 15 ☐ East ☒ West660 Feet from ☒ North / ☐ South Line of Section330 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SWCounty: BartonLease Name: Keller Well #: 1Field Name: W.C.

Producing Formation: _____

Elevation: Ground: 1978' Kelly Bushing: 1983'Total Depth: 3595 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at: 470 FeetMultiple 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

(Data must be collected from the Reserve Pit)

Chloride content: 41,000 ppm Fluid volume: 1000 bblsDewatering method used: Evaporate

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

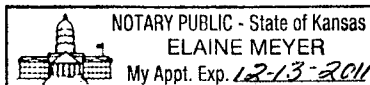
Lease Name: _____ License No.: _____

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: Carmen SchmittTitle: Operations Manager Date: 5-7-09Subscribed and sworn to before me this 7th day of May20 09Notary Public: Elaine MeyerDate Commission Expires: 12-13-2011**KCC Office Use ONLY**☒ Letter of Confidentiality ReceivedIf Denied, Yes ☐ Date: _____☐ Wireline Log Received **KANSAS CORPORATION COMMISSION**☐ Geologist Report Received☐ UIC Distribution**MAY 12 2009****RECEIVED**

Operator Name: Carmen Schmitt Inc. Lease Name: Keller Well #: 1
 Sec. 19 Twp. 16 S. R. 15 ☐ East ☒ West County: Barton

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 ☒ Yes ☐ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No
 (Submit Copy)

List All E. Logs Run:

None

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MAY 07 2009

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Anhydrite	1061	+922
B/Anhydrite	1091	+892
Topeka	2985	-1002
Heebner Shale	3218	-1235
Lansing	3276	-1293
B/Kansas City	3503	-1520
Arbuckle	3576	-1593

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 Casing	12.25"	8.625"	23	470	Common	235	3% c.c., 2% gel

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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

KANSAS CORPORATION COMMISSION

MAY 12 2009

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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:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <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) _____	_____ _____

ALLIED CEMENTING CO., LLC. 34945

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

SERVICE POINT:

A
Russell

DATE <i>2-12-09</i>	SEC. <i>19</i>	TWP. <i>16</i>	RANGE <i>15</i>	CALLED OUT	ON LOCATION	JOB START <i>8:30 a.m.</i>	JOB FINISH <i>9:30 a.m.</i>
LEASE <i>Keller</i>	WELL # <i>1</i>	LOCATION <i>Galatia 3w 3/4 N</i>			COUNTY <i>Porter</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)				<i>Winto</i>			

CONTRACTOR <i>Mayland Drilling</i>	OWNER
TYPE OF JOB <i>Surface</i>	
HOLE SIZE <i>12 1/4</i>	T.D. <i>470</i>
CASING SIZE <i>8 5/8 23#</i>	DEPTH <i>470</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <i>15'</i>	
PERFS.	
DISPLACEMENT <i>28 1/2 Bc</i>	
EQUIPMENT	
CEMENT	
AMOUNT ORDERED <i>235 com 3% GCL</i>	<i>2% GCL</i>

PUMP TRUCK # <i>47</i>	CEMENTER <i>Craig</i>	CONFIDENTIAL	
BULK TRUCK # <i>345</i>	HELPER <i>Matt</i>		
BULK TRUCK # <i>345</i>	DRIVER <i>Rocky</i>		
BULK TRUCK #	DRIVER		
BULK TRUCK #	DRIVER		
MAY 07 2009			
KCC			
HANDLING <i>235</i>	@ <i>2.25</i>		<i>528.75</i>
MILEAGE <i>10.5 k/mile</i>	@		<i>352.50</i>
TOTAL			<i>4546.75</i>

REMARKS:

Cement Circulated!

Thanks!

CHARGE TO: *Carmen Schmidt*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB		<i>991.00</i>
PUMP TRUCK CHARGE		
EXTRA FOOTAGE	@	
MILEAGE <i>15</i>	@ <i>7.00</i>	<i>105.00</i>
MANIFOLD	@	
	@	
	@	
TOTAL		<i>1,096.00</i>

PLUG & FLOAT EQUIPMENT

<i>18 5/8 wooden Plug</i>		<i>66.00</i>
	@	
	@	
	@	
	@	
	@	
TOTAL		<i>66.00</i>

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.

PRINTED NAME *LAVON R URBAN*

SIGNATURE *Lavon R Urban*

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

KANSAS CORPORATION COMMISSION

MAY 12 2009
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ALLIED CEMENTING CO., LLC. 036275

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

SERVICE POINT: Great Bend
~~Russell~~

DATE <u>2-17-09</u>	SEC. <u>19</u>	TWP. <u>16</u>	RANGE <u>15</u>	CALLED OUT <u>10:30</u>	ON LOCATION <u>12:00 PM</u>	JOB START <u>5:30 PM</u>	JOB FINISH <u>6:30 PM</u>
LEASE <u>Keller</u>		WELL # <u>1</u>	LOCATION <u>Galatia 3 west</u>			COUNTY <u>Barton</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>3/4 North west into</u>				

CONTRACTOR Mallard
TYPE OF JOB Rotary Plug
HOLE SIZE 7 7/8 T.D. 3595
CASING SIZE 4 1/2 DEPTH 3556
TUBING SIZE DEPTH
DRILL PIPE DEPTH
TOOL DEPTH
PRES. MAX 100 MINIMUM 0
MEAS. LINE SHOE JOINT
CEMENT LEFT IN CSG.
PERFS.
DISPLACEMENT 118 Bbls Fresh water
EQUIPMENT 508 Bbls Rig mud

OWNER Carmen Schmitt
CEMENT
AMOUNT ORDERED 1850x 60/40 4% .25 flo seal

PUMP TRUCK CEMENTER Wayne - D
181 HELPER Alvin - R
BULK TRUCK
344-170 DRIVER Scott
BULK TRUCK
DRIVER

COMMON	<u>1115x</u>	@	<u>13.50</u>	<u>1498.50</u>
POZMIX	<u>745x</u>	@	<u>7.60</u>	<u>562.40</u>
GEL	<u>8</u>	@	<u>20.25</u>	<u>162.00</u>
CHLORIDE		@		
ASC		@		
<u>fla seal</u>	<u>46#</u>	@	<u>2.45</u>	<u>112.70</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>195</u>	@	<u>225.00</u>	<u>438.75</u>
MILEAGE	<u>15/195/1.10</u>			<u>300.00</u>
TOTAL				<u>3074.35</u>

REMARKS:

KCC

15 Bbls Fresh water Ahead
1st plug 3556 255x 60/40 4% to flo seal
mix 3.98 Bbls 5 Bbls Displacement
43 Bbls Rig mud 2nd plug 1080 255x
mix 3.98 Displace 5 Bbls Fresh water
7 Bbls Rig mud 3rd plug 530ft mix 800x
12.76 Bbls 1 Bbl Displacement 4th plug
Nett 105x mix 1.59 Rat 305x 4.34
mouse 155x 2.39 Bbls washup Rig Down

SERVICE

DEPTH OF JOB	<u>3556</u>		
PUMP TRUCK CHARGE			<u>1,957.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>15</u>	@	<u>7.00</u> <u>105.00</u>
MANIFOLD		@	
		@	
TOTAL <u>2062.00</u>			

CHARGE TO: Carmen Schmitt
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@		
<u>1 8 5/8 wooden plug</u>	@	<u>66.00</u>	<u>66.00</u>
	@		
	@		
	@		
TOTAL <u>66.00</u>			

To Allied Cementing Co., LLC.

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PRINTED NAME Lytle Juergensen

SIGNATURE Lytle Juergensen

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____ IF PAID IN 30 DAYS

KANSAS CORPORATION COMMISSION

MAY 12 2009

RECEIVED