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KANSAS CORPORATION COMMISSION NOV 20 2009 OIL & GAS CONSERVATION DIVISION

Form ACO-1 October 2008 Form Must Be Typed

WELL COMPLETION FORM KCC WICHITA WELL HISTORY - DESCRIPTION OF WELL & LEASE

Handwritten initials and date: 4/20/09

OPERATOR: License # 33858 Name: J & J Operating Address 1: 10380 W. 179th Street City: Bucyrus State: KS Zip: 66013 Contact Person: Patrick Everett Phone: (913) 549-8442 CONTRACTOR: License # 32834 Name: JTC Oil, Inc. Wellsite Geologist: Purchaser: Pacer Energy Marketing

Designate Type of Completion: [X] New Well [] Re-Entry [] Workover [] Oil [] SWD [] SIOW [] Gas [X] ENHR [] SIGW [] CM (Coal Bed Methane) [] Temp. Abd. [] Dry [] Other (Core, WSW, Expl., Cathodic, etc.)

Due to change in administrative operations, this form is now to be filed on 11/20/09. KCC

Operator: Well Name: Original Comp. Date: 7-19-2009 Original Total Depth: Date Reached TD: 7-20-2009 Completion Date or Recompletion Date: 8-10-2009

API No. 15 - 045-21,554-6000 Spot Description: S2 NW SE Sec. 31 Twp. 13 S. R. 21 [X] East [] West 1650 Feet from [] North / [X] South Line of Section 1980 Feet from [X] East / [] West Line of Section Footages Calculated from Nearest Outside Section Corner: [] NE [] NW [X] SE [] SW County: Douglas Lease Name: Kelly (Circle K) Well #: I-4 Field Name: Wildcat Producing Formation: Squirrel Elevation: Ground: 913 Kelly Bushing: NA Total Depth: 760 Plug Back Total Depth: NA Amount of Surface Pipe Set and Cemented at: 40 Feet Multiple Stage Cementing Collar Used? [] Yes [X] No If yes, show depth set: Feet If Alternate II completion, cement circulated from: 40 feet depth to: Surface w/ 6 sx cmt.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: 1500-3000 ppm Fluid volume: 89 bbls Dewatering method used: Used on Lease Location of fluid disposal if hauled offsite: Operator Name: Lease Name: License No.: Quarter Sec. Twp. S. R. [] East [] West County: Docket No.:

Handwritten note: FOR N 570-10

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: Patrick Everett Title: Agent Date: Subscribed and sworn to before me this 18 day of November 2009. Notary Public: Jon Persinger Date Commission Expires: 8/19/12

KCC Office Use ONLY Letter of Confidentiality Received [X] If Denied, Yes [] Date: Wireline Log Received [X] Geologist Report Received [X] UIC Distribution (AS) [X]



Operator Name: J & J Operating Lease Name: Kelly (Circle K) Well #: I-4
 Sec. 31 Twp. 13 S. R. 21 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 (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: <u>Gamma Ray / Neutron / CCL</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <u>No geologist on site</u> <div style="text-align: center;"> RECEIVED NOV 20 2009 KCC WICHITA </div>
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Handwritten: See log 11/20/09

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	40	Portland	6	
Casing	5 5/8	2 7/8	6.5	740	Portland	122	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	21 Perforations from 683.0 to 693.0		

Handwritten: Per tele log 11/23/09

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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: _____ _____
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