

**ORIGINAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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JUL 26 2010

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

KCC WICHITA

OPERATOR: License # 5144

Name: Mull Drilling Company, Inc.

Address 1: 1700 N. Waterfront Parkway, Building #1200

Address 2: \_\_\_\_\_

City: Wichita State: KS Zip: 67206 + 6637

Contact Person: Mark Shreve

Phone: (316) 264-6366

CONTRACTOR: License # \_\_\_\_\_

Name: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well
- Re-Entry
- Workover
- Oil
- WSW
- SWD
- SIOW
- Gas
- D&A
- ENHR
- SIGW
- OG
- GSW
- Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic
- Other (Core, Expl., etc.): \_\_\_\_\_

If Workover/Re-entry: Old Well Info as follows:

Operator: Mull Drilling Company, Inc.

Well Name: HSS #1-22

Original Comp. Date: 10/26/04 Original Total Depth: 4480'

- Deepening
- Re-perf.
- Conv. to ENHR
- Conv. to SWD
- Conv. to GSW

- Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_
- Commingled Permit #: \_\_\_\_\_
- Dual Completion Permit #: \_\_\_\_\_
- SWD Permit #: D-30418
- ENHR Permit #: \_\_\_\_\_
- GSW Permit #: \_\_\_\_\_

6/15/2010	7/19/2010
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API No. 15 - 135-24308-00-03

Spot Description: \_\_\_\_\_

SW SE SW SE Sec. 22 Twp. 16 S. R. 23  East  West

200 275 Feet from  North /  South Line of Section

1,800 1774 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE
- NW
- SE
- SW

County: Ness

Lease Name: HSS SWD Well #: 1-22

Field Name: Osgood SE

Producing Formation: Arbuckle

Elevation: Ground: 2466' Kelly Bushing: 2475'

Total Depth: 4845' Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 241 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set: 1816' Feet

If Alternate II completion, cement circulated from: 1816'

feet depth to: surface w/ 185 sx cmt.

**Drilling Fluid Management Plan**

(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 #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

**AFFIDAVIT**

I am the affiant and I hereby certify that 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: President/COO Date: 7/23/2010

**KCC Office Use ONLY**

Letter of Confidentiality Received  
Date: \_\_\_\_\_

Confidential Release Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT  I  II  III Approved by: Dg Date: 7/29/10

Operator Name: Mull Drilling Company, Inc. Lease Name: HSS SWD Well #: 1-22  
 Sec. 22 Twp. 16 S. R. 23  East  West County: Ness

**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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum  On original ACO-1  <div style="text-align: right; font-weight: bold; font-size: 1.2em;">                     RECEIVED                      JUL 26 2010                      KCC WICHITA                 </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	12 1/4"	8 5/8"	24#	241'	Common	150	2% gel, 3% cc
Production	7 7/8"	5 1/2"	14#	4479'	SMD/ EA2	80 / 50	5% Calseat
Liner		4 1/2"	10.5#	4575'	SMD	85	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface-1816'	SMD	185	

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
	Open Hole 4575' - 4845'	500 gals 20% MCA + 1000 gal 22% Fe Acid.	

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>4547'</u> Packer At: <u>4547'</u> Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. <u>7/19/2010</u>	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: <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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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DRILLING COMPANY, INC.

Remittance Statement

MULL DRILLING COMPANY, INC.  
1700 N WATERFRONT PKWY BLDG 1200  
WICHITA, KS 67206-6637

Vendor: KANSAS CORPORATION COM  
Vendor Code: KAN230  
Check Number: 0000111699  
Check Date: 07/23/2010

Invoice #	Inv Date	Description	Amount	Discount	Net Amount
HSS 1-22 SWD	07/23/2010		100.00	0.00	100.00
			100.00	0.00	100.00

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