

JUL 2-1 2010

Form ACO-1
June 2009

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4629
Name: Brito Oil Company, Inc.
Address 1: 1700 N. Waterfront Pkwy,
Address 2: Bldg. 300, Suite C
City: Wichita State: KS Zip: 67206 +
Contact Person: Raul F. Brito
Phone: (316) 263-8787
CONTRACTOR: License # 30606
Name: Murfin Drilling Co., Inc.
Wellsite Geologist: Tom Funk
Purchaser: NA

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- 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 #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

02/23/2010 03/06/2010 03-06-2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. ~~15~~ - 15-109-20,887-0000
Spot Description: N/2 NW NW SE
N/2_ NW_ NW_ SE Sec. 1526 Twp. 12 S. R. 33 East West
2,600 Feet from North / South Line of Section
2,310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Logan

Lease Name: Clark Unit Well #: 1-26

Field Name: WC

Producing Formation: _____

Elevation: Ground: 3087 Kelly Bushing: 3092

Total Depth: 4688 Plug Back Total Depth: 4688

Amount of Surface Pipe Set and Cemented at: 220 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

(Data must be collected from the Reserve Pit)

Chloride content: 7600 ppm Fluid volume: 700 bbls

Dewatering method used: Evaporation

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 Date: 07/19/2010

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: DJG Date: 7/22/10

Operator Name: Brito Oil Company, Inc. Lease Name: Clark Unit Well #: 1-26
 Sec. 15 Twp. 12 S. R. 33 East West County: Logan

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Comp Density Neutron-Dual Ind, Micro	<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:50%;">Name</td> <td style="width:25%; text-align: right;">Top</td> <td style="width:25%; text-align: right;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td style="text-align: right;">2588</td> <td style="text-align: right;">504</td> </tr> <tr> <td>B/Anhy</td> <td style="text-align: right;">2610</td> <td style="text-align: right;">482</td> </tr> <tr> <td>Heebner</td> <td style="text-align: right;">4013</td> <td style="text-align: right;">-921</td> </tr> <tr> <td>Lansing</td> <td style="text-align: right;">4056</td> <td style="text-align: right;">-964</td> </tr> <tr> <td>Stark Shale</td> <td style="text-align: right;">4291</td> <td style="text-align: right;">-1199</td> </tr> <tr> <td>Fort Scott</td> <td style="text-align: right;">4541</td> <td style="text-align: right;">-1449</td> </tr> <tr> <td>Mississippi</td> <td style="text-align: right;">4688</td> <td style="text-align: right;">-1596</td> </tr> </table>	Name	Top	Datum	Anhydrite	2588	504	B/Anhy	2610	482	Heebner	4013	-921	Lansing	4056	-964	Stark Shale	4291	-1199	Fort Scott	4541	-1449	Mississippi	4688	-1596
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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 Csg	12 1/4"	8 5/8"	23#	220'	Common	170	3% cc 2% gel

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

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: <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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 039136

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

SERVICE POINT: Dockley, KS

DATE <u>3/5/10</u>	SEC <u>26</u>	TWP. <u>12</u>	RANGE <u>33</u>	CALLED OUT	ON LOCATION <u>7:30pm</u>	JOB START <u>2:00am</u>	JOB FINISH <u>3:00am</u>
LEASE <u>Clark Unit</u>	WELL # <u>126</u>	LOCATION <u>Dockley 4W 75 2W 25</u>			COUNTY <u>Coyar</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>			<u>12E 5200</u>				

CONTRACTOR Murken 8

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. _____

CASING SIZE 8 7/8 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT AMOUNT ORDERED 245 SKs 60740

4070 gal 14 1/2 Flo Seal

COMMON	<u>130</u>	@	<u>15.45</u>	<u>8008.50</u>
POZMIX	<u>85</u>	@	<u>8.00</u>	<u>680.00</u>
GEL	<u>7</u>	@	<u>20.00</u>	<u>140.00</u>
CHLORIDE		@		
ASC		@		
Flo Seal	<u>546</u>	@	<u>2.50</u>	<u>1365.00</u>
HANDLING	<u>204 SKs</u>	@	<u>2.40</u>	<u>537.60</u>
MILEAGE	<u>10 * 5/16/mile</u>			<u>336.00</u>
TOTAL				<u>3842.10</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan

422 HELPER Wayne

BULK TRUCK DRIVER Jerry

377 DRIVER _____

REMARKS:

25 SKs @ 2600'

100 SKs @ 1725'

40 SKs @ 275'

10 SKs @ 40'

30 SKs Rest Hole

15 SKs Manual Hole

*Thank You
Alan, Wayne, Jerry*

CHARGE TO: Brito Oil

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 2600'

PUMP TRUCK CHARGE 1185.00

EXTRA FOOTAGE @ _____

MILEAGE 15 @ 7 105.00

MANIFOLD @ _____

TOTAL 1290.00

KCC WIGHT & 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.

PRINTED NAME Rodney Fair

SIGNATURE Rodney Fair

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., LLC. 043593

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

SERVICE POINT:
OKAIEY

DATE <u>2-25-10</u>	SEC <u>26</u>	TWP <u>13S</u>	RANGE <u>33 W</u>	CALLED OUT	ON LOCATION <u>11:00 AM</u>	JOB START <u>1:00 PM</u>	JOB FINISH <u>1:30 PM</u>
LEASE <u>CLARK UNIT</u>		WELL # <u>1-26</u>	LOCATION <u>OKAIEY 4W-75-2W-25-1/2 E</u>			COUNTY <u>LOGAN</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>S INTO</u>				

CONTRACTOR MURFEN DRILL RIG #8

TYPE OF JOB SURFACE

HOLE SIZE <u>12 1/4"</u>	T.D. <u>220'</u>
CASING SIZE <u>8 5/8"</u>	DEPTH <u>220'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>15'</u>	
PERFS.	
DISPLACEMENT <u>13 bbls.</u>	

OWNER SAME

CEMENT AMOUNT ORDERED 170 SKS COM 32 CC 2% GEL

COMMON	<u>170 SKS</u>	@ <u>15.45</u>	<u>2626.50</u>
POZMIX		@	
GEL	<u>3 SKS</u>	@ <u>20.80</u>	<u>62.40</u>
CHLORIDE	<u>6 SKS</u>	@ <u>58.33</u>	<u>349.98</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>179 SKS</u>	@ <u>2.40</u>	<u>429.60</u>
MILEAGE	<u>104 PER SK / MILE</u>		<u>312.00</u>
			<u>MINIMUM CHARGE</u>
TOTAL			<u>3779.70</u>

EQUIPMENT

PUMP TRUCK # <u>431</u>	CEMENTER <u>TERRY</u>	HELPER <u>KELLY</u>
BULK TRUCK # <u>377</u>	DRIVER <u>JERRY</u>	
BULK TRUCK # _____	DRIVER _____	

REMARKS:
CEMENT did CIRC.

SERVICE

DEPTH OF JOB	<u>220'</u>
PUMP TRUCK CHARGE	<u>1018.00</u>
EXTRA FOOTAGE	@ _____
MILEAGE	<u>15 MI @ 7.00</u> <u>105.00</u>
MANIFOLD	@ _____
RECEIVED	@ _____

CHARGE TO: BRETO OIL, CO.

STREET _____

CITY _____ STATE _____ ZIP _____

JUL 21 2010 TOTAL 1123.00

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 Rodney Farr

SIGNATURE Rodney Farr

KCC WICHITA PLUG & FLOAT EQUIPMENT

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