

CONFIDENTIAL

ORIGINAL

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

7/28/10

OPERATOR: License # 6569
Name: Carmen Schmitt Inc.
Address 1: P.O. Box 47
Address 2: 915 Harrison
City: Great Bend State: KS Zip: 67530
Contact Person: Carmen Schmitt
Phone: (620) 793-5100
CONTRACTOR: License # 4958
Name: Mallard JV, Inc.
Wellsite Geologist: Thomas J. Funk
Purchaser: N.C.R.A.

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.: _____
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 101-22166-0000
Spot Description: 330' FNL, 1650' FWL
_____ NW NE NW Sec. 6 Twp. 19 S. R. 29 East West
330 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Lane
Lease Name: Marlene A Well #: 2
Field Name: _____
Producing Formation: Kansas City
Elevation: Ground: 2844' Kelly Bushing: 2849'
Total Depth: 4675' Plug Back Total Depth: 4653'
Amount of Surface Pipe Set and Cemented at: 219 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2164 Feet
If Alternate II completion, cement circulated from: 2164'
feet depth to: surface w/ 165 sx cmt.

Drilling Fluid Management Plan: AF II 10-30-09
(Data must be collected from the Reserve Pit)
Chloride content: 17400 ppm Fluid volume: 1100 bbls
Dewatering 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 Schmitt
Title: Operations Manager Date: 7-28-09
Subscribed and sworn to before me this 28 day of July
20 09.
Notary Public: Elaine Meyer
Date Commission Expires: 12-13-2011

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received 3 rec'd from SB on 8/24/10
 Geologist Report Received **RECEIVED**

UIC Distribution
OCT 23 2009

NOTARY PUBLIC - State of Kansas
ELAINE MEYER
My Appt. Exp. 12-13-2011

KCC WICHITA

Operator Name: Carmen Schmitt Inc. Lease Name: Marlene A Well #: 2
 Sec. 6 Twp. 19 S. R. 29 East West County: Lane

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample
Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Top Datum
Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite 2167 + 683
Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner Shale 3904 -1055
List All E. Logs Run: Dual Induction, Neutron Porosity, Cement Bond	Lansing 3948 -1099
	Base/Kansas City 4314 -1564
	Fort Scott 4576 -1627
	Cherokee Shale 4503 -1654
	Mississippian 4566 -1717

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	12.25"	8.625"	23	219	Common	150	3% c.c., 2% gel
Production	7.875"	5.50"	14	4673	STD EA-2	200	5% salt, 5% calseal

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				RECEIVED OCT 23 2009 KCC WICHITA

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	4142'-4146'; 4180'-4190'	1000 gal 15% acid	4142-4190
2	4240'-4244'; 4288'-4298'	1000 gal 15% acid	4240-4298
2	4332'-4336'; 4384'-4388'	1000 gal 15% acid Retrieval BP@4321'	4325-4463
2	4430'-4432'; 4441'-4444'; 4462'-4466'; 4478'-4499'; 4559'-4562'	2000 gal 15% acid CIBP@4400'	4479-4562
2	4596'-4602'	CIBP@4580'	4580' CIBP

TUBING RECORD: Size: <u>2.875"</u> Set At: <u>4311'</u> Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First. Resumed Production, SWD or Enhr. <u>May 21, 2009</u>	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. <u>62</u> Gas Mcf <u>0</u> Water Bbls. <u>25</u> Gas-Oil Ratio <u>0</u> Gravity <u>35</u>

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>Kansas City 4142'-4298'</u>
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CHARGE TO: CARMEN SCHMITT
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 16416
 PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>HAS</u>	WELL/PROJECT NO. <u>A-2</u>	LEASE <u>MARLENE</u>	COUNTY/PARISH <u>LANE</u>	STATE <u>KS</u>	CITY	DATE <u>05-02-09</u>	OWNER
2. <u>NESS</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <u>MALLARD DRILL</u>	SHIPPED VIA <u>CT</u>	DELIVERED TO <u>Sec 30, 1/4, DIGHTON</u>	ORDER NO.	
3.	WELL TYPE <u>D/C</u>	WELL CATEGORY <u>DEVELOP</u>	JOB PURPOSE <u>CONCRETE</u>	WELL PERMIT NO. <u>15-101-02166</u>	WELL LOCATION <u>56.719.229</u>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE RENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
<u>575</u>		<u>1</u>			MILEAGE #112	<u>40</u>	<u>mi</u>			<u>5.00</u>	<u>200</u>	<u>00</u>
<u>578</u>		<u>1</u>			Pump SERVICE	<u>1</u>	<u>EA</u>			<u>1400.00</u>	<u>1400</u>	<u>00</u>
<u>221</u>		<u>1</u>			LIQUID OIL	<u>5</u>	<u>Gal</u>			<u>25.00</u>	<u>125</u>	<u>00</u>
<u>281</u>		<u>1</u>			MUD FLUX	<u>500</u>	<u>Gal</u>			<u>1.00</u>	<u>500</u>	<u>00</u>
<u>290</u>		<u>1</u>			D-AIR	<u>2</u>	<u>Gal</u>			<u>35.00</u>	<u>70</u>	<u>00</u>
<u>402</u>		<u>1</u>			CENTRALIZER	<u>12</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>55.00</u>	<u>660</u>	<u>00</u>
<u>403</u>		<u>1</u>			CMT BASKET	<u>3</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>180.00</u>	<u>540</u>	<u>00</u>
<u>404</u>		<u>1</u>			PORT COLLAR	<u>1</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>1900.00</u>	<u>1900</u>	<u>00</u>
<u>406</u>		<u>1</u>			LATCHDOWN PEVER Baffle	<u>1</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>225.00</u>	<u>225</u>	<u>00</u>
<u>407</u>		<u>1</u>			INJECT FLOWSIDE 1/2" AND FILL	<u>1</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>275.00</u>	<u>275</u>	<u>00</u>
		<u>1</u>			ROTATING HEAD REPAIR	<u>1</u>	<u>EA</u>	<u>5 1/2</u>	<u>in</u>	<u>150.00</u>	<u>150</u>	<u>00</u>

MISSOURI CORPORATION COMMISSION
 JUL 31 2009
 RECEIVED

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED 05-02-09 TIME SIGNED 2:15 A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE		
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				Pg-1 PAGE TOTAL	<u>6095</u> <u>00</u>
WE UNDERSTOOD AND MET YOUR NEEDS?				Pg-2	<u>3812</u> <u>00</u>
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				sub TOTAL	<u>9857</u> <u>00</u>
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Lane TAX 5.3%	<u>399</u> <u>62</u>
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	<u>10,256</u> <u>62</u>
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR DAVID BISH APPROVAL _____

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 05-22-09 PAGE NO. 1

CUSTOMER CARMEN SCHMITT WELL NO. A-2 LEASE MARLENE JOB TYPE LONG STRING TICKET NO. 16416

CHART NO.	TIME	RATE (BPM)	VOLUME (BBQ) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2115							ON LOCATION CMT: 200545 EA-2 RTD 4625, Set P, PC 4623, SJ 21.20 IN SET 4651 5 1/4" 14 1/4" Port Connection Top 62, 2206 FT CMT 3, 4, 5, 6, 7, 9, 11, 13, 14, 15, 61, 63, BASSETS 2, 10, 61
	2200							<p style="text-align: center;">CONFIDENTIAL JUL 24 2009</p> <p style="text-align: center;">NGC</p>
	2350							
	0000							
	0100		5-4					
	0105	4.5	0		✓		200	
			12		✓			START MUD FLUSH HCL
			32		✓			END FLUSHES
	0125		0		✓			START CMT
			40		✓			END Drop LD PUS, WASHOUT PI
	0125	5.7	0		✓		200	START Disp w/ 2% HCL
			30		✓		200	
			74		✓		300	CMT ON BIT
			90		✓		400	<p style="text-align: center;">KANSAS CORPORATION COMMISSION JUL 31 2009 RECEIVED</p>
			95		-		500	
			100		-		600	
			105		-		700	
			110		-		800	
	0145	4.0	113.5		-		1900	LAND PUS RELEASE
	0230							JOB COMPLETE THANK YOU! DAVE, JOSH, JEFF



CHARGE TO:
CARMEN SCHMETT
 ADDRESS
 CITY, STATE, ZIP CODE

TICKET
 No 16194
 PAGE 1 OF 1

SERVICE LOCATIONS 1. NESS City, KS	WELL/PROJECT NO. A-2	LEASE MARLENE	COUNTY/PARISH LAKE	STATE Ks	CITY	DATE 5-7-09	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR DS-W	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE CEMENT PORT COLLAR	WELL PERMIT NO.	WELL LOCATION DIGHTON, Ks - SW, 3c, 1/2W, SS		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UM	QTY.	UM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 110	40	MI			5.00	200.00
576D		1			PUMP CHARGE	1	JOB	2164	FT	1100.00	1100.00
105		1			PORT COLLAR OPENING TOOL	1	JOB			300.00	300.00
330		1			SWIFT MULTI-DENSITY STAPLER	165	SKS			14.00	2310.00
276		1			FLOCELE	56	LBS			1.50	84.00
290		1			D-AIR	2	GAL			35.00	70.00
581		1			SERVICE CHARGE CEMENT	225	SKS			1.50	337.50
583		1			DRAYAGE	22326	LBS	446.52	HM	1.00	446.52

TRANSIS CORPORATION COMMISSION
 JUL 3 2009
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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X - *Carmen Schmett*
 DATE SIGNED **5-7-09** TIME SIGNED **1500**

A.M.
 P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	4848.02
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	4994.51

Lanc TAX 5.3% 146.49

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR **WAVE WILSON** APPROVAL

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE 5-7-09 PAGE NO. 1

CUSTOMER CARMEN SCHMIDT

WELL NO. A-2

LEASE MARLESE

JOB TYPE CEMENT PORT COLLAR

TICKET NO. 16194

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1500							ON LOCATION
								2 7/8 x 5 1/2 PORT COLLAR = 2164'
	1630				✓		1000	PSI TEST CASING - HELD
	1635	3	2	✓		250		OPEN PORT COLLAR - ZWT RATE
	1640	4 1/4	92	✓		250		MAX CEMENT 165 SKS 5.5M 1/4" SKS FIBRECE
	1710	4	1 1/2	✓		450		DISPLACE CEMENT
	1720			✓		1000		CLOSE PORT COLLAR - PSI TEST - HELD
								CIRCULATED 20 SKS CEMENT TO PRT
	1730	4	30	✓		450		RUN 4 JTS - CIRCULATE CLEAN
								WASH TRUCK
								PULL TOOL 5-8-09
	1800							JOB COMPLETE
								THANK YOU WAYNE, BRETT, SCOTT

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QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3193

Date	Sec.	Twp.	Range	County	State	On Location	Finish
4/23/09	6	19	29	Lane	KS		4:45 PM
Lease	Well No.	Location					
Marlene	# 2	Diggins, SW 35, 1/4 W, S 1-20					

Contractor	Owner	
Mallard Drilling	To Quality Oilwell Cementing, Inc.	
Type Job	You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.	
Surface		
Hole Size	T.D.	
12 1/4"	219	
Csg.	Depth	
8 3/4" 20'	219	
Tbg. Size	Charge To	
	Carmen Schmitt	
Drill Pipe	Street	
Tool	City	
	State	
Cement Left in Csg.	The above was done to satisfaction and supervision of owner agent or contractor.	
10-12		
Press Max.	CEMENT	
	Amount Ordered 150 sk Co. 3% CC 2% gel	
Meas Line	Common	
	13 1/8 bbls	
Perf.	Poz. Mix	

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EQUIPMENT

Pumptrk	No.	Cement Helper	
9		Paul	
Bulktrk	No.	Driver	
10		Justin	
Bulktrk	No.	Driver	
PV		Justin	

JOB SERVICES & REMARKS

Pumptrk Charge	
Mileage	
Footage	
Total	

Flowseal	
Handling	
Mileage	
Pump Truck Charge	

Cement did
Circulate!

Thank
You!

FLOAT EQUIPMENT

Guide Shoe	
Centralizer	
Baskets	
AFU Inserts	
8 5/8 Wood Plug	
3/8 Head Manifold	
Rotating Head	
Squeez Mainfold	

Signature: *[Handwritten Signature]*

Tax	
Discount	
Total Charge	