

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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AUG 19 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 ORIGINAL

OPERATOR: License # 32834
Name: JTC Oil Inc.
Address 1: P.O. Box 24386
Address 2: _____
City: Stanley State: KS Zip: 66283 + _____
Contact Person: Patrick Everett
Phone: (913) 549-8442
CONTRACTOR: License # 32834
Name: JTC Oil, Inc.
Wellsite Geologist: NA
Purchaser: Pacer Energy Marketing

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: _____
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 #: _____

4-28-2010 4-30-2010 5-25-2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 107-24162-00-00
Spot Description: _____
SE NW NW NE Sec. 21 Twp. 20 S. R. 22 East West
4,835 Feet from North / South Line of Section
2,130 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Linn
Lease Name: Ralph Nickell Sr Well #: I-28
Field Name: Goodrich-Parker
Producing Formation: Squirrel
Elevation: Ground: 972 Kelly Bushing: NA
Total Depth: 640 Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 20
feet depth to: Surface w/ 3 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1500-3000 ppm Fluid volume: 88 bbls
Dewatering method used: Used on lease
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: [Signature]
Title: Authorized Agent Date: 8/12/10

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: Dlg Date: 8/24/10

Operator Name: JTC Oil Inc. Lease Name: Ralph Nickell Sr Well #: I-28

Sec. 21 Twp. 20 S. R. 22 East West County: Linn

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i></p> <p>List All E. Logs Run: Gamma Ray / Neutron</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <p>Name Top Datum</p> <p>No Geologist at well site</p>
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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	9	6 1/4		20	Portland	3	
Completion	5 5/8	2 7/8		625	Portland	101	50/50 Poz.

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 <i>(Amount and Kind of Material Used)</i>	Depth

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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: <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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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 26920

LOCATION Ottawa KS

FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/25/10	4015	Nickell Sr # I-28	NE 21	20	22	LN
CUSTOMER			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			

JTC Oil Inc.
P.O. Box 910
Louisburg KS 66053

TRUCK # 506 DRIVER Fred TRUCK # Safety Mtg DRIVER
368 DRIVER Chuck TRUCK # Curk
436 DRIVER JP Golick TRUCK # RP
548 DRIVER Tim

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 625' CASING SIZE & WEIGHT 2 1/8" EUE
CASING DEPTH 625' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/8" Plug
DISPLACEMENT 36 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix & Pump 200# Premium Gel Flush
Mix & Pump 101 sks 50/50 Poz Mix Cement 2% Gel 1/4" Pheno Seal
per sack. Cement to surface. Flush pump & lines clean. Displace
2 1/8" Rubber Plug to casing TD w/36 BBL Fresh water.
Pressure to 700# PSI. Hold Pressure for 30 min. MIT.
Release Pressure to Set Float Valve. Shut in Casing.

Fred Mader

JTC Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		900.00
5406	-0.	MILEAGE Trucks on lease		N/C
5402	625'	Casing Footage		N/C
5407A	190.89	Ton Miles		229.07
5502C	2hrs	80 BBL Vac Truck		192.00
1124	99 sks	50/50 Poz Mix Cement	RECEIVED	945.45
1118B	370#	Premium Gel	AUG 19 2010	62.90
1107A	25#	Pheno Seal		28.00
4402	1	2 1/8" Rubber Plug	KCC WICHITA	23.00
w/ff 234411				
		5.3%	SALES TAX	56.14
			ESTIMATED TOTAL	2436.50

Revin 3737

AUTHORIZATION *John Cahill*

TITLE _____

DATE 2436.50

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.