

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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

OPERATOR: License # 8653
Name: Petroleum Technologies, Inc.
Address 1: 801 W. 47th Street
Address 2: Suite 412
City: Kansas City State: MO Zip: 64112 + 1253
Contact Person: ALAN J. SEATON
Phone: (816) 531-6904 ext. 25
CONTRACTOR: License # _____
Name: _____
Wellsite Geologist: _____
Purchaser: _____

RECEIVED

AUG 06 2010

KCC WICHITA

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: Petroleum Technologies, Inc.
Well Name: Patzner A
Original Comp. Date: 5-08-1941 Original Total Depth: 3,596
 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-7690
 ENHR Permit #: _____
 GSW Permit #: _____

April 12, 2010 April 15, 2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date Recompletion Date

API No. 15 - 009-19143-0004
Spot Description: _____
SE NW
SE W2 SE Sec. 36 Twp. 17 S. R. 11 East West
1,320 1354 Feet from North / South Line of Section
1,660 1703 Feet from East / West Line of Section
GPS-KCC-DIG
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: Patzner A Well #: 10
Field Name: Bloomer
Producing Formation: disposing into Lansing & Arbuckle
Elevation: Ground: 1,809 Kelly Bushing: 1,814 est
Total Depth: 3,596 Plug Back Total Depth: 3,596
Amount of Surface Pipe Set and Cemented at: 15" @ 140' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 315'
feet depth to: surface w/ 450 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 Date: Aug 2, 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: WJ Date: 8/20/10

Operator Name: Petroleum Technologies, Inc. Lease Name: Patzner A Well #: 10
 Sec. 36 Twp. 17 S. R. 11 East West County: Barton

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
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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
Production		7"		0 - 3,282'	owc	70	
Liner		4-1/2"		3,209 -3,365'	owc	25	
Liner		5-1/2"		0 - 2,863'	60/40 OWC	115	4% gel

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	0 - 315'	OWC	450	

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
various	2,971 - 3,596	various	

TUBING RECORD: Size: <u>2-7/8"</u> Set At: <u>2,834</u> Packer At: <u>2,836</u>		Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>April 15, 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 checked="" 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: <u>2,971 - 3,596</u>
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Operator Name: Eternity Exploration, LLC Lease Name: DT Simon Well #: 1
 Sec. 24 Twp. 9 S. R. 26 East West County: Sheridan

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 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Micro Log Compensated Density/Neutron Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>2285</td> <td>+355</td> </tr> <tr> <td>Topeka</td> <td>3648</td> <td>-1008</td> </tr> <tr> <td>Heebner Shale</td> <td>3856</td> <td>-1216</td> </tr> <tr> <td>Toronto</td> <td>3880</td> <td>-1240</td> </tr> <tr> <td>Lansing</td> <td>3903</td> <td>-1263</td> </tr> <tr> <td>Base of Kansas City</td> <td>4128</td> <td>-1488</td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	2285	+355	Topeka	3648	-1008	Heebner Shale	3856	-1216	Toronto	3880	-1240	Lansing	3903	-1263	Base of Kansas City	4128	-1488
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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 casing	12 1/4	8 5/8	20#	235	common	125	3%cc & 2% gel
<i>Liner</i>		<i>5.5</i>		<i>2850</i>		<i>20054</i>	

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 <i>(Amount and Kind of Material Used)</i>	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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 036405

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

SERVICE POINT:
Great Bend KS

DATE <u>4-12-11</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>1:30 PM</u>	JOB FINISH <u>2:00 PM</u>
LEASE <u>Patzer</u>	WELL#	LOCATION <u>Chalkin 156.84 mile</u>			COUNTY <u>Barton</u>	STATE <u>KS</u>	
<u>OLD</u> OR NEW (Circle one)		East North into					

CONTRACTOR Steve well serv OWNER Petroleum Technisies

TYPE OF JOB <u>liner</u> HOLE SIZE <u>7 20#</u> ID <u>2850</u> CASING SIZE <u>5 1/2 14#</u> DEPTH <u>2850</u> TUBING SIZE DEPTH DRILL PIPE DEPTH TOOL DEPTH PRES. MAX <u>1400</u> MINIMUM MEAS. LINE SHOE JOINT CEMENT LEFT IN CSG PERFS. DISPLACEMENT <u>68 BBHs</u>	CEMENT AMOUNT ORDERED <u>2005X (60/40 4% 60)</u> <u>1/2 of 190 C-0-31</u> <u>used 115 SX</u> COMMON @ POZMIX @ GEL @ CHLORIDE @ ASC @
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EQUIPMENT PUMP TRUCK <u>CEMENTER wayne - D</u> # <u>131</u> HELPER <u>Alvin - R</u> BULK TRUCK # <u>260</u> DRIVER <u>Bob - R</u> BULK TRUCK # DRIVER	HANDLING @ MILEAGE @ TOTAL
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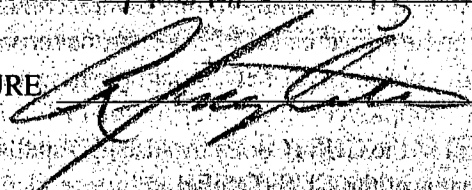
REMARKS:

hook hole 1 BBHs
hook up mix 115 SX
60/40 4% 60 gel and 1/2 of 190 C-0-31
shut down wash pump
and plug Release plug
Displace 68 BBHs at water
Cement did circulate
hook plug at 1400 PSI

CHARGE TO Petroleum Technisies

STREET _____
 CITY _____ STATE _____ ZIP _____

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 Richard Singleton
 SIGNATURE 

SERVICE

DEPTH OF JOB 2850
 PUMP TRUCK CHARGE @
 EXTRA FOOTAGE @
 MILEAGE @
 MANIFOLD @
 TOTAL

PLUG & FLOAT EQUIPMENT

1 1/2 Rubber Plug @
1 1/2 Butt weld Plug @
Shut @
 TOTAL

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

Well Completion

Type: Tubing & Packer Packerless Tubingless

	Surface	Production	Liner	Liner	Tubing
Size	15"	7"	4-1/2"	5-1/2"	2-7/8"
Setting Depth	0 - 140'	0' - 3,282'	3,209' - 3,365'	0' - 2,863'	0' - 2,834'
Amount of Cement	? sx	60 sx	25 sx	115 sx	N/A
Top of Cement	surface	3,108'	3,209'	surface	N/A
Bottom of Cement	140'	3,284'	3,365'	2,863'	N/A

If Alternate II cementing, complete the following:

Perforations / D.V. Tool at 315' feet, cemented to surface feet with 450 sx.

Tubing: Type Duolined Grade J-55

Packer: Type Halliburton R-4 Depth 2,836'

Annulus Corrosion Inhibitor: Type Bachman CIW-2124 packer fluid Concentration 5gal chem w/fresh wtr

List Logs Enclosed: None

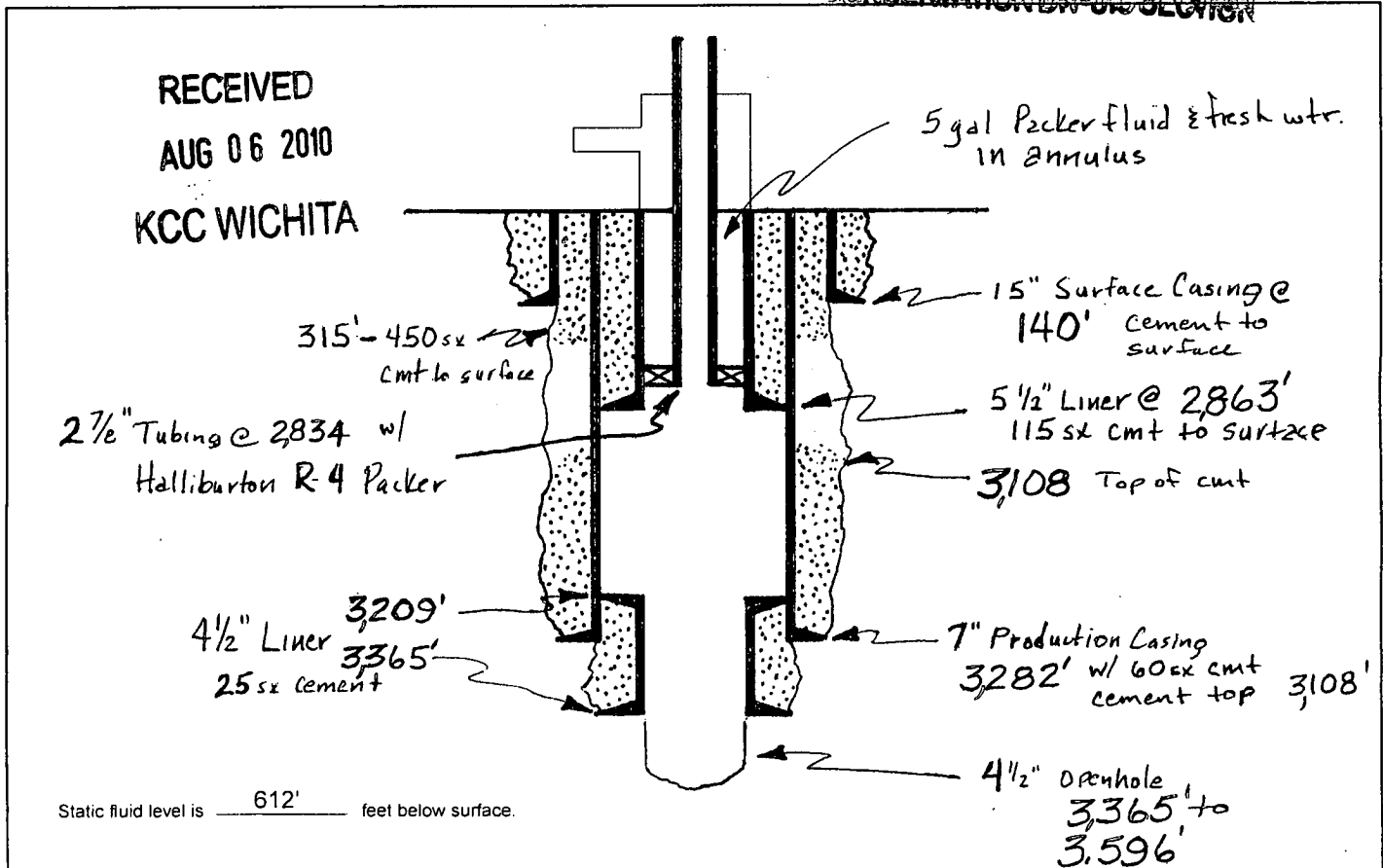
~~KANSAS CORPORATION COMPANY~~

Well Sketch

(To sketch installation, darken the appropriate lines, indicate cement, and show depths.)

AUG 17 2010

~~CONSERVATION DIVISION SECTION~~



CASING MECHANICAL INTEGRITY TEST

DOCKET # D-076, 90

EL2 W/2 SE 1/4
SE NW 1/4, Sec 36, T 17S, R 11 E/W

Disposal Well Enhanced Recovery:
Repressuring
Flood
Tertiary

1357 Feet from South Section Line
1637 Feet from East Section Line

Date injection started _____
API #15- _____

Lease Patzner A Well # 110
County Barton

Operator: Petroleum Technologies
Name &
Address 801 W 7th St. Ste. 412
Kansas City, MO 64112

Operator License # 8653
Contact Person Richard Singleton
Phone 816-392-4234

KCC
MAY 05 2010
HAYS, KS

Max. Auth. Injection Press. 500 Psi; Max Inj. Rate 600 bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____
Conductor Surface Production Liner Tubing
Size _____ 15 1/2 7" 5 1/2 4 1/2 Size ?
Set at _____ 140 3282 2861 3365 Set at 2833
Cement Top _____ w/c to D w/70SXS 115/SXS-0 3209 Type Dualine
" Bottom _____ _____ 2861 3365
DVI/Perf. 315' to D w/450 SXS TD (and plug back) 3596 ft. depth
Packer type Model R-4 Size 4/2 Set at 2833
Zone of injection 2971 ft. to ft. 3569 Perf. or open hole _____

Type MIT: Pressure: Radioactive Tracer Survey: Temperature Survey:

F Time: Start 0 Min. 15 Min. 30 Min.

E Pressures: 320 320 320 Set up 1
L **RECEIVED**
D AUG 06 2010 Set up 2
D KCC WICHITA Set up 3

System Pres. during test _____
Annular Pres. during test _____
Fluid loss during test _____ bbls.

Need file review w: well construction

Tested: Casing or Casing - Tubing Annulus

KANSAS CORPORATION COMMISSION

The bottom of the tested zone in shut in with A Packer

AUG 17 2010

Test Date 4/15/10 Using Brackeen Line Cleaning

CONSERVATION DIVING SECTION
Company's Equipment

The operator hereby certifies that the zone between 0 feet and 2833 feet

was the zone tested [Signature] President
Signature Title

The results were Satisfactory Marginal _____, Not Satisfactory _____

PASSED

State Agent: Bruce Rodie Title: P.I.R.T. II Witness: YES NO _____

REMARKS: There are well construction discrepancies w: 5 1/2" & 4 1/2" there has been a 4 1/2" liner

Origin. Conservation Div.: KDHE/T: Dist. Office *most recently - need updated well construction / schematic*

Computer Update **Is there Chemical Sealant or a Mechanical Casing patch in the annular space? (Y/N)**

GPS Lat 38.52557 GPS Long 98.48605

(If YES please describe in REMARKS)