

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 # 32073
Name: Thompson Oil Company
Address 1: 2260 North Dakota Road
Address 2: _____
City: Iola State: Ks Zip: 66749 + _____
Contact Person: Jerry Thompson
Phone: (620) 363-1045
CONTRACTOR: License # 33977
Name: EK Energy
Wellsite Geologist: _____
Purchaser: Pacer

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 #: _____

08/07/2010	08/10/2010	08/10/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15-001-30064-00-00
Spot Description: _____
nw se sw se Sec. 5 Twp. 24 S. R. 19 East West
385 Feet from North / South Line of Section
1,705 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: East Monfort Well #: BI-7
Field Name: Iola
Producing Formation: Tucker
Elevation: Ground: 1086 est Kelly Bushing: _____
Total Depth: 1033 Plug Back Total Depth: _____
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: 1021
feet depth to: surface w/ 120 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: *Jerry Thompson*
Title: owner Date: 09/07/2010

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: 9/14/10
RECEIVED

SEP 09 2010

KCC WICHITA

Operator Name: Thompson Oil Company Lease Name: East Monfort Well #: BI-7
 Sec. 5 Twp. 24 S. R. 19 East West County: Allen

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

Log Formation (Top), Depth and Datum Sample

Name Top Datum

see attached log

List All E. Logs Run:

CASING RECORD <input type="checkbox"/> New <input checked="" 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 5/8	20	20 ft	portland	5	n/a
long string	5 7/8	2 7/8	6.5	1021	portland	120	n/a

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: Yes No

Date of First, Resumed Production, SWD or ENHR. 08/18/2010

Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	30	n/a	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>1021-1033</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
 SEP 09 2010
 KCC WICHITA

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
8/12/2010	1095

Bill To
Jerry Thompson Thompson Oil 2260 North Dakota Rd. Iola, KS 66749

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	East Monfort		
1	8/10/10, Well # BI-7, circulated 120 sacks of cement to surface, pumped 260 gallons of water behind cement and shut in.	600.00	600.00T
1	water truck	100.00	100.00T
	Sales Tax	7.30%	51.10

Thank you for your business.

Total

\$751.10
RECEIVED

SEP 09 2010

KCC WICHITA

PAYLESS CONCRETE PRODUCTS, INC.

P.O. BOX 664
802 N. INDUSTRIAL RD.
IOLA, KS 66749

INVOICE

Invoice Number: 27115-16,79-80,93-94
Invoice Date: Aug 10, 2010 27223-2
Page: 1
Duplicate

Voice: 620-365-5588
Fax:

BI 7

Bill To:
CASH FOR C.O.D.'S
802 N. INDUSTRIAL RD.
IOLA, KS 66749

Ship to:
JEROME THOMPSON
2260 N. DAKOTA RD.
IOLA, KS 66749

Customer ID	Customer PO	Payment Terms	
CASH/C.O.D.	THOMPSON/MONFORTC-10	C.O.D.	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	TRUCK		8/10/10

Quantity	Item	Description	Unit Price	Amount
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/2/10 TICKET#27115 MONFORT C-10	7.60	456.00
1.00	TRUCKING	TRUCKING CHARGE 8/2/10 TICKET#27115 MONFORT C-10	50.00	50.00
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/2/10 TICKET#27116 MONFORT C-10	7.60	456.00
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/5/10 TICKET#27179 C-8	7.60	475.00
1.00	TRUCKING	TRUCKING CHARGE 8/5/10 TICKET#27179 C-8	50.00	50.00
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/5/10 TICKET#27180 C-8	7.60	475.00
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/6/10 TICKET#27193 E.MONFORT C-6	7.60	475.00
1.00	TRUCKING	TRUCKING CHARGE 8/6/10 TICKET#27193 E.MONFORT C-6	50.00	50.00
62.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/6/10 TICKET#27194 E. MONFORT C-6	7.60	475.00
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/10/10 TICKET#27223 B-17	7.60	456.00
60.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX 8/10/10	7.60	456.00
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				
TOTAL				Continued

Check/Credit Memo No:

RECEIVED
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	TRUCK		8/10/10

Quantity	Item	Description	Unit Price	Amount
1.00	TRUCKING	TICKET#27224 B-17 TRUCKING CHARGE 8/10/10 TICKET#27224 B-17	50.00	50.00

PAID
8-18-10
CK # 55766
4210.48

Subtotal	3,924.00
Sales Tax	286.48
Total Invoice Amount	4,210.48
Payment/Credit Applied	
TOTAL	4,210.48

Check/Credit Memo No:

RECEIVED
SEP 09 2010
KCC WICHITA