

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. Market, Suite 1000
City/State/Zip: Wichita, Kansas 67202
Purchaser: n/a
Operator Contact Person: Dean Pattisson, Operations Manager
Phone: (316) 267-4379 ext 107
Contractor: Name: Pratt Well Service
License: 5893
Wellsite Geologist: n/a

Designate Type of Completion:

☐ New Well ☐ Re-Entry ☒ Workover
☒ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: WOOLSEY OPERATING COMPANY, LLC

Well Name: Swartz 1 OWWO SWD

Original Comp. Date: 03/20/07 Original Total Depth: 5668

☐ Deepening ☒ Re-perf. ☐ Conv. to Enhr./SWD
☒ Plug Back ☐ Plug Back Total Depth

☐ Commingled Docket No. _____

☐ Dual Completion Docket No. _____

☐ Other (SWD or Enhr.?) Docket No. D - 28,865 (terminated)

4/29/10 5/11/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-20081 00 02

County: Barber

57 S. C SW NE Sec. 1 Twp. 34 S. R. 11 ☐ East ☒ West

2037' FNL 3296 feet from S (circle one) Line of Section

1980' FEL 2018 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: SWARTZ A Well #: 2

Field Name: Roundup South

Producing Formation: Mississippian

Elevation: Ground: 1430 Kelly Bushing: 1441

Total Depth: 5668 Plug Back Total Depth: 5108

Amount of Surface Pipe Set and Cemented at _____ Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from n/a

feet depth to _____ w/ _____ 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: AUG 19 2010

Operator Name: n/a

Lease Name: _____ License No.: KCC WICHITA

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: _____

Title: Dean Pattisson, Operations Manager Date: 8/18/10

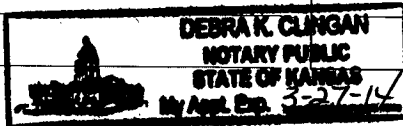
Subscribed and sworn to before me this 18th day of August

20 10

Notary Public: Debra K. Clingan

Debra K. Clingan

Date Commission Expires: March 27, 2014



KCC Office Use ONLY

N Letter of Confidentiality Received

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

WO - DLG 8/20/10

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: SWARTZ A Well #: 2
 Sec. 1 Twp. 34 S. R. 11 ☐ East ☒ West County: Barber

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 <i>(Attach Additional Sheets)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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
4	Miss zone - 4600'-4630' w/ 4 SPF	Acid: 3900 gal 10% MIRA	4600' -
2	Miss zone - 4632'-4680' w/ 2 SPF	Frac: 367,800 gal treated 2% KCl water,	4680' OA
		133,500# 30/70 sand, 25,000# 16/30 sand	
		& 12,000# 16/30 resin coated sand	
	CIBP	Set with 1 sx cement	5108'
TUBING RECORD		Liner Run	
Size 2 3/8"	Set At 4736'	Packer At n/a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 05/18/2010		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. 28.8	Gas Mcf 105	Water Bbls. 250
		Gas-Oil Ratio 3646 : 1	Gravity 26.2

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease
(If vented, Submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify)

4600' - 4680' OA

