

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL
Form ACO-1
June 2009

OCT 06 2010

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA

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, LLC.

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 #: _____

<u>5-5-2010</u>	<u>5-7-2010</u>	<u>5-25-2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 107-24167-00-00
Spot Description: SW NE SW NE
SW NE SW NE Sec. 21 Twp. 20 S. R. 22 East West
3,490 Feet from North / South Line of Section
1,685 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-33
Field Name: Goodrich-Parker
Producing Formation: Squirrel
Elevation: Ground: 981 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/ 102 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: [Signature]
Title: Authorized Agent Date: 10-3-10

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: Dog Date: 10/2/10

Operator Name: JTC Oil, Inc. Lease Name: Ralph Nickell Sr. Well #: I-33

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.

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

No Geologist at Wellsite

List All E. Logs Run:
Gamma Ray / Neutron

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		3	
Longstring	5 5/8	2 7/8		621	Portland	102	50/50 Poz.

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
2	560 -570 Perfs	2 " DML RTG 180 Phase / 21 perfs	560-570
2	570.5 - 580.5 Perfs	2 " DML RTG 180 Phase / 21 perfs	570.5 - 580.5
2	581-591 Perfs	2 " DML RTG 180 Phase / 21 perfs	581-591

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input 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: _____ _____
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED

OCT 06 2010

KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 26919

LOCATION Ottawa KS

FOREMAN Fred Maden

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. #238	NE 28	20	22	LN
CUSTOMER JTC Oil Inc			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS P.O. Box 910			506	Fred	Safety	Mtg
CITY STATE ZIP CODE Louisburg KS 66453			368	Chuck	Carl	
			548	Tom		
			436	JPGulick		

JOB TYPE Long String HOLE SIZE 6" HOLE DEPTH 630' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 621' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 7/8" Plug
 DISPLACEMENT 3.6 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 B PM

REMARKS: Check casing depth w/ wireline. Mix Pump 200# Premium Gel
Flush. Mix Pump 102 sks 50/50 For Mix Cement 2 7/8" Gel
4th pheno seal per sack. Cement to surface. Flush pump & lines
clean. Displace 2 7/8" Rubber Plug to casing TD w/ 3.6 BBL
Fresh water. Pressure to 600# PSP. Hold Pressure for 30 min
M.I.T. Release Pressure to set float valve. Shut in casing

JTC Drilling

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		900.00
5406	45 mi	MILEAGE Pump Truck		159.25
5402	621'	Casing Footage		N/C
5407A	192.78	Ton Miles		231.34
5502C	2 hrs	80 BBL Vac Truck #436		192.00
1124	100 sks	50/50 For Mix Cement		955.00
1118B	372#	Premium Gel		63.24
1107A	26#	Pheno Seal	RECEIVED	29.13
4402	1	2 7/8" Rubber Plug	OCT 06 2010	23.00
			KCC WICHITA	
		WO 234410		
			5.3%	SALES TAX 56.23
				ESTIMATED TOTAL 2615.10

Ravin 3737

AUTHORIZATION

Jaylen Cashill

TITLE

DATE

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.