

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 # 33677
Name: Canary Operating Corporation
Address 1: 11184 Antioch Road Suite 286
Address 2: _____
City: Overland Park State: ks Zip: 66210 + _____
Contact Person: Steve Allee
Phone: (913) 239-8960
CONTRACTOR: License # 23799-33677
Name: RLC Drilling, Inc. Canary Oper
Wellsite Geologist: Rex Ashlock
Purchaser: Canary Pipeline Corp.

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>02/04/2008</u>	<u>02/06/2008</u>	<u>02/19/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - ²⁸⁵⁴⁹121-26325-0000

Spot Description: _____

nw - se - se - _____ Sec. 13 Twp. 16 S. R. 24 East West

990 Feet from North / South Line of Section

990 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Miami

Lease Name: Brugger Well #: 50-13-16-24

Field Name: Paola-Rantoul

Producing Formation: Lexington, Summit, Mulky

Elevation: Ground: 1045 Kelly Bushing: _____

Total Depth: 629 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: 510

feet depth to: surface w/ 196 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: na ppm Fluid volume: _____ bbls

Dewatering method used: evaporation

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: agent Date: 09/27/2010

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: DJG Date: 10/11/10

Operator Name: Canary Operating Corporation Lease Name: Brugger Well #: 50-13-16-24
 Sec. 13 Twp. 16 S. R. 24 East West County: Miami

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 checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: cement bond / ccl	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Base Kansas City</td> <td>281</td> <td></td> </tr> <tr> <td>Lexington</td> <td>510</td> <td></td> </tr> <tr> <td>Summit</td> <td>552</td> <td></td> </tr> <tr> <td>Mulky</td> <td>571</td> <td></td> </tr> </table>	Name	Top	Datum	Base Kansas City	281		Lexington	510		Summit	552		Mulky	571	
Name	Top	Datum														
Base Kansas City	281															
Lexington	510															
Summit	552															
Mulky	571															

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	13"	10.75"	40.50	20	portland	5	none
production	9.875"	7.0	20	512	portland	196	2%gel 3%CaCl2

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
	open hole completed from 510-629	<div style="font-size: 2em; font-weight: bold;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold;">SEP 30 2010</div> <div style="font-size: 1.5em; font-weight: bold;">KCC WICHITA</div>	
	open hole drilled with 6.25" bit		

TUBING RECORD:	Size: <u>1" to be set at 600' +/-</u>	Set At:	Packer At:	Liner Run: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. will up date when prod. lines installed		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. <u>0</u>	Gas Mcf <u>na</u>	Water Bbls. <u>na</u>	Gas-Oil Ratio <u>na</u>
		Gravity <u>na</u>		

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 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: <u>510-629</u>
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CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 16002
 LOCATION Ottawa
 FOREMAN Alan Made

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
2-19-08	2642	Brigger # 50	13	16	24	Mi	
CUSTOMER Lanary Resources			TRUCK #		DRIVER		
MAILING ADDRESS 7230 W 162nd Ste A6			516		Alan M		
CITY Stilwell			368		Bill Z		
STATE KS			370		Ken H		
ZIP CODE 66085			503		Brian J		
JOB TYPE	long string	HOLE SIZE	9 1/2	HOLE DEPTH	510	CASING SIZE & WEIGHT	7"
CASING DEPTH	508	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	yes
DISPLACEMENT	20bb	DISPLACEMENT PSI		MIX PSI		RATE	46pm
REMARKS:	Mixed & pumped 650# gel with 100# cottonseed hulls to try and get circulation. Mixed & pumped 104 5x Portland "A", 270 calcium, 270 gel. Displaced casing with 20 bbl clean water. Closed valves.						

Customer supplied one water truck also

Alan Made

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	568	876.00
5406	35	MILEAGE	368	120.75
5402	508'	casing footage	368	
5407	min	ten mileage	503	300.00
5502C	3	80 vac	370	282.00
1102	196#	calcium chloride		137.20
1105	846# 100#	cottonseed hull		37.00
1118B	846#	gel		135.36
1104.5	100.5x	Portland "A"		1290.00
		RECEIVED	546	3177.31
		SEP 30 2010		
		KCC WICHITA		
	Thanks!		6.65	104.78
			SALES TAX	104.78
			ESTIMATED TOTAL	3282.09

AUTHORIZATION R.R. [Signature]

TITLE 220343

DATE 2/19/08