

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32679
Name: AAS Oil Company, Inc.
Address 1: 2508 Edgemont Dr. Ste. #4
Address 2: _____
City: Arkansas City State: KS Zip: 67005 + _____
Contact Person: Dennis K. Shurtz
Phone: (620) 442 7940
CONTRACTOR: License # 32854
Name: Gulick Drilling Company
Wellsite Geologist: Mike Engelbretch
Purchaser: _____

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>4-1-10</u>	<u>4-10-10</u>	<u>4-26-10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 035-24354-00-00
Spot Description: NE SW SW
w2 NE SW SW Sec. 20 Twp. 34 S. R. 3 East West
990 Feet from North / South Line of Section
795 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Cowley
Lease Name: Marrs Well #: 3
Field Name: Gibson
Producing Formation: Cleveland
Elevation: Ground: 1151 Kelly Bushing: 1159
Total Depth: 3470 Plug Back Total Depth: 3456
Amount of Surface Pipe Set and Cemented at: 318 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 3300 ppm Fluid volume: 500 bbls
Dewatering method used: Natural
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: Pres. Date: 10-7-10

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KCC WICHITA
 Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 10/20/10

Operator Name: AAS Oil Company, Inc. Lease Name: Marrs Well #: 3
 Sec. 20 Twp. 34 S. R. 3 East West County: Cowley

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 checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Compensated Porosity Dual Injection Log Cement Bond Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input 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>Cleveland</td> <td>3016</td> <td>-1857</td> </tr> <tr> <td>Mississippi</td> <td>3400</td> <td>-2249</td> </tr> </table>	Name	Top	Datum	Cleveland	3016	-1857	Mississippi	3400	-2249
Name	Top	Datum								
Cleveland	3016	-1857								
Mississippi	3400	-2249								

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
Surface	12 1/4	8 5/8	23	318'	Common	200	
Product	7 7/8	4 1/2	10.5	3470'	Class A	225	

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
2	Perforate Miss 3401'-3404	200 gal. 10% MCA	3401-3404
4	Perforate Cleveland 3016'-3023	400 gal. 10% MCA - frac w/10100 #sand	3016-3023

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:		RECEIVED OCT 13 2010 KCC WICHITA
				<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	
	10		20			

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input 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: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 24132
LOCATION E. Downs #80
FOREMAN Larry Storm

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
4-11-10	1091	MARRS #3	20	34S	3E	Cowley
CUSTOMER AAS Drilling Co			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 2508 Edgemont Dr Ste #4			467	Ben		
CITY Arkansas City			302	Ben		
STATE KS						
ZIP CODE 67005						

JOB TYPE <u>Prod</u>	HOLE SIZE <u>7 7/8</u>	HOLE DEPTH <u>3470</u>	CASING SIZE & WEIGHT <u>4 1/2 10 1/2</u>
CASING DEPTH <u>3469</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>12.15</u>	SLURRY VOL <u>54</u>	WATER gal/sk <u>7.25</u>	CEMENT LEFT in CASING <u>2 ft</u>
DISPLACEMENT <u>12.15</u>	DISPLACEMENT PSI <u>850</u>	MIX PSI <u>0</u>	RATE <u>5.25</u>

REMARKS: Safety Meeting - Ripped up - Broke Circulation - Pumped 5
666 fresh water, 12 bbls Mud Flush - 5 bbls Freshwater, PAD - MARRS
225 sks Thickset + 5% Kol Seal + 1/2 lb Poly Flakes - Flashed Pump
& Pies - Displaced Slurry to land plug at 1000lb Released Mud
held.

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	900.00	900.00
5406	65	MILEAGE	3.55	230.75
5402	969	Fracture	1.20	1162.80
1126A	225	sk Thick-set	16.50	3712.50
1110A	1125	103 Kol Seal	.40	450.00
1107	112	103 Poly Flake	2.00	224.00
1144	5	Mud Flush	26.25	131.25
5407A	65	Bulk Desliver 14 X 11.75 tons	1.20	78.00
4161	1	4 1/2 ATV Float Shoe	265.00	265.00
4453	1	4 1/2 Latch down	215.00	215.00
4129	6	4 1/2 Centrifuges	39.00	234.00
4183	3	4 1/2 Cement Buckets	201.00	603.00
		Subtotal		8075.80
		SALES TAX		338.41
		ESTIMATED TOTAL		8414.21

AUTHORIZATION [Signature]

TITLE 233101

DATE



TICKET NUMBER 23361
LOCATION E Dorado #80
FOREMAN Jim Thomas

Box 884, Chanute, KS 66720
431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-2-10	1091	Marrs #3	20	345	3E	Cowley
CUSTOMER A.A.S. Oil Company			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 2508 Edgemont Dr. Suite 4			446	Jacob		
CITY STATE ZIP CODE Arkansas City Ks 67005			491	Bobby		

JOB TYPE Surface Pipe HOLE SIZE 12 1/4" HOLE DEPTH 326 ft. CASING SIZE & WEIGHT 8 7/8" 23.0#
CASING DEPTH 326 ft. DRILL PIPE _____ TUBING _____ OTHER New
SLURRY WEIGHT 15.0-155 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Soft meeting Rig up to 8 7/8" Brake circulation Pump 200 sks class A -
3 1/2 cc 1/4" Poly-Flake, shut down, release 8 7/8" WPP & disp. Cement to 318 ft.
* Shut in. Cement circulated in the cellar, Wash up & rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	700.00	700.00
5406	59	MILEAGE	3.55	209.45
11045	200 sks	Class A	13.10	2620.00
1102	600 lbs	calcium Chloride	.73	438.00
1107	225 lbs	Poly-Flake	2.00	450.00
4432	1	8 7/8" Wooden Plug	76.00	76.00
5407A	9.4 Tons	59 miles Bulk Del.	1.20	665.52
			RECEIVED	
			OCT 13 2010	
			KCO WICHITA	
			Subtotal	5158.97
			SALES TAX	207.81
			ESTIMATED TOTAL	5366.78

Ravin 3737

AUTHORIZATION Jacob

233651

TITLE _____

DATE _____