



KANSAS CORPORATION COMMISSION 1046317  
OIL & GAS CONSERVATION DIVISION

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 # 34170  
Name: Sirius Energy Corp.  
Address 1: 526 COUNTRY PL, SOUTH  
Address 2: \_\_\_\_\_  
City: ABILENE State: TX Zip: 79606 + 7032  
Contact Person: Randy Teter  
Phone: ( 785 ) 4488571  
CONTRACTOR: License # 32079  
Name: Leis, John E.  
Wellsite Geologist: n/a  
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>08/25/2010</u>	<u>08/25/2010</u>	<u>08/25/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-24896-00-00

Spot Description: \_\_\_\_\_

SW NE SW NW Sec. 13 Twp. 21 S. R. 20  East  West  
3,533 Feet from  North /  South Line of Section  
4,336 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Anderson

Lease Name: West Van Winkle Well #: V-23

Field Name: \_\_\_\_\_

Producing Formation: Squirrel sand

Elevation: Ground: 1067 Kelly Bushing: 1072

Total Depth: 735 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 21 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: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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.

Submitted Electronically

**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: NAOMI JAMES Date: 11/02/2010



1046317

Operator Name: Sirius Energy Corp. Lease Name: West Van Winkle Well #: V-23  
 Sec. 13 Twp. 21 S. R. 20  East  West County: Anderson

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:  Gamma ray / Neutron / CCL	<input checked="" 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>Squirrel sand</td> <td>659</td> <td>GL</td> </tr> </table>	Name	Top	Datum	Squirrel sand	659	GL
Name	Top	Datum					
Squirrel sand	659	GL					

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	9.875	7	20	21	Portland	6	
Production	5.625	2.875	6.5	730	OWC	66	Kol seal 40%

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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

TUBING RECORD: Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR. <b>09/01/2010</b>	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. <b>5</b> Gas Mcf _____ Water Bbls. <b>20</b> Gas-Oil Ratio _____ Gravity _____

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input 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: _____ _____
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# MIDWEST SURVEYS

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Phone 913-755-2128 • Fax 913-755-6533

## Perforation Record

**Company:** Sirius Energy Corp.

**Lease/Field:** West Van Winkle Lease

**Well:** V-23

**County, State:** Anderson County, Kansas

**Service Order #:** 22766

**Purchase Order #:** N/A

**Date:** 8/30/2010

**Perforated @:**

659.0 to 669.0	21 Perfs
670.0 to 680.0	21 Perfs
693.0 to 703.0	21 Perfs

**Type of Jet, Gun or Charge:** 2" DML RTG 180 Degree Phase

**Number of Jets, Guns or Charges:** Sixty Three (63)

**Casing Size:** 2 7/8"

**GARNETT TRUE VALUE HOMECENTER**  
 410 N Maple  
 Garnett, KS 66032  
 (785) 448-7106 FAX (785) 448-7135

Merchant Copy

**INVOICE**

THIS COPY MUST REMAIN AT  
 MERCHANT AT ALL TIMES!

Page: 1	Invoice: <b>10162823</b>
Special Instructions	Time: 11:45:14 Ship Date: 08/25/10 Invoice Date: 08/25/10 Due Date: 09/08/10
Sale rep #: WAYNE WAYNE STANLEY	Acct rep code:
Sold To: SIRIUS ENERGY CORP 528 COUNTRYPLACE SOUTH ABILENE, TX 79608-7032	Ship To: SIRIUS ENERGY CORP (325) 665-9152
Customer #: 0001860	Customer PO: Order By:

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
60.00	60.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	5.7900 bag	5.7900	347.40
60.00	60.00	P	BAG	CPPC	PORTLAND CEMENT-94#	9.4800 bag	9.4800	569.40

Surface casing and production casing are cemented with company tools.

6 sacks portland cement are used for surface casing.  
 33 sacks portland cement and 33 sacks fly ash are used for production casing (=40% kol seal).

The remaining cement and fly ash from this ticket are used for plugging purposes as per the submitted CP-1 and CP-4.

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$916.80
SHIP VIA Customer Pick up				Taxable	916.80
RECEIVED COMPLETE AND IN GOOD CONDITION				Non-taxable	0.00
<i>X Randy Jelen</i>				Tax #	
				Sales tax	76.10
				<b>TOTAL</b>	<b>\$992.90</b>

1 - Merchant Copy

