

CONFIDENTIAL

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

10/12/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 8914

Name: H & C Oil Operating, Inc.

Address 1: P.O. Box 86

Address 2: _____

City: Plainville State: KS Zip: 67663 + 0 0 8 6

Contact Person: Charles R. Ramsay

Phone: (785) 434-7434

CONTRACTOR: License # 33493

Name: American Eagle Drilling, LLC

Wellsite Geologist: Marc Downing

Purchaser: _____

Designate Type of Completion:

- New Well _____ Re-Entry _____ Workover
- _____ Oil _____ SWD _____ SIOW
- _____ Gas _____ ENHR _____ SIGW
- _____ CM (Coal Bed Methane) _____ Temp. Abd.
- Dry _____ Other _____
(Core, WSW, Expl., Cathodic, 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

_____ Plug Back: _____ Plug Back Total Depth

_____ Commingled Docket No.: _____

_____ Dual Completion Docket No.: _____

_____ Other (SWD or Enhr.?) Docket No.: _____

09/11/2009 09/17/2009 09/17/2009

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23570-00-00

Spot Description: NE SE SE

NW NE SE SE Sec. 16 Twp. 6 S. R. 23 East West

1200 Feet from North / South Line of Section

500 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Graham

Lease Name: Griffey Farms Well #: 16-1

Field Name: Wildcat

Producing Formation: _____

Elevation: Ground: 2382 Kelly Bushing: 2387

Total Depth: 3855' Plug Back Total Depth: 3648'

Amount of Surface Pipe Set and Cemented at: 256 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/ _____ ^{sq cm.}

PA - Dlg - 10/16/09

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 No.: _____

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: Charles R. Ramsay

Title: PRESIDENT Date: 10/12/09

Subscribed and sworn to before me this 12th day of October

20 09

Notary Public: Irene Zellhoelter

Date Commission Expires: _____

KCC Office Use ONLY

Letter of Confidentiality Received

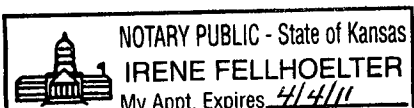
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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Operator Name: H & C Oil Operating, Inc. Lease Name: Griffey Farms Well #: 16-1
 Sec. 16 Twp. 6 S. R. 23 East West County: Graham

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 <input checked="" type="checkbox"/> Yes <input 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 <i>(Submit Copy)</i> List All E. Logs Run: Borehole Compensated sonic log, dual induction log, dual compensated porosity log, Micro log	<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>Topeka</td> <td>3588</td> <td>-1001</td> </tr> <tr> <td>Heebner</td> <td>3585</td> <td>-1198</td> </tr> <tr> <td>Toronto</td> <td>3611</td> <td>-1224</td> </tr> <tr> <td>Lansing Kansas City</td> <td>3626</td> <td>-1239</td> </tr> </table>	Name	Top	Datum	Topeka	3588	-1001	Heebner	3585	-1198	Toronto	3611	-1224	Lansing Kansas City	3626	-1239
Name	Top	Datum														
Topeka	3588	-1001														
Heebner	3585	-1198														
Toronto	3611	-1224														
Lansing Kansas City	3626	-1239														

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#	256'	60/40 posmix	165	2%gel, 3% cc

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

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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: <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

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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 036251

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT GB
Lawrence, KS

DATE <u>9-17-09</u>	SEC <u>16</u>	TWP. <u>6S</u>	RANGE <u>230</u>	CALLED OUT	ON LOCATION	JOB START <u>3:30 AM</u>	JOB FINISH <u>4:00 AM</u>
LEASE <u>Griffey Farms</u>	WELL # <u>16-1</u>	LOCATION <u>Hill City N. to CCM W to</u>		COUNTY <u>Grant</u>	STATE <u>KS</u>		
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)			<u>250th 5 1/2 W/INTO</u>				

CONTRACTOR American Eagle
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 3055
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 3648
 TOOL _____ DEPTH _____
 PRES. MAX. 2000 MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Fresh water

OWNER H+C Oil Operating Inc.
 CEMENT AMOUNT ORDERED 205 sk. 60/40 4 1/2 gal
1/4# Flo Seal
 COMMON 123 @ 13.5 1660.5
 POZMIX 82 @ 2.55 2091.0
 GEL 1 @ 20.25 20.25
 CHLORIDE _____ @ _____
 ASC _____ @ _____
Flo Seal 51 @ 2.45 124.95
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 102 @ 2.25 229.50
 MILEAGE 12/58/mile 458.00
 TOTAL 3234.80

EQUIPMENT
 PUMP TRUCK CEMENTER Randy
 # 181 HELPER Gaiten
 BULK TRUCK
 # 347 DRIVER Darren
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:
On location Safety meeting.
Rig up
1- 3648 - 50 sk
2- 1235 - 100 sk
2- 315 - 40 sk
4- 40' - 10 sk
Rathole - 30 sk
Rig down

CHARGE TO: H+C Oil Operating Inc.
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE
 DEPTH OF JOB 3648
 PUMP TRUCK CHARGE _____ 875.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 45 @ 7.00 315.00
 MANIFOLD _____ @ _____
 _____ @ _____
 TOTAL 1190.00

Thank you!

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

PRINTED NAME Todd E. Mersch
 SIGNATURE Todd E. Mersch

SALES TAX (If Any) _____
 TOTAL CHARGES 4424.80
 DISCOUNT _____ IF PAID IN 30 DAYS

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KCC WICHITA

ALLIED CEMENTING CO., INC. 20125

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell

DATE <u>9-10-09</u>	SEC. <u>16</u>	TWP. <u>6</u>	RANGE <u>23</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00pm</u>	JOB FINISH <u>2:30pm</u>
LEASE <u>Griffey Farms</u>	WELL # <u>16-1</u>		LOCATION <u>Hill City N to CCRD</u>			COUNTY <u>Graham</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>W to 250 RD 1/2 S W into</u>				

CONTRACTOR American Eagle #3
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 260'
 CASING SIZE 8 5/8 23' DEPTH 259
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 15' 2 3/4
 EQUIPMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 16.5 60/40 30% CC
2906cc
 COMMON .99 @ 18.50 1836.50
 POZMIX .66 @ 7.55 498.30
 GEL .3 @ 20.25 60.75
 CHLORIDE .5 @ 51.50 257.50
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING .82 @ 2.25 184.50
 MILEAGE 10.66/mile 369.00
 TOTAL 2706.55

PUMP TRUCK CEMENTER Craig
 # 398 HELPER Glenn
 BULK TRUCK
 # 378 DRIVER Todd
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Surface Pipe on Bottom. Est Circulation
Mix Cement & Displace
Cement Circulated.

Thanks!

CHARGE TO: H+C O.I
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 991.00
 EXTRA FOOTAGE @ _____
 MILEAGE 45 @ 7.00 315.00
 MANIFOLD @ _____
 _____ @ _____
 TOTAL 1306.00

PLUG & FLOAT EQUIPMENT

KCC

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TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE [circled]
 DISCOUNT [circled] IF PAID IN 30 DAYS

SIGNATURE Todd E. Mann

PRINTED NAME

RECEIVED
 OCT 15 2009
 KCC WICHITA