

ORIGINAL

KANSAS CORPORATION COMMISSION
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 # 34353
Name: Multiplex Resources, Inc
Address 1: 1300 Rollingbrook Dr., Suite 605
Address 2: _____
City: Baytown State: TX Zip: 77521 + _____
Contact Person: Brandon Guiles
Phone: (281) 4243242
CONTRACTOR: License # 33900
Name: Howdown Drilling
Wellsite Geologist: NA
Purchaser: High Sierra

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 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>04/20/10</u>	<u>04/21/10</u>	<u>04/25/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001-29999-00-00
Spot Description: _____
ne ne sw sw Sec. 22 Twp. 26 S. R. 18 East West
1,050 Feet from North / South Line of Section
4,100 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: Dice Well #: A8
Field Name: Humboldt Chanute
Producing Formation: Bartlesville
Elevation: Ground: 964 Kelly Bushing: _____
Total Depth: 840 Plug Back Total Depth: 819
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: 840'
feet depth to: surface w/ 108 sx cnt.

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: (see attached)
Title: President Date: 10/18/2010

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: Dlg
RECEIVED
OCT 23 2010
KCC WICHITA
11/8/10

Operator Name: Multiplex Resources, Inc Lease Name: Dice Well #: A8
 Sec. 22 Twp. 26 S. R. 18 East West County: Allen

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i>	<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>Bartlesville</td> <td>769</td> <td>Gamma Ray</td> </tr> </table>	Name	Top	Datum	Bartlesville	769	Gamma Ray
Name	Top	Datum					
Bartlesville	769	Gamma Ray					
List All E. Logs Run: Gamma Ray							

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
Production	5 7/8	2 7/8	5.5	819	OWC	108	3% GEL, METSO, COTTONSEED
Surface	7 7/8	7	12.5	20	CLASS A	5	

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	769-776	4,000lbs 20/40 sand - 25 Gals. 15% HCL	769-776

TUBING RECORD: Size: <u>1"</u> Set At: <u>764</u> Packer At: <u>NA</u> Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No											
Date of First, Resumed Production, SWD or ENHR. <u>05/25/10</u>	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	<table style="width:100%; border-collapse: collapse;"> <tr> <td>Oil Bbls.</td> <td>Gas Mcf</td> <td>Water Bbls.</td> <td>Gas-Oil Ratio</td> <td>Gravity</td> </tr> <tr> <td>5</td> <td> </td> <td>10</td> <td>0</td> <td>28</td> </tr> </table>	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	5		10	0	28
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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)</i> <i>(Submit ACO-4)</i> <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 25 2010

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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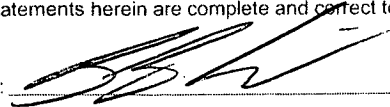
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Signature: 
Title: President Date: 10/04/2010

KCC Office Use ONLY
 Letter of Confidentiality Received **RECEIVED**
Date: _____
 Confidential Release Date: _____ **OCT 07 2010**
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 Geologist Report Received
 UIC Distribution
KCC WICHITA
ALT I II III Approved by: _____ Date: _____

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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED
OCT 07 2010
KCC WICHITA

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
4/21/2010	A-44935

Cement Treatment Report

Multi Plex Resources, LLC
1300 Rolling Brook Drive, Ste. 605
Baytown, TX 77521

(x) Landed Plug on Bottom at 600 PSI
(x) Shut in Pressure 600
(x) Good Cement Returns
() Topped off well with _____ sacks
(x) Set Float Shoe - shut it

TYPE OF TREATMENT: Production Casing
HOLE SIZE: 5 7/8"
TOTAL DEPTH: 840

Well Name	Terms	Due Date	Tax ID # 48-1103536	
	Net 15 days	4/21/2010		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Run and cement 2 7/8"	828	3.00	2,484.00	
Sales Tax		6.30%	0.00	
<p><i>New well</i></p> <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Dice #A-8 Allen County Sec: 22 Twn: 26 Rge: 18 API: </div> <p><i>pd 4-23-10</i> <i>check 12/12</i></p> <p><i>#73550</i></p> <p><i>Mike</i> <i>620-433-7196</i></p> <p>PAID <i>6-8-10</i></p>				

Hooked onto 2 7/8" casing. Established circulation with 1.5 barrels of water. 3 GEL. 1 METSO. COTTONSEED. 2 RUBBER PLUGS ahead. blended 108 sacks of OWC cement. dropped rubber plugs and pumped 5 barrels of water

2

Total	\$2,484.00
Payments/Credits	\$0.00
Balance Due	\$2,484.00

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OCT 07 2010

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Sample Type	Footage Taken @	
soil	0_3	
Lime	3_31	
lime	31_53	
Shale	53_67	
Lime	120_247	
Shale	247_252	
Lime	252_276	
Shale	276_371	
Lime	371_374	
Shale	374_416	
Lime	416_430	
Shale	430_435	
Lime	435_441	
shale	441_453	
wiser sand	453_458	<i>= 5' oil on pits/good jep/string oder</i>
Shale	458_531	
lime	531_533	
shale	533_539	
Lime	539_550	
Shale	550_553	
broken lime	553_567	
Shale	567_600	
Lime	600_608	
Shale	608_610	
Lime	610_611	
shale	611_623	
Lime	623_628	
shale	628_707	
Lime	707_709	
Shale	709_759	
mucky shale	759_768	
shale, oil sand	768_771	770 top of oil sand
oil sand	771_773	
broken sand, oil	773_775	
broken sand, oder	775_777	
shale	777_800	some sand, no oil
sand, oil show	800_801	
shale, some oder	801_802.5	
broken sand	802.5_804	oder
broken sand/shale	804_840	
T.D.		840

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