

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 # 5798
Name: WEILERT, MICHAEL D DBA MICHAEL D WEILERT OIL CO.
Address 1: 866 230TH AVE
Address 2: _____
City: HAYS State: KS Zip: 67601 + _____
Contact Person: CURTIS WEILERT
Phone: (785) 656-3540
CONTRACTOR: License # 33575
Name: WW DRILLING, LLC
Wellsite Geologist: JERRY GREEN
Purchaser: NONE

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 #: _____

10/15/2010	10/20/2010	10/20/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-26032-00-00

Spot Description: _____
NW SE SE NE Sec. 35 Twp. 13 S. R. 20 East West
3,010 Feet from North / South Line of Section
341 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: ELLIS
Lease Name: J A ENGEL Well #: 6
Field Name: IRVIN
Producing Formation: NONE
Elevation: Ground: 2223 Kelly Bushing: 2228
Total Depth: 3866 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 233 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: 65,000 ppm Fluid volume: 500 bbls
Dewatering method used: AIR DRY - BACKFILL

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: Curtis Weilert
Title: Production Manager Date: 11-17-2010

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: DLA Dig Date: 11/23/10

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Operator Name: WEILERT, MICHAEL D DBA MICHAEL D WEILERT OIL CO. Lease Name: J A ENGEL Well #: 6
 Sec. 35 Twp. 13 S. R. 20 East West County: ELLIS

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 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 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:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>HEEBNER</td> <td>3471</td> <td>-1243</td> </tr> <tr> <td>TORONTO</td> <td>3489</td> <td>-1264</td> </tr> <tr> <td>LANSING</td> <td>3510</td> <td>-1282</td> </tr> <tr> <td>ARBUCKLE</td> <td>3842</td> <td>-1614</td> </tr> <tr> <td>RTD</td> <td>3865</td> <td></td> </tr> </tbody> </table>	Name	Top	Datum	HEEBNER	3471	-1243	TORONTO	3489	-1264	LANSING	3510	-1282	ARBUCKLE	3842	-1614	RTD	3865	
Name	Top	Datum																	
HEEBNER	3471	-1243																	
TORONTO	3489	-1264																	
LANSING	3510	-1282																	
ARBUCKLE	3842	-1614																	
RTD	3865																		

CASING RECORD <input checked="" 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	12.25	8.625	20#	233	COMMON	150	3%CC & 2% GEL

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

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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 041755

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

SERVICE POINT:
Russell KS

DATE <u>10-15-10</u>	SEC. <u>35</u>	TWP. <u>13S</u>	RANGE <u>20W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:00 PM</u>	JOB FINISH <u>7:30 PM</u>
LEASE <u>JAEHCEL</u>	WELL # <u>6</u>	LOCATION <u>ELLIS KS, E ON HWY 40</u>			COUNTY <u>ELLIS</u>	STATE <u>KANSAS</u>	
OLD OR NEW (Circle one)		TO <u>150 RD. 4S 1/2 W INTD</u>					

CONTRACTOR WW Dalg Rig #6
 TYPE OF JOB SURFACE
 HOLE SIZE 12 1/4 T.D. 234
 CASING SIZE 8 7/8 New DEPTH 234
 TUBING SIZE 20# CSG DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 15'
 PERFS.
 DISPLACEMENT 14 / BBL

EQUIPMENT
 PUMP TRUCK CEMENTER Glen
 # 378 HELPER RICHARD
 BULK TRUCK
 # 378 DRIVER RON
 BULK TRUCK
 # DRIVER

REMARKS:
Set 8 7/8 Surface CSG @
Cement w/ 150 SX Com 3+2
Displaced 14 BBL H₂O at Shut
in @ 250 #.
Cement + Did. Circulate.
THANKS

CHARGE TO: Weilert, Michael D. Oil
 STREET
 CITY STATE ZIP

OWNER
 CEMENT
 AMOUNT ORDERED 150 SX Com
2% GEL
3% CO
 COMMON @
 POZMIX @
 GEL @
 CHLORIDE @
 ASC @
 HANDLING @
 MILEAGE @
 TOTAL

SERVICE
 DEPTH OF JOB
 PUMP TRUCK CHARGE
 EXTRA FOOTAGE @
 MILEAGE @
 MANIFOLD @
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TOTAL
 PLUG & FLOAT EQUIPMENT
 @
 @

IN @ 250 #.
Crown + D.D. CIRCULAR
THANKS
CHARGE TO: Weilert, Michael D. OIL
STREET _____
CITY _____ STATE _____ ZIP _____

EXTRA FOOTAGE _____ @ _____
MILEAGE _____ @ _____
MANIFOLD _____ @ _____
_____ @ _____
_____ @ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____

TOTAL _____

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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

PRINTED NAME Mark Bigge

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Mark Bigge

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ALLIED CEMENTING CO., LLC. 042017

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

SERVICE POINT:
Russell KS

DATE <u>10-20-10</u>	SEC. <u>35</u>	TWP. <u>13</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION	JOB START <u>8:30pm</u>	JOB FINISH <u>9:15pm</u>
LEASE <u>JA Engel</u>		WELL # <u>6</u>	LOCATION <u>Locemonto and Hwy 40 3 West</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>to Rd 150 3 South West into.</u>				

CONTRACTOR WV #6
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 3866'
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 XH DEPTH 3820'
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT
 AMOUNT ORDERED 230 w/40 4 1/2 Gal 1/4 #Flt

EQUIPMENT

PUMP TRUCK CEMENTER John Roberts
 # 398 HELPER Richard TWS
 BULK TRUCK
 # 473 DRIVER George TWS
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>138</u>	@	<u>13.50</u>	<u>1863.00</u>
POZMIX	<u>92</u>	@	<u>7.55</u>	<u>694.60</u>
GEL	<u>4</u>	@	<u>20.25</u>	<u>81.00</u>
CHLORIDE		@		
ASC		@		
<u>Flt Seal 57</u>		@	<u>2.45</u>	<u>139.65</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>230</u>	@	<u>2.25</u>	<u>517.50</u>
MILEAGE	<u>110 sk/mile</u>			<u>300.00</u>
TOTAL				<u>3595.75</u>

REMARKS:

25sk @ 3820'
25sk @ 1548'
100sk @ 798'
40sk @ 283'
10sk @ 40'
30sk Rathole

SERVICE

DEPTH OF JOB				
PUMP TRUCK CHARGE				<u>991.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>13</u>	@	<u>7.00</u>	<u>91.00</u>
MANIFOLD		@		
		@		
		@		

CHARGE TO: Weilert Oil Company
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
 NOV 19 2010 TOTAL 1082.00

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 PLUG & FLOAT EQUIPMENT

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment

		@		
		@		
<u>Dry Hole Plug</u>		@		<u>N-C</u>
		@		
		@		

25 sk @ 154'
100 sk @ 798'
40 sk @ 283'
10 sk @ 40'

30 sk Rathole

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 991.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 13 @ 7.00 91.00
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: Weilert Oil Company
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1082.00

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
Dry Hole Plug @ _____ N-C
 _____ @ _____
 _____ @ _____

TOTAL _____

To Allied Cementing Co., LLC.
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 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.

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

PRINTED NAME Mark Brigg
 SIGNATURE Mark Brigg

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