

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 # 3231
Name: McGowan Oil Co
Address 1: 302 N Summit
Address 2: _____
City: Arkansas City State: KS Zip: 67005 + _____
Contact Person: Dan McGowan
Phone: (620) 441-8922
CONTRACTOR: License # _____
Name: Summit Drilling Co Inc
Wellsite Geologist: S. A. Crank
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 #: _____

11/20/04	11/18/04	11/19/04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 035-24206-00-00

Spot Description: S/2-SE-SW

S/2 SE SW Sec. 8 Twp. 34 S. R. 5 East West

330 Feet from North / South Line of Section

3,200 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Cowley

Lease Name: Christenson Well #: 1

Field Name: None

Producing Formation: na

Elevation: Ground: 1288 Kelly Bushing: 1298

Total Depth: 3203 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 222 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: 1000 ppm Fluid volume: 300 bbls

Dewatering method used: Evaporation

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: Dan McGowan
Title: Partner Date: 11/28/10

KCC Office Use ONLY RECEIVED

- Letter of Confidentiality Received
Date: NOV 30 2010
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III PLA Approved by: Dg Date: 11/30/10

KCC WICHITA



Operator Name: McGowan Oil Co Lease Name: Christenson Well #: 1

Sec. 8 Twp. 34 S. R. 5 [x] 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 [] Yes [x] No (Attach Additional Sheets)
Samples Sent to Geological Survey [] Yes [x] No
Cores Taken [] Yes [x] No
Electric Log Run [x] Yes [] No
Electric Log Submitted Electronically [] Yes [x] No (If no, Submit Copy)
List All E. Logs Run: dual induction compensated density
[] Log Formation (Top), Depth and Datum [x] Sample
Name Top Datum
Cherokee 3012

CASING RECORD [x] New [] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with 8 columns: 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.
Row 1: surface, 12 1/4, 8.625, 24, 222', classA, 125sks, 3% calcium

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with 5 columns: Purpose, Depth Top Bottom, Type of Cement, # Sacks Used, Type and Percent Additives.
Purpose: [] Perforate, [] Protect Casing, [] Plug Back TD, [] Plug Off Zone

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated
Table with 4 columns: Shots Per Foot, PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated, Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used), Depth

TUBING RECORD: Size: Set At: Packer At: Liner Run: [] Yes [] No

Date of First, Resumed Production, SWD or ENHR. Producing Method: [] Flowing [] Pumping [] Gas Lift [] Other (Explain)

Estimated Production Per 24 Hours
Table with 6 columns: Oil Bbls., Gas Mcf, Water Bbls., Gas-Oil Ratio, Gravity

DISPOSITION OF GAS: [] Vented [] Sold [] Used on Lease (If vented, Submit ACO-18.)
METHOD OF COMPLETION: [] Open Hole [] Perf. [] Dually Comp. (Submit ACO-5) [] Commingled (Submit ACO-4) [] Other (Specify)
PRODUCTION INTERVAL: