

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED ORIGINAL
DEC 13 2010
KCC WICHITA

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 # 5003
Name: McCoy Petroleum Corporation
Address 1: 8080 E. Central Ave
Address 2: Suite #300
City: Wichita State: KS Zip: 67206 + 2366
Contact Person: Scott Hampel
Phone: 316-636-2737

CONTRACTOR: License # NA
Name: _____
Wellsite Geologist: _____
Purchaser: Oil: MVPurchasing Gas: Pioneer Explor.

Designate Type of Completion:

- New Well Re-Entry: Workover
- Oil WSW SWID 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: McCoy Petroleum Corporation

Well Name: KLAUSMEYER "A" #2-11

Original Comp. Date: 1/25/2002 Original Total Depth: 4353'

- 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 #: _____

11/22/2010

12/17/2010

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15-095-21807-0001

Spot Description: 75'W of

NE SE NE Sec 11 Twp 30 S. R. 9 East West

3630 Feet from North / South Line of Section

405 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Kingman

Lease Name: KLAUSMEYER "A" Well #: #2-11

Field Name: Spivey-Grabs-Basil

Producing Formation: Miss

Elevation: Ground: 1649' Kelly Bushing: 1954'

Total Depth: 4353' Plug Back Total Depth: 4302'

Amount of Surface Pipe Set and Cemented at: 262 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: _____ 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: Scott Hampel 

Title: Vice President - Production Date: 12/9/2010

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: Wb Dg Date: 12/17/10

Operator Name: McCoy Petroleum Corporation Lease Name: KLAUSMEYER "A" Well #: #2-11
 Sec. 11 Twp 30 S. R. 9 East West County: Kingman

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 1/4"	8 5/8"	24#	262'	60/40 Pozmix	220	2% Gel, 3% CC
Production	7 7/8"	5 1/2"	14#	4350'	Class H	125	15% Salt, 5# Gils/sx, .5% FLA-1.1% Defoamer

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3256-3514'	Class A	50	Class A Neat

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
	Casing Leak 3256-3514'	Squeeze with 50 sacks Class A Neat Cement	3514'

TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>4232'</u>	Packer At: <u>None</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed, SWD or ENHR. <u>11/25/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____
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Estimated Production Per 24 Hours	Oil Bbls <u>1</u>	Gas Mcf <u>32</u>	Water Bbls	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 checked="" 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: <u>4242-4252' (Miss)</u>
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ALLIED CEMENTING CO., LLC. 041418

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

SERVICE POINT: Medicine Lodge, KS.

DATE <u>11-24-2010</u>	SEC. <u>11</u>	TWP. <u>30S</u>	RANGE <u>9W</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>11:45 AM</u>
LEASE <u>Klausmayer</u>	WELL # <u>A</u>		LOCATION <u>Zenda, KS. 1E,</u>		COUNTY <u>Kingman</u>	STATE <u>Kansas</u>	
<input checked="" type="radio"/> OLD <input type="radio"/> NEW (Circle one)			# <u>314 N, W/S</u>				

CONTRACTOR Shawnee Well Service OWNER McCoy Petroleum

TYPE OF JOB Squeeze

HOLE SIZE _____	T.D. _____	CEMENT _____
CASING SIZE _____	DEPTH _____	AMOUNT ORDERED <u>50 sx class A Neat</u>
TUBING SIZE _____	DEPTH _____	
DRILL PIPE _____	DEPTH _____	
TOOL _____	DEPTH _____	

PRES. MAX <u>950</u>	MINIMUM _____	COMMON _____ @ _____
MEAS. LINE _____	SHOE JOINT _____	POZMIX _____ @ _____
CEMENT LEFT IN CSG. _____		GEL _____ @ _____
PERFS. _____		CHLORIDE _____ @ _____
DISPLACEMENT <u>3 1/2 Bbls freshwater</u>		ASC _____ @ _____

EQUIPMENT

PUMP TRUCK # <u>360-265</u>	CEMENTER <u>Carl Balding</u>
BULK TRUCK # <u>356</u>	HELPER <u>Matt Thimesch</u>
BULK TRUCK # _____	DRIVER <u>Raymond Roman</u>
BULK TRUCK # _____	DRIVER _____

RECEIVED
DEC 1 2010
KCC WICHITA
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DEC 13 2010
KCC WICHITA

HANDLING <u>.50</u>	@ <u>2.40</u>	<u>120.00</u>
MILEAGE <u>50/30/-10</u>	Mix	<u>312.00</u>
		TOTAL <u>1204.50</u>

REMARKS:

Casing Leak 3256-3514' Packer 3514, load hole w/ 7 Bbls mix 50 sx Class A Neat Displace + Ballance with 16 Bbls water, pull tubing to 3100' Reverse out w/ 18 Bbls. Pull 1" joint tubing + set packer Pump 3 Bbls water - 600 psi @ 50' stay 45 min. Start pumps + load with 4 Bbls Squeeze - 950 psi. pull 10 + start in 4/800

CHARGE TO: McCoy Petroleum
STREET _____
CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <u>3514'</u>	
PUMP TRUCK CHARGE <u>2011.00</u>	
EXTRA FOOTAGE _____ @ _____	
MILEAGE <u>30</u> @ <u>7.00</u>	<u>210.00</u>
MANIFOLD _____ @ _____	<u>100.00</u>
TOTAL <u>2321.00</u>	

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.

PRINTED NAME _____
SIGNATURE Russell

SALES TAX (If Any) _____
TOTAL CHARGES 2321.00
DISCOUNT _____ IF PAID IN 30 DAYS

