

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 # 31847
Name: Bradley Oil Co.
Address 1: P. O. Box 21614
Address 2: _____
City: Oklahoma City State: OK Zip: 73156 + _____
Contact Person: Bradd Schwartz
Phone: (405) 823-8136
CONTRACTOR: License # 33734
Name: Hat Drilling
Wellsite Geologist: None
Purchaser: Pacer Energy

API No. 15 - 09123 428-0000
Spot Description: See Below
NW-NW-SW-NW Sec. 28 Twp. 14 S. R. 22 East West
3842 Feet from North / South Line of Section
5114 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: Phegley Well #: PH-19-2
Field Name: Longanecker

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.): _____

Producing Formation: Bartlesville
Elevation: Ground: n/a Kelly Bushing: n/a
Total Depth: 925 Plug Back Total Depth: _____
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: 918
feet depth to: 137 w/ _____ sx cmt.

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 #: _____
10/26/10 10/28/10 10/28/10
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

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: Bradd Schwartz
Title: President Date: 11/30/10

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: DG Date: 12/16/10

Operator Name: Bradley Oil Co. Lease Name: Rhegley Well #: PH-19-2
 Sec. 28 Twp. 14 S. R. 22 East West County: Johnson

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> List All E. Logs Run: <p style="text-align: center;">Gamma Ray/Neutron</p>	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Hertha</td> <td>424</td> <td></td> </tr> <tr> <td>Bartlesville</td> <td>879-884</td> <td></td> </tr> <tr> <td>Total Depth</td> <td>925</td> <td></td> </tr> </table>	Name	Top	Datum	Hertha	424		Bartlesville	879-884		Total Depth	925	
Name	Top	Datum											
Hertha	424												
Bartlesville	879-884												
Total Depth	925												

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
Surface casing	7 5/8"	7"	n/a	20 ft.	portland	5	
Production	5 5/8	2 7/8	n/a	918	50/50 Poz	137	

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
3	880-886	Spot Acid on perforations and Fraced well with water gel and 10 sacks of sand	
		RECEIVED	
		DEC 08 2010	

TUBING RECORD: Size: <u>1" Pipe a 900</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	KCC WICHITA
Date of First, Resumed Production, SWD or ENHR.	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	Oil Bbls. <u>1</u>	Gas Mcf _____	Water Bbls. <u>0</u> Gas-Oil Ratio _____ Gravity <u>23</u>

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>880-886</u>
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HAT DRILLING
 12371 KS HWY 7
 MOUND CITY, KS 66056
 LICENSE # 33734

Phegley PH-19-2
 API # 15-091-23428-00-00
 SPUD DATE 10-26-10

Footage	Formation	Thickness	Set 21' of 7"
2	Topsoil	2	TD 925'
25	clay	23	Ran 918' of 2 7/8
64	shale	37	
68	limc	4	
75	shale	7	
91	lime	16	
99	shale	8	
107	lime	8	
114	shale	7	
135	limc	21	
149	shale	14	
169	lime	20	
176	shale	7	
233	lime	57	
252	shale	17	
260	lime	8	
281	shale	21	
290	lime	9	
285	shale	5	
301	lime	6	
339	shale	38	
341	lime	3	
347	shale	6	
372	limc	25	
380	shale	8	
424	lime	44	
609	shale	185	
623	lime	14	
634	shale	11	
637	lime	3	
642	shale	5	
653	lime	11	
664	shale	11	
672	red bed	8	
879	shale	207	
884	sand	5	
925	shale	41	

RECEIVED
 DEC 08 2010
 KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27213
LOCATION 20
FOREMAN Alan Maden

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10.28.10	1601	Phegley PH-192	NW 21	14	27	58
CUSTOMER Bradley Oil						
MAILING ADDRESS P.O. Box 21614			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Oklahoma City			516	Alan M	Safety	Meeting
STATE OK	ZIP CODE 73156					
			368	Ken H	HJ	
			369	Harold B	HJB	
			503	Derek M	DM	

JOB TYPE long string HOLE SIZE 5 5/8 HOLE DEPTH 925 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 918 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 5.3 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held crew meetings. Mixed & pumped 100# gel to flush hole, followed by 137 sk 50/150 poz, 290 gal. Circulated cement. Flushed pump. Pumped plug to casing T.D. Well held 800 PSI. Set float. Closed valve.

HAT Drilling
Alan Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	30	MILEAGE		109.50
5402	918'	casing footage		
5407	min	ton miles		315.00
5502C	2 hr	80 vac		200.00
1118B	330#	gel		66.00
1124	134 sk	50/150 poz		1318.56
4402	1	2 1/2 plug		23.00
			RECEIVED	
			DEC 08 2010	
			KCC WICHITA	
			7.525%	
			SALES TAX ESTIMATED TOTAL	105.92
				3062.98

Revin 3737

AUTHORIZATION No company rep. TITLE _____ DATE _____
Jim Ok'd

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.