

RECEIVED ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

DEC 08 2010

Form ACO-1
June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM

KCC WICHITA

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

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 #: _____

10/21/10 10/26/10 10/26/10
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 091 23 429 - 0000

Spot Description: See Below

SE SW SW NW Sec. 28 Twp. 14 S. R. 22 East West

2841 Feet from North / South Line of Section

4757 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-25

Field Name: Longanecker Southeast

Producing Formation: Bartlesville

Elevation: Ground: n/a Kelly Bushing: n/a

Total Depth: 888 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: 882

feet depth to: 0 w/ 127 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: 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: Dlg Date: 12/6/10

Operator Name: Bradley Oil Co. Lease Name: Phegley Well #: PH-25
 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>408</td> <td></td> </tr> <tr> <td>Bartlesville</td> <td>858-864</td> <td></td> </tr> <tr> <td>Total Depth</td> <td>888</td> <td></td> </tr> </table>	Name	Top	Datum	Hertha	408		Bartlesville	858-864		Total Depth	888	
Name	Top	Datum											
Hertha	408												
Bartlesville	858-864												
Total Depth	888												

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	882	50/50 Poz	127	

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	858-866	Spot Acid on perforations and Fraced well with water gel and 10 sacks of sand	

TUBING RECORD: Size: <u>1" Pipe @ 875</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. _____		RECEIVED DEC 08 2010 KCC WICHITA
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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>858-866</u>
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HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Phegley PH-25
API # 15-091-23429-00-00
SPUD DATE 10-21-10

Footage	Formation	Thickness	Set 25' of 7" TD 888' Ran 881' of 2 7/8
2	Topsoil	2	
27	clay	25	
45	shale	18	
70	limc	25	
80	shale	10	
89	lime	9	
97	shalc	8	
118	lime	21	
133	shale	15	
152	limc	19	
160	shale	8	
212	lime	52	
235	shale	23	
244	lime	9	
261	shale	17	
271	lime	10	
275	shale	4	
282	lime	7	
327	shale	45	
353	lime	26	
363	shale	10	
384	lime	21	
399	shale	15	
408	limc	9	
579	shale	171	
583	lime	4	
586	shalc	3	
588	lime	2	
594	shale	6	
600	lime	6	
616	shale	16	
635	lime	19	
655	shale	20	
660	red bed	5	
858	shale	198	
864	sand	6	
888	shale	24	

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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27211
LOCATION Ottawa
FOREMAN Alan Mader

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
10-26-10	1601	Phegley PH-25	NW 91	14	22	JO
CUSTOMER Bradley Oil						
MAILING ADDRESS P.O. Box 21614						
CITY Oklahoma City		STATE OK	ZIP CODE 73156			
JOB TYPE <u>long string</u>		HOLE SIZE <u>5 5/8</u>	HOLE DEPTH <u>888</u>	CASING SIZE & WEIGHT <u>2 1/8</u>		
CASING DEPTH <u>882</u>		DRILL PIPE	TUBING	OTHER		
SLURRY WEIGHT		SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>yes</u>		
DISPLACEMENT <u>3.12</u>		DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>		
REMARKS: <u>Held crew meeting. Mixed & pumped 100# gel to flush hole followed by 127 sk 50/150 #02, 270 gel. Circulated cement. Flushed pump. Pumped plug to casing T.D. Well held 800 PSI. Set float. Closed valve.</u>						
<u>HAT Drilling</u>						
<u>Alan Mader</u>						

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	882'	casing footage		
5407	min	ton miles		315.00
6502C	2	80 gal		200.00
1107A		gel		
1118B	313#	gel		62.60
1124	127 sk	50/150 #02		1220.16
11402	1	2 1/2 plug		23.00
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				7.5259
				SALES TAX 98.26
				ESTIMATED TOTAL 2953.52

Ravin 3737

AUTHORIZATION No company Rep. Jim OK'd TITLE _____ DATE _____

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.