

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 # 33858
Name: J & J Operating, LLC
Address 1: 10380 West 179th Street
Address 2: _____
City: Bucyrus State: KS Zip: 66013 + 9596
Contact Person: Marcia Littell
Phone: (913) 256-9384
CONTRACTOR: License # 32834
Name: JTC Oil, Inc.
Wellsite Geologist: _____
Purchaser: Pacer Energy Marketing, LLC.

RECEIVED

DEC 08 2010

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.): _____

KCC WICHITA

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 #: _____
10/21/2010 10/26/2010 11/29/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21697-00-00
Spot Description: _____
SE SE NW NE Sec. 31 Twp. 13 S. R. 21 East West
1,155 Feet from North / South Line of Section
1,485 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Douglas
Lease Name: South Grosdidier Well #: 7
Field Name: Little Wakarusa
Producing Formation: Squirrel
Elevation: Ground: 894' Kelly Bushing: _____
Total Depth: 800' Plug Back Total Depth: 782'
Amount of Surface Pipe Set and Cemented at: 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 782
feet depth to: surface w/ 144 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: Marcia Littell
Title: Compliance Coordinator Date: 12/2/2010

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: Deg Date: 12/16/10

Operator Name: J & J Operating, LLC Lease Name: South Grosdidier Well #: 7
 Sec. 31 Twp. 13 S. R. 21 East West County: Douglas

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: Gamma Ray/Neutron	<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	9 3/4"	6 5/8"	23.0#	40'	Portland	3 sx	
Production	6"	2 7/8"	5.8#	782'	50/50 Poz	144 sx	2% gel, 1/2# Pheno-seal

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 (Amount and Kind of Material Used)	Depth
3 SPF	657-667'	31 Perfs	674-680' 19 Perfs	Spot 75 gal 15% HCL 137 bbls. city H2o w KCL 200# 20/40, 3300# 12/20 sand	657-680'

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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JTC Oil, Inc.
 P.O. Box 24386
 Stanley, Kansas 66283

New Well Data

779888

<u>Date</u>	<u>Customer #</u>	<u>Well Name and #</u>	<u>Sec</u>	<u>Town</u>	<u>Range</u>	<u>County</u>
11/10/2010	1	S. Grosdidier #7	31	13	21	Douglas

Customer **J&J Operating, LLC.**

Billing Address **10380 W. 179th Street**

City **Bucyrus** State **Kansas** Zip **66013**

Well Data and Procedures

<u>Well Data</u>			<u>Procedures</u>
<u>Surface Casing</u>	<u>Size</u>	<u>Sks. Cement</u>	<u>Spud Date</u>
10/21/2010	6 1/4	3	10/21/2010
<u>Longstring</u>	<u>Length / Size</u>	<u>Sks. Cement</u>	<u>Pit Clouser Date</u>
10/26/2010	2 7/8 at 782 ft		
<u>Total Casing Depth</u>			
782			
<u>Total Well Depth</u>			
800			

Comments

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Authorization _____

Title _____



CONSOLIDATED
OIL WELL SERVICES, LLC

TICKET NUMBER 27212
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
10-26-10	4028	S. Grandier 7	NE 31	13	21	DG
CUSTOMER J+J Operating			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 10380 W 179th			516	Alan M	Crow	Meeting
CITY STATE ZIP CODE Bryan KS 66413			369	Ken H	2	2
			370	Arlen M	2	2
			510	Harold B	1	1

JOB TYPE long string HOLE SIZE 6 HOLE DEPTH 800 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 783 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 4.6 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4 bpm

REMARKS: Held crew meeting. Mixed & pumped 100 # gal to flush hole followed by 144 5x 50150 po2, 2 1/2 gal 1/2 # phenol seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float & closed valve

JTC 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	783	Casing footage		315.00
5407	min	ton miles		200.00
5502C	2	800 psi		
1107A	72 #	Pheno seal		82.80
1118B	342'	gel		68.40
1124	140 sk	50150 po2		1372.60
4402	1	2 1/2 plug		23.20
				RECEIVED
				DEC 08 2010
				KCC WICHITA
				WD # 237600
				7.3%
			SALES TAX	113.27
			ESTIMATED TOTAL	3214.57

Ravin 3737

AUTHORIZATION No company rep Jim OK 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