

10/29/10

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 7311
Name: Shakespeare Oil Company, Inc.
Address: 202 West Main Street
City/State/Zip: Salem, IL 62881
Purchaser: NCRA
Operator Contact Person: Donald R. Williams
Phone: (618) 548-1585
Contractor: Name: HD Drilling, LLC
License: 33935
Wellsite Geologist: Steve Davis

CONFIDENTIAL

OCT 29 2009

KCC

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NOV 02 2009

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

9/14/09	9/26/09	10/19/09
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 109-20858-0000
County: Logan
E2 SE NW NW Sec. 15 Twp. 14 S. R. 32 East West
990 feet from S (circle one) Line of Section
1000 feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (circle one) NW SW
Lease Name: Ottley Well #: 4-15
Field Name: Chalk Buttes
Producing Formation: Morrow, LKC "J", Johnson, Cherokee
Elevation: Ground: 2752' Kelly Bushing: 2762
Total Depth: 4500 Plug Back Total Depth: 4449'
Amount of Surface Pipe Set and Cemented at 227 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2187 Feet
If Alternate II completion, cement circulated from 2187
feet depth to surface w/ 200 sx cmt.

Drilling Fluid Management Plan AKIN 11-1209
(Data must be collected from the Reserve Pit)
Chloride content 6500 ppm Fluid volume 2500 bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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.

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: Donald R Williams
Title: Vice President Date: 10/29/09
Subscribed and sworn to before me this 29th day of October, 2009.
Notary Public: Melissa A. Noel
Date Commission Expires: 11-6-11

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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NOV 06 2009

OFFICIAL SEAL
MELISSA A. NOEL
Notary Public, State of Illinois
My Commission Expires 11-06-11

*NOTARY'S STAMP

KCC WICHITA

Operator Name: Shakespeare Oil Company, Inc. Lease Name: Ottley Well #: 4-15
 Sec. 15 Twp. 14 S. R. 32 East West County: Logan

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 <i>(Submit Copy)</i> List All E. Logs Run: Array Ind/SP/GR, CN/CD/GR/CAL/ML, SONIC <div style="text-align: center;"> CONFIDENTIAL OCT 2 2 2009 </div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Geological Report <div style="text-align: center;"> RECEIVED NOV 06 2009 RECEIVED NOV 02 2009 KCC WICHITA KCC WICHITA </div>
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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"	23#	227	Class A	165	3% CaCl ₂ , 2% gel
Production	7 7/8"	5 1/2"	15.5#	4498	ASC	200	5#/sx Gilsontite, 3/4% CD-31

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	3005'	Pozmix	335	65/35 w/ 8% gel & 1/4#/sx flocele

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
6	Morrow	500 gal-15% NEFe w/1 gal-cla-sta	4420-27
4	Johnson	500 gal 15% NEFe & 1000 gal 15% NEFe	4346-56
4	Cherokee	250 gal 15% NEFe	4316-18
4	LKC "J"	250 gal 15% MCA	3992-95

TUBING RECORD		Size 2 3/8"	Set At 4449'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 10/20/09		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. 40	Gas Mcf	Water Bbls. 40	Gas-Oil Ratio	Gravity 34

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906

Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 120148
 Invoice Date: Sep 30, 2009
 Page: 1

Bill To:
 Shakespeare Oil Co., Inc.
 202 West Main St.
 Salem, IL 62881

INT well files

CONFIDENTIAL

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Shak 2009	Ottley #4-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Sep 30, 2009	10/30/09

Quantity	Item	Description	Unit Price	Amount
220.00	MAT	Class A Common	15.45	3,399.00
115.00	MAT	Pozmix	8.00	920.00
24.00	MAT	Gel	20.80	499.20
84.00	MAT	Flo Seal	2.50	210.00
458.00	SER	Handling	2.40	1,099.20
20.00	SER	Mileage 458 sx @ .10 per sk per mi	45.80	916.00
1.00	SER	Port Collar - Production	1,185.00	1,185.00
20.00	SER	Pump Truck Mileage	7.00	140.00

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 NOV 02 2009
 KCC WICHITA

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 1673.68

ONLY IF PAID ON OR BEFORE

Oct 30, 2009

Subtotal	8,368.40
Sales Tax	316.78
Total Invoice Amount	8,685.18
Payment/Credit Applied	
TOTAL	8,685.18

ALLIED CEMENTING CO., LLC. 044310

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

SERVICE POINT: Dakley

DATE <u>9/30/09</u>	SEC. <u>1</u>	TWP. <u>14</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION <u>12:30 pm</u>	JOB START <u>3:00 pm</u>	JOB FINISH <u>4:00 pm</u>
WELL # <u>415</u>	LOCATION <u>Dakley 18 1/2 S to Tank battery</u>			COUNTY <u>Logan</u>	STATE <u>Ks</u>		
OLD OR NEW (Circle one) <u>NEW</u>				w/ofs, w into			

CONTRACTOR Wild West Well Service

TYPE OF JOB Port Collar - Production

PIPE SIZE _____ T.D. _____

Casing Size _____ DEPTH _____

Running Size _____ DEPTH _____

Well Pipe _____ DEPTH _____

COL Port Collar DEPTH 2184'

ES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

MENT LEFT IN CSG. _____

RFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT

AMOUNT ORDERED 425 SK, 65/35 870 gel

1/4 lb Flo Seal

500 lb Halls on side

used 335 SK

COMMON	<u>200</u>	@ <u>15.45</u>	<u>3399.00</u>
POZMIX	<u>115</u>	@ <u>8.00</u>	<u>920.00</u>
GEL	<u>24</u>	@ <u>20.50</u>	<u>492.00</u>
CHLORIDE		@	
ASC		@	
		@	
<u>Flo Seal 84 lb</u>		@ <u>2.50</u>	<u>210.00</u>
		@	
		@	
		@	
		@	
		@	
HANDLING <u>458 SK</u>		@ <u>2.40</u>	<u>1099.20</u>
MILEAGE <u>10.5 SK/mile</u>			<u>916.00</u>
			<u>7043.40</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan

422 HELPER Wayne

LK TRUCK DRIVER Darren

394

LK TRUCK DRIVER _____

REMARKS:

Hold.

set tool to 1200 PSI, open tool tank

to 3 1/2 BBL @ 400 PSI, mix 335 SK, 65/35

gel 1/4 lb Flo Seal. Displaced 7 1/4 BBL.

use tool test to 1200 Held, run 40T.

reverse Clean.

500

run later 25 ~~to~~ to P, T

Alan, Wayne, Darren

SERVICE

DEPTH OF JOB 2184

PUMP TRUCK CHARGE 1185.00

EXTRA FOOTAGE @ _____

MILEAGE 20 @ 7.00 140.00

MANIFOLD @ _____

@ _____

@ _____

TOTAL 1325.00

PLUG & FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

CHARGE TO: Shakespeare

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment

We will 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 T.C. LARSON

SIGNATURE T.C. Larson

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS



INVOICE

24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906

Invoice Number: 120093
 Invoice Date: Sep 26, 2009
 Page: 1

Voice: (785) 483-3887
 Fax: (785) 483-5566

Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

CONFIDENTIAL
 OCT 29 2009

*well file
 INT*

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Shak	Ottley #4-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Oakley	Sep 26, 2009	10/26/09

Quantity	Item	Description	Unit Price	Amount
4.00	MAT	Gel	20.80	83.20
230.00	MAT	ASC Class A	18.60	4,278.00
28.00	MAT	Salt	23.95	670.60
1,150.00	MAT	Gilsonite	0.89	1,023.50
500.00	MAT	WFR-2	1.27	635.00
162.00	MAT	CD-31	9.35	1,514.70
291.00	SER	Handling	2.40	698.40
20.00	SER	Mileage 291 sx @.10 per sk per mi	29.10	582.00
1.00	SER	Production String	2,185.00	2,185.00
20.00	SER	Pump Truck Mileage	7.00	140.00
1.00	SER	Rotator	100.00	100.00

RECEIVED
 OCT 05 2009
RECEIVED

RECEIVED
 NOV 02 2009
KCC WICHITA

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 2382.00

ONLY IF PAID ON OR BEFORE

Oct 26, 2009

Subtotal	11,910.40
Sales Tax	516.92
Total Invoice Amount	12,427.32
Payment/Credit Applied	
TOTAL	12,427.32

ALLIED CEMENTING CO., LLC. 044375

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

SERVICE POINT:

Oakley KS

DATE 9-26-09	SEC. 15	TWP. 14S	RANGE 32W	CALLED OUT	ON LOCATION 11:00am 3:30pm	JOB START 11:00pm	JOB FINISH 12:00am
LEASE <u>Oakley</u>	WELL# 4-15		LOCATION <u>Oakley 185-42N</u>		COUNTY logan	STATE KS	
OLD OR NEW (Circle one)							

CONTRACTOR H-D #2

TYPE OF JOB Production String

HOLE SIZE 7 7/8 T.D. 4550'

CASING SIZE 5 1/2 IS.5 DEPTH 4552 2/4

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 42"

CEMENT LEFT IN CSG. 42"

PERFS. OGI 2 @ 2000

DISPLACEMENT 107.3 BBL

NOG EQUIPMENT

PUMP TRUCK CEMENTER Kelly Fuzzu

431 HELPER Kelly

BULK TRUCK

377 DRIVER Darwin

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pump 5 BBL Fresh water, 500gal
WFRIT, 15 BBL Freshwater, mix
30 gals in R.H. mix 200 gals down
casing. Wash out pump & lines +
Prep plug. Displace plug to
latch down hi cut 800' - land
1200# float held plug
down @ 11:45 pm
Thanks Kelly & Darwin

CHARGE TO: Shakespeare

STREET _____

CITY _____ STATE _____ ZIP _____

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 B. Calhoun

OWNER _____

CEMENT

AMOUNT ORDERED 230 ASC 2" well
10 205 salt, 5th gal/sk 3/40 @ 18.00 CA-31

COMMON	_____	@	_____
POZMIX	_____	@	_____
GEL	<u>4</u>	@	<u>20.00 83.20</u>
CHLORIDE	_____	@	_____
ASC	<u>230</u>	@	<u>18.00 4278.00</u>
	<u>Salt 28</u>	@	<u>23.95 670.60</u>
	<u>Gilsonite 1150</u>	@	<u>.89 1023.50</u>
	<u>WFRIT 500gal</u>	@	<u>1.27 635.00</u>
	<u>CD-31 162</u>	@	<u>9.35 1514.20</u>
HANDLING	<u>291</u>	@	<u>2.40 698.40</u>
MILEAGE	<u>10.45 km</u>		<u>582.00</u>
			TOTAL <u>9485.40</u>

SERVICE

DEPTH OF JOB	_____		<u>4552.00</u>
PUMP TRUCK CHARGE	_____		<u>2185.00</u>
EXTRA FOOTAGE	_____	@	_____
MILEAGE	<u>20</u>	@	<u>7.00 140.00</u>
MANIFOLD	_____	@	_____
<u>rotator</u>	_____	@	<u>100.00</u>
	_____	@	_____
			TOTAL <u>2425.00</u>

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS



24 S. Lincoln Street
 P.O. Box 31
 Russell, KS 67665-2906
 Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 119985
 Invoice Date: Sep 14, 2009
 Page: 1

Bill To:
Shakespeare Oil Co., Inc. 202 West Main St. Salem, IL 62881

Fe
Will file

CONFIDENTIAL

Customer ID	Well Name # or Customer P.O.	Payment Terms	
Shak	Ottley #4-15	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Sep 14, 2009	10/14/09

Quantity	Item	Description	Unit Price	Amount
165.00	MAT	Class A Common	15.45	2,549.25
3.00	MAT	Gel	20.80	62.40
6.00	MAT	Chloride	58.20	349.20
174.00	SER	Handling	2.40	417.60
20.00	SER	Mileage 174 sx @ .10 per sk per mi	17.40	348.00
1.00	SER	Surface	1,018.00	1,018.00
20.00	SER	Pump Truck Mileage	7.00	140.00

INT

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 SEP 21 2009
 LOGS/ST/ED

RECEIVED
 NOV 02 2009
 KCC WICHITA

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 976.89

ONLY IF PAID ON OR BEFORE

Oct 14, 2009

Subtotal	4,884.45
Sales Tax	186.53
Total Invoice Amount	5,070.98
Payment/Credit Applied	
TOTAL	5,070.98

ALLIED CEMENTING CO., LLC. 043715

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

SERVICE POINT:
Oakley KS

DATE <u>9-14-09</u>	SEC. <u>15</u>	TWP. <u>14S</u>	RANGE <u>32W</u>	CALLED OUT	ON LOCATION <u>1:00am</u>	JOB START <u>2:30am</u>	JOB FINISH <u>3:00am</u>
LEASE <u>Oakley</u>	WELL# <u>4-15</u>		LOCATION <u>Oakley 185. am</u>		COUNTY <u>logan</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR H.D #2

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 228'

CASING SIZE 8 5/8 DEPTH 228'

TUBING SIZE _____ DEPTH _____

DRILL PIPE CONFIDENTIAL DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX. OCT 20 2009 MINIMUM _____

MEAS. LINE KCC SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13.6

OWNER _____

CEMENT

AMOUNT ORDERED 165 com 3490c

290 sel

COMMON	<u>165</u>	@ <u>15.45</u>	<u>2549.25</u>
POZMIX		@ _____	
GEL	<u>3</u>	@ <u>20.80</u>	<u>62.40</u>
CHLORIDE	<u>6</u>	@ <u>58.28</u>	<u>349.28</u>
ASC		@ _____	
		@ _____	
		@ _____	
		@ _____	
		@ _____	
		@ _____	
		@ _____	
		@ _____	
HANDLING	<u>174</u>	@ <u>2.40</u>	<u>417.60</u>
MILEAGE	<u>.1049 kmile</u>		<u>348.00</u>
TOTAL			<u>3726.45</u>

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NOV 02 2009
KCC WICHITA

EQUIPMENT

PUMP TRUCK CEMENTER Fuzzy

431 HELPER Billy

BULK TRUCK

347 DRIVER LaBene

BULK TRUCK

_____ DRIVER _____

REMARKS:

cement did circulate

Plug down @ 3:00am

Thanks Fuzzy crew

SERVICE

DEPTH OF JOB	<u>228</u>		
PUMP TRUCK CHARGE			<u>1018.00</u>
EXTRA FOOTAGE		@ _____	
MILEAGE	<u>20</u>	@ <u>7.00</u>	<u>140.00</u>
MANIFOLD		@ _____	
		@ _____	
TOTAL			<u>1158.00</u>

PLUG & FLOAT EQUIPMENT

1-8-09	@ _____	
	@ _____	
	@ _____	
	@ _____	
	@ _____	
TOTAL		<u>_____</u>

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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE Fred Ross