

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 # 32693
Name: Hawkins Oil LLC
Address 1: 427 S. Boston Ave.
Address 2: Suite #915
City: Tulsa State: OK Zip: 74103 +
Contact Person: J. Hunt Hawkins
Phone: (918) 382-7743
CONTRACTOR: License # 33557
Name: Skyy Drilling
Wellsite Geologist: Bill Stout
Purchaser: NCRA

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.): _____

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 #: _____

<u>4/20/10</u>	<u>4/26/10</u>	<u>5/5/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23855-00-00

Spot Description: _____
NE NE SW SW Sec. 17 Twp. 25 S. R. 5 East West
1,250 Feet from North / South Line of Section
1,150 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Butler
Lease Name: Robinson A Well #: 22
Field Name: El Dorado

Producing Formation: Mississippi Chat

Elevation: Ground: 1381 Kelly Bushing: 1388

Total Depth: 2600 Plug Back Total Depth: 2586

Amount of Surface Pipe Set and Cemented at: 200 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: _____

Title: Production Manager Date: 10/19/10

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____ **RECEIVED**

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Dg Date: 11/23/10 **KCC WICHITA**

Operator Name: Hawkins Oil LLC Lease Name: Robinson A Well #: 22
 Sec. 17 Twp. 25 S. R. 5 East West County: Butler

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: GR/N CBL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum Mississippi Chat
---	--

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"	20#	200'	Class A	135	2% gel, 3% CC, 2# LCM
Production	7 7/8"	5 1/2"	14#	2590'	Class A	150	6% gel, 1.5% CC, 5% LCM

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
1 SPF	2,535' - 2,554'	500 gal 15% MCA	2,535'

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>2,487'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR: <u>5/11/10</u>	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.	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> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>2535-2554</u>
---	--	--

 **ENTERED**



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 24269
LOCATION El Dorado #80
FOREMAN Jim Thomas

FIELD TICKET & TREATMENT REPORT
CEMENT

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

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-26-10	3553	Robinson A-#22	17	25s	5E	Butler
CUSTOMER Hawkins Oil LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 427 S. Boston Suite 915			467	Bill		
CITY	STATE	ZIP CODE	491	Kevin		
Tulsa	OK	74103	451, T117	Bobby		

JOB TYPE Long String D HOLE SIZE 7 7/8" HOLE DEPTH 2600ft. CASING SIZE & WEIGHT 5 1/2" 14.0#
 CASING DEPTH 2598ft. DRILL PIPE _____ TUBING _____ OTHER New
 SLURRY WEIGHT 150-155 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 7.90ft.
 DISPLACEMENT 62.99 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting Rig up to 5 1/2" casing Brake circulation, Pump 150 sks class A
6% gel, 1% ccc 5% kol - Seal, shutdown & wash up pump & lines, Release 5 1/2" Plug & disp
cement to 1590 ft. Pump Plug 1200#, Release PSI & Plug held, Wash up & Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	900.00	900.00
5406	5	MILEAGE	3.55	N/C
1104S	150sks	class A	13.10	1965.00
1118A	900lbs	gel	.17	153.00
1102	200lbs	Calcium Chloride	.73	146.00
1110A	750lbs	Kol-Seal	.40	300.00
4130	2	5 1/2" Centralizers	46.00	92.00
4159	1	5 1/2" AFU Float Shoe	319.00	319.00
4454	1	5 1/2" Hatch Down Plug & Assem.	235.00	235.00
5407	1	min. Bulk Del.	305.00	305.00
5501C	2 hrs	Water Transport	108.00	216.00
		RECEIVED		
		NOV 22 2010		
		KCC MIGHTA		4631.00
		SALES TAX		170.16
		ESTIMATED TOTAL		4801.16

Ravin 3737

233969

AUTHORIZATION J. H. [Signature]

TITLE _____

DATE 4/28/10



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 24264
LOCATION E7Dorado #80
FOREMAN Jim Thomas

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
4-20-10	3553	Robinson A #22	17	25S	5E	Butler
CUSTOMER Hawkins Oil LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 427 S. Boston Suite 915			290	Bobby		
CITY STATE ZIP CODE Tulsa OK 74103			442	Eric		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH _____ CASING SIZE & WEIGHT None
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting Rig up + pump 50 sks Class A 2% gel, 3% CC, 2# of Poly-Floks per sks, down open hole + open ended, to stop loss of circulation. Wash up + rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	700.00	700.00
5406	5	MILEAGE	3.55	17.75
11045	50 sks	Class A	13.10	655.00
1118A	100 lbs	gel	.17	17.00
1102	200 lbs	Calcium Chloride	.73	146.00
1107	50 lbs	Poly-Floks	2.00	100.00
5407	1	Min Bulk Del.	305.00	305.00
Subtotal				1923.00
			SALES TAX	48.16
			ESTIMATED TOTAL	1971.16

RECEIVED
NOV 22 2010
KCC WICHITA

Ravin 3737

233810

AUTHORIZATION Jim Thomas

TITLE

DATE



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 24267
LOCATION F/Donda #80
FOREMAN Jim Thomas

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
4-21-10	3553	Robinson A #22	17	25S	SE	Butler
CUSTOMER Hawkins Oil LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 427 S. Boston Suite 915			446	Jacob		
CITY STATE ZIP CODE Tulsa Ok 74103			502	Jerald		
			442	Jerald		

→ JOB TYPE Surface Pipe HOLE SIZE 12 1/4 HOLE DEPTH 2144' CASING SIZE & WEIGHT 8 5/8" 23.0
CASING DEPTH 212' DRILL PIPE _____ TUBING _____ OTHER New
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20 ft.
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: So try meeting Rig up to 8 5/8" Pump 135 sks class A 2% gel 3 1/2% cc, 2# per sks Poly-Flake, & disp. cement to 190 ft. Cement fell back in the cellar, shut down & wait an hour. Switch Bulk Trucks, Pump 50 sks class A 2% cc open ended down around 8 5/8" Surface Pipe. Cement circulate & stayed in the cellar. Wash up & Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	700.00	700.00
5406	5	MILEAGE	3.55	n/c
11015	182.5 SKS	class A	13.10	2384.20
1102	600 lbs	calcium chloride	.73	438.00
1118A	300 lbs	gel	.17	51.00
1107	250 lb	Poly-Flake	2.00	500.00
5407	1	min. Bulk Del.	305.00	305.00
5407	1	min. Bulk Del.	305.00	305.00
			RECEIVED	
			NOV 22 2010	
			KCC WICHITA	
			<u>Subtotal</u>	4683.20
			SALES TAX	178.77
			ESTIMATED TOTAL	4861.97

Form 3737

233899

AUTHORIZATION Jim Thomas DATE _____