

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 # 4175
Name: Dvorachek, Harold A.
Address 1: P. O. Box 413
Address 2: _____
City: Iola State: KS Zip: 66749 + _____
Contact Person: Harold Dvorachek
Phone: (620) 365-5862
CONTRACTOR: License # 33900
Name: Leis, Steven A.
Wellsite Geologist: none
Purchaser: High Sierra

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 #: _____

<u>Aug. 12, 2010</u>	<u>Aug. 13, 2010</u>	<u>Oct. 7, 2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 031-22714-00-00
Spot Description: _____
SE SW NW NW Sec. 33 Twp. 22 S. R. 17 East West
1,292 Feet from North / South Line of Section
650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Coffee
Lease Name: Lehmann Well #: 9
Field Name: Parmely
Producing Formation: Squirrel Sand
Elevation: Ground: 1040 est. Kelly Bushing: _____
Total Depth: 1025 Plug Back Total Depth: _____
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: 1020
feet depth to: surface w/ 160 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: N/A ppm Fluid volume: 80 bbls
Dewatering method used: Haul Off
Location of fluid disposal if hauled offsite:
Operator Name: Kepley Well Service
Lease Name: Taylor License #: 33749
Quarter SE Sec. 33 Twp. 27 S. R. 18 East West
County: Neosho Permit #: E-26368

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: [Signature]
Title: OWNER Date: 12/1/2010

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: Dog Date: 12/1/10

RECEIVED
DEC 03 2010

KCC WICHITA

Operator Name: Dvorachek, Harold A. Lease Name: Lehmann Well #: 9
 Sec. 33 Twp. 22 S. R. 17 East West County: Coffee

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 Wireline 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:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Cherokee Shale</td> <td>932'</td> <td>+104</td> </tr> </table>	Name	Top	Datum	Cherokee Shale	932'	+104
Name	Top	Datum					
Cherokee Shale	932'	+104					

CASING RECORD <input 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 Casing	10"	7"	17	40	Portland	10	
Production Casing	5 7/8"	2 7/8"	7.7	1020	OWC	132	

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
2	13 shots @ 965'-971'	Acidize 100 gal 15% HCl 300# 20/40 brown sand 1200# 12/30 brown sand	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. 10/10/2010 Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1.0	Trace	24		26.5

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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>966'-972'</u> <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

DEC 03 2010

KCC WICHITA

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
8/14/2010	A-45146

Cement Treatment Report

Harold Dvorachek
Quest Development
P.O. Box 413
Iola, KS 66749

(x) Landed Plug on Bottom at 600 PSI
 (x) Shut in Pressure 600
 (x) Good Cement Returns
 () Topped off well with _____ sacks
 (x) Shut in

TYPE OF TREATMENT: Production Casing
 HOLE SIZE: 5 7/8"
 TOTAL DEPTH: 1031

Well Name	Terms	Due Date		
	Net 15 days	9/13/2010		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Cement 2 7/8" Sales Tax	1,025	3.00 6.30%	3,075.00 0.00	
<div data-bbox="154 1102 662 1366" data-label="Text" style="border: 2px solid black; border-radius: 15px; padding: 10px; width: fit-content; margin: 0 auto;"> Lehmann #9 Coffey County Section: 33 Township: 22 Range: 17 </div>				
			RECEIVED DEC 03 2010 KCC WICHITA	

Hooked onto 2 7/8" casing. Established circulation with 4 barrels of water, 3 GEL, 1 METSO, COTTONSEED ahead, blended 132 sacks of OWC cement, dropped rubber plug, and pumped 6.4 barrels of water

Total	\$3,075.00
Payments/Credits	\$0.00
Balance Due	\$3,075.00

THE NEW KLEIN LUMBER COMPANY
 201 W. MADISON
 P.O. BOX 885
 IOLA, KS 66749
 PHONE: (620) 365-2201

PAGE NO 1

OWNER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
45				CASH/CHECK/BANKCARD	ME	8/16/10	10:29

**** CASH ****

S
H
I
P
T
O

DOCH 022736

 * INVOICE *

TERM 1

TAX : NET TOTAL IOLA

SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUB	UNITS	PRICE/PER	EXTENSION
		EA	PC	PORTLAND CEMENT		3	9.45 /EA	85.05

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** PAYMENT RECEIVED ** 92.11 TAXABLE 95.05
 ** PAID IN FULL ** NON-TAXABLE 0.00
 SUBTOTAL 95.05

RECEIVED BY

CHECK PAYMENT
 CH# 2446 ABAN

92.11 TAX AMOUNT 7.06
 TOTAL AMOUNT 92.11