

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 6142
 Name: Town Oil Company, Inc.
 Address: 16205 West 287th St.
 City/State/Zip: Paola, Kansas 66071
 Purchaser: CMT
 Operator Contact Person: Lester Town
 Phone: (913) 294-2125
 Contractor: Name: Town Oil Company, Inc.
 License: 6142
 Wellsite Geologist: _____
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>9-29-10</u>	<u>10-1-10</u>	<u>12-2-10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 045-21681-00-00
 County: Douglas
SW SW SE NE Sec. 11 Twp. 15 S. R. 20 East West
2865 feet from S / N (circle one) Line of Section
1155 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Early Well #: 114-HA
 Field Name: Baldwin
 Producing Formation: Squirrel
 Elevation: Ground: 1082 Kelly Bushing: _____
 Total Depth: 942' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 84 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 84
 feet depth to surface w/ 15 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 1500-1800 ppm Fluid volume 80 bbls
 Dewatering method used on lease
 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.

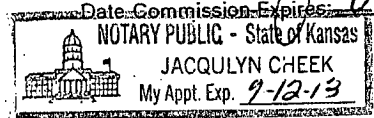
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Rebecca Town
 Title: Agent Date: 12-17-10
 Subscribed and sworn to before me this 17th day of December
20 10
 Notary Public: Jacquelyn Cheek
912-13

KCC Office Use ONLY

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

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Operator Name: Town Oil Company, Inc. Lease Name: Early Well #: 114-HA
 Sec. 11 Twp. 15 S. R. 20 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 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 <i>(Submit Copy)</i> List All E. Logs Run: <p style="text-align: center;">Gamma Ray Neutron Completion Log</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ <p style="text-align: center;">(SEE ATTACHED LOG)</p>
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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	9 5/8"	6 1/4"		84'	Portland	15sx	
Completion	5 5/8"	2 7/8"upset 10	rnd	930'	Portland	134sx	50/50 Poz Mix 2% Gel

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
2	886-906 (40 shots)		
		<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> RECEIVED JAN 03 2011 KCC WICHITA </div>	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio Gravity

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

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled _____
 Other (Specify) _____

Production Interval

TOWN OIL COMPANY, INC.

"Drilling and Production"

16205 W 287th Street
Paola, Kansas 66071

Fax# 913-294-4823

PHONE: 913-557-5482
913-294-2125

WELL: Early 114-HA

LEASE OWNER: Town Oil Company, Inc.

WELL LOG

Thickness of Strata	Formation	Total Depth
0-1	soil/clay	1
70	sandstone	71
4	lime/shale	75
140	shale	215
5	lime	220
8	shale	228
12	lime	240
8	shale	248
8	lime	256
5	shale	261
17	lime	278
13	shale	291
4	sand	295
16	shale	311
20	lime	331
74	shale	405
22	lime	427
15	shale	442
4	lime	450
24	shale	474
18	lime	492
4	shale	496
1	lime	497
13	shale	510
24	lime	534
8	shale/slate	542
23	lime	565
4	shale/slate	569
4	lime	573
3	shale/slate	576
5	lime	581
161	shale	742
10	sandy shale	752
7	lime	759
6	shale	765
2	lime	767
11	shale	778
10	lime	788
12	shale	800
3	lime	803
5	shale	808
4	limey sand	812

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TOWN OIL COMPANY, INC.

"Drilling and Production"

16205 W 287th Street
Paola, Kansas 66071

Fax# 913-294-4823

PHONE: 913-557-5482
913-294-2125

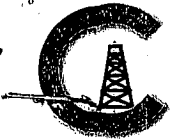
WELL: Early 114-HA

LEASE OWNER: Town Oil Company, Inc.

WELL LOG (CON'T)

Thickness of Strata	Formation	Total Depth
2	shale	814
4	lime	818
3	shale	821
1	lime	822
26	shale	848
6	lime	854
5	sandy shale	859
14	sandy shale	873
10	sand	883
21	sand	904
38	sandy shale	942 TD

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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 237077

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Invoice Date: 10/07/2010 Terms: 0/30,n/30 Page 1
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TOWN OIL COMPANY
16205 W. 287 STREET
PAOLA KS 66071
(785)294-2125

EARLY 114-HA
27179
NE 11-15-20 DG
10/01/2010
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	132.00	9.8400	1298.88
1118B	PREMIUM GEL / BENTONITE	325.00	.2000	65.00
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	25.00	3.65	91.25
368 CASING FOOTAGE	930.00	.00	.00
503 MIN. BULK DELIVERY	1.00	315.00	315.00

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Parts:	1386.88	Freight:	.00	Tax:	101.25	AR	2819.38
Labor:	.00	Misc:	.00	Total:	2819.38		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27179
LOCATION Ottawa KS
FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
620-43 9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

D	E	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/10	10	7823	Early # 114-HA	NE 11	15	20	DG
CUST/IER Town Oil Co				TRUCK #			
MAILIN ADDRESS 16205 W 287 th St.				DRIVER			
CITY Topeka				TRUCK #			
STATE KS				DRIVER			
ZIP CODE 66071				TRUCK #			
				DRIVER			

JOB T E long string HOLE SIZE 5 7/8 HOLE DEPTH 940 CASING SIZE & WEIGHT 2 1/8 10RD EOE
CASIN DEPTH 930 DRILL PIPE Pin @ TIRING 925 OTHER _____
SLURI WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
DISPL :EMENT 5.37 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM
REMA IS: Establish circulation. Mix + Pump 200# Gel Flush. Mix + Pump 1345sk 50/50 Por mix Cement 2% Gel. Cement to Surface Flush pump & lines clean. Displace 2 1/2" Rubber plug to casing & Pin measure w/ 5.37 BBLs Fresh water. Pressure to 600* PSI. Shut in casing.

Fred Mader

C Water Supplied H2O

ACI	UNT	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5	01	1	PUMP CHARGE		925 ⁰⁰
5	06	25mi	MILEAGE		91 ²⁵
5	02	930'	Cas. Footage		N/C
5	07	Minimum	Ton Miles		315 ⁰⁰
1	4	1325sk	50/50 Por Mix Cement		1298 ⁸⁸
1	8B	325 [#]	Premium Gel		65 ⁰⁰
4	02	1	2 1/2" Rubber Plug		23 ⁰⁰
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JAN 03 2011					
KCC WICHITA					
WD # 237077					
7.3%					SALES TAX
					ESTIMATED
					TOTAL
					101.25
					2819 ³⁸

Ravin 37

AUTH IZATION Winterton Town TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.