

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 W. 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.

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 #: _____
10/18/2010 10/21/2010 11/1/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 045-21696-00-00
Spot Description: _____
NW SE NW NE Sec. 31 Twp. 13 S. R. 21 East West
825 Feet from North / South Line of Section
1,815 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 #: 6
Field Name: Little Wakarusa
Producing Formation: Squirrel
Elevation: Ground: 906' Kelly Bushing: _____
Total Depth: 800' Plug Back Total Depth: 784'
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: 784
feet depth to: surface w/ 129 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: 12/22/2010

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: DS Date: 12/29/10
RECEIVED
DEC 27 2010
KCC WICHITA

Operator Name: J & J Operating, LLC Lease Name: South Grosdidier Well #: 6
 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
--	---

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 7/8"	6 1/4"	23.0#	40'	Portland	4	
Production	5 5/8"	2 7/8"	5.8#	784'	50/50 Poz	129	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 <i>(Amount and Kind of Material Used)</i>	Depth
2 SPF	672-682' 21 Perfs	Spot 75 gal 15% HCL	672-690'
	684-690' 13 Perfs	130 bbls. city H2o w KCL	
		#300 20/40, #2700 12/20 sand	

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="text-align: center; border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">RECEIVED</div>
---	---	---

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

DEC 27 2010
KCC WICHITA



JTC Oil, Inc.
 P.O. Box 24386
 Stanley, Kansas 66283

New Well Data

Invoice 790065

<u>Date</u>	<u>Customer #</u>	<u>Well Name and #</u>	<u>Sec</u>	<u>Town</u>	<u>Range</u>	<u>County</u>
12/17/2010	1	Grosdidier #6	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>
10/18/2010	6 1/4	4	10/18/2010
<u>Longstring</u>	<u>Length / Size</u>	<u>Sks. Cement</u>	<u>Pit Clouser Date</u>
10/19/2010	2 7/8 at 765 ft		
<u>Total Casing Depth</u>			
765			
<u>Total Well Depth</u>			
800			

Comments

Authorization _____

Title _____

RECEIVED
 DEC 27 2010
 KCC WICHITA



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 27228
LOCATION Ottawa KS
FOREMAN Fred Mader

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
10/21/10	4028	50. Granddier # 10	W NE 28	13N	21	DG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
J & J Operating LLC			506	Fred	Sally May	
MAILING ADDRESS			368	Ken		
10380 W 179th St			370	Arlan		
CITY	STATE	ZIP CODE	548	Tim		
Bucyrus	KS	66013				

JOB TYPE long string HOLE SIZE 6" HOLE DEPTH 800' CASING SIZE & WEIGHT 2 1/8" EUE
 CASING DEPTH 781' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 4.548 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4BPM

REMARKS: Establish circulation mix & pump 100# Premium Gel Flush.
Mix & Pump 129 SKS 50/50 Poz. Mix Cement 2% Gel 1/2#
Pheno Seal per sack. Cement to surface. Flush pump & lines
clean. Displace 2 1/2" Rubber plug to casing TD w/ 4.548 BBL
Fresh water. Pressure to 700# PSI. Release pressure to set
float valves. Shut in casing.

Fred Mader

JTC Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		925 ⁰⁰
5406	30 mi	MILEAGE Pump Truck		109 ⁰⁰
5402	781'	Casing Footage		N/C
5407	Minimum	Ton Miles		315 ⁰⁰
5502S	2 hrs	80 BBL Vac Truck		200 ⁰⁰
1124	126 SKS	50/50 Poz Mix Cement		1239
1118B	317 #	Premium Gel		634
1107A	65 #	Pheno Seal		542
4402	1	2 1/2" Rubber Plug		23 ⁰⁰
		WOT# 237533		
			7.3%	SALES TAX 102
				ESTIMATED TOTAL 3052

RECEIVED
DEC 27 2010
KCC WICHITA

Ravin 3737

AUTHORIZATION [Signature] 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