

Kansas Corporation Commission Oil & Gas Conservation Division 1049291

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 # 6766	API No. 15
Name: N & W Enterprises, Inc.	Spot Description:
Address 1:1111 S MARGRAVE	NE_SW_NW_SE Sec. 33 Twp. 28 S. R. 22 ▼ East West
Address 2:	
City: FORT SCOTT State: KS Zip: 66701	
Contact Person: Thomas Norris	
Phone: (620) 223-6559	NE NW SE SW
33734	County: Crawford
Name: Hat Drilling LLC	Lease Name: Meyer Well #: 14
Wellsite Geologist: n/a	
Purchaser: Plains Marketing	Producing Formation: Bartlesville
Designate Type of Completion:	Elevation: Ground: 991 Kelly Bushing: 3
✓ New Well ☐ Re-Entry ☐ Workov	430
V oii □wsw □swb □	SIOW Amount of Surface Pipe Set and Cemented at: 2 Feet
	SIGW Multiple Stage Cementing Collar Used? Yes No
	Temp. Abd. If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 428
Cathodic Other (Core, Expl., etc.):	feet depth to: 0 w/ 76 sx cmt
If Workover/Re-entry: Old Well Info as follows:	ox one
Operator:	<u> </u>
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: _	Chloride content: 0 ppm Fluid volume: 0 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐	, ''
☐ Conv. to GSW	Dewatering method used
Plug Back: Plug Back Total	Depth Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name:
Dual Completion Permit #:	
SWD Permit #:	
ENHR Permit #:	Quarter Sec. Twp. S. R. East West
GSW Permit #:	County: Permit #:
12/22/2010 12/22/2010 12/29/20	010
Spud Date or Date Reached TD Completion Recompletion Date Recompletion	

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.

Submitted Electronically

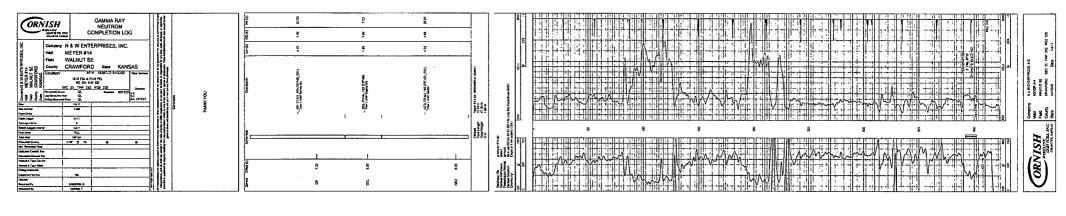
KCC Office Use ONLY				
Letter of Confidentiality Received				
Date:				
Confidential Release Date:				
✓ Wireline Log Received	, ()			
Geologist Report Received	$O' \circ O$			
UIC Distribution				
ALT I I III Approved by: Deanna Garrison Da	te: 01/18/2011			

Side Two



1049291

Operator Name: N & W Enterprises, Inc.			Lease N	Name: _	Meyer		. Well #: <u>14</u>		
Sec. 33 Twp.28	s. R. <u>22</u>	✓ East	County:	Craw	ford				
time tool open and clo	osed, flowing and shu es if gas to surface te	d base of formations pen t-in pressures, whether s est, along with final chart(well site report.	hut-in press	sure read	ched static level,	hydrostatic press	ures, bottom h	nole temp	erature, fluid
Drill Stem Tests Taken			V L	og Formation	n (Top), Depth an	oth and Datum		Sample	
Samples Sent to Geological Survey		Yes V No		Name Bartlesville		Тор 392			Datum 02
Cores Taken Electric Log Run Electric Log Submitted Electronically (If no, Submit Copy)		Yes No Yes No Yes No							
List All E. Logs Run:									
Gamma Ray Neutron									
			RECORD	✓ Ne		en ete			
Purpose of String	Size Hole Drilled	Report all strings set- Size Casing Set (In O.D.)	Weig	ght	Setting Depth	Type of Cement	# Sacks Used		and Percent
Surface	12	7	8.4	1 1.	20	Portland #1	6	Additives	
Production	5.875	2.875	6.5		428	Portland #1	73	NA	
		ADDITIONAL	CEMENTIN	VG / SQL	JEEZE RECORD	J			
Purpose: Depth Top Bottom		Type of Cement #		# Sacks Used Type and Percent Additives					
Protect Casing Plug Back TD									
Plug Off Zone	-								
Shots Per Foot		ON RECORD - Bridge Plug				cture, Shot, Cement		rd	Depth
2	Specify Footage of Each Interval Perforated 392 - 402								392 - 402
	,	·							
TUBING RECORD:	Size: 2.875	Set At: 428	Packer At	t:	Liner Run:	Yes ✓ No			
Date of First, Resumed	Production, SWD or EN	IHR. Producing Meti	hod:	g 🗌	Gas Lift 0	ther (Explain)			
Estimated Production Per 24 Hours	Oil	Bbis. Gas	Mcf	Wat	er Bt	ols. (Gas-Oil Ratio		Gravity
DISPOSITI	ON OF GAS:	A	METHOD OF	COMPLE	TION:		PRODUCTION	ON INTER	
Vented Solo			Perf. [Dually	Comp. Con	nmingled			V/ 1L.
(If vented, Sui	bmit ACO-18.)	Other (Specify)		(Submit)	чсО-5) (Subr 	mit ACO-4)			



Kepley Well Service, LLC

19245 Ford Road Chanute, KS 66720 Date Invoice # 1/13/2011 A-45713

Cement Treatment Report

N & W Enterprise Inc. 1111 S. Margrave Fort Scott, KS 66701 (x) Landed Plug on Bottom at 700 PS1
() Shut in Pressure
(x)Good Cement Returns
() Topped off well with______ sacks
(x) Set Float Shoe

TYPE OF TREATMENT: Production Casing HOLE SIZE: 5 5/8"
TOTAL DEPTH: 430

Well Name	Terms	Due Date 1/13/2011			
	Net 15 days				
Service	Service or Product		Per Foot	Pricing/Unit Pricing	Amount
Run and cement 2 7/8" Sales Tax Pay online at https://paymentnetwork.id Completed Myers #14 Crawford County Section: Township: Range:	ntuit.com/login/qb	428		3.00 7.30%	1,284.00 0.00

Hooked onto 2 7/8" casing. Established circulation with 2 barrels of water, GEL, METSO, COTTONSEED ahead, blended 73 sacks of OWC, dropped rubber plug, and pumped 2.5 barrels of water

Total	\$1,284.00
Payments/Credits	\$0.00
Balance Due	\$1,284.00