

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

12/30/10

OPERATOR: License # 30129  
Name: EAGLE CREEK CORPORATION  
Address 1: 150 N. MAIN  
Address 2: SUITE 905  
City: WICHITA State: KS Zip: 67202 + 1317  
Contact Person: DAVE CALLEWAERT  
Phone: (316) 264-8044  
CONTRACTOR: License # 32701  
Name: C & G DRILLING COMPANY  
Wellsite Geologist: BOB O'DELL  
Purchaser: NONE

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Gas  ENHR  SIGW  CM (Coal Bed Methane)  Temp. Abd.  
 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.  Conv. to SWD  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled Docket No.: \_\_\_\_\_  
 Dual Completion Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No.: \_\_\_\_\_  

<u>12-11-2009</u>	<u>12-17-2009</u>	<u>12-17-2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23848-0000  
Spot Description: \_\_\_\_\_  
\_\_\_\_\_ Sec. 18 Twp. 28 S. R. 8  East  West  
2410 Feet from  North /  South Line of Section  
6935 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: BUTLER  
Lease Name: JIMESON Well #: 1-18  
Field Name: WILDCAT  
Producing Formation: NONE  
Elevation: Ground: 1544 Kelly Bushing: 1553  
Total Depth: 2865 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 231 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 PANJ 1-B-10  
(Data must be collected from the Reserve Pit)  
Chloride content: 8000 ppm Fluid volume: 800 bbls  
Dewatering method used: EVAPORATION  
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: \_\_\_\_\_  
Title: PRESIDENT Date: 12-30-2009  
Subscribed and sworn to before me this 30<sup>th</sup> day of DECEMBER, 2009.  
Notary Public: Deborah R. Haddock  
Date Commission Expires: 11/28/13

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
RECEIVED  
DEC 31 2009

KCC WICHITA

Operator Name: **EAGLE CREEK CORPORATION**

Lease Name: **JIMESON**

Well # **1-18**

Sec. 18 Twp. 28 S. R. 8  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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run: <b>DUAL INDUCTION, COMPENSATED NEUTRON &amp; DENSITY W/ PE CURVE</b></p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>IATAN</td> <td>1631</td> <td>-78</td> </tr> <tr> <td>LANSING</td> <td>1720</td> <td>-167</td> </tr> <tr> <td>KANSAS CITY</td> <td>2031</td> <td>-478</td> </tr> <tr> <td>CHEROKEE SHALE</td> <td>2524</td> <td>-971</td> </tr> <tr> <td>MISSISSIPPI</td> <td>2807</td> <td>-1254</td> </tr> </table>	Name	Top	Datum	IATAN	1631	-78	LANSING	1720	-167	KANSAS CITY	2031	-478	CHEROKEE SHALE	2524	-971	MISSISSIPPI	2807	-1254
Name	Top	Datum																	
IATAN	1631	-78																	
LANSING	1720	-167																	
KANSAS CITY	2031	-478																	
CHEROKEE SHALE	2524	-971																	
MISSISSIPPI	2807	-1254																	

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
<b>SURFACE</b>	12.25"	8.625"	23#/ft	231	COMMON	130	3%cc, 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 <i>(Amount and Kind of Material Used)</i>	Depth

<b>TUBING RECORD:</b>		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

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------



**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 # 232455

Invoice Date: 12/18/2009 Terms:

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EAGLE CREEK CORP.  
150 N. MAIN  
WICHITA KS 67202  
( ) -

JIMESON 1-18  
23887  
12-17-09

CONFIDENTIAL

DEC 30 2009

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	85.00	10.7000	909.50
1118A	S-5 GEL/ BENTONITE (50#)	290.00	.1600	46.40

Description	Hours	Unit Price	Total
439 MIN. BULK DELIVERY	1.00	296.00	296.00
463 P & A NEW WELL	1.00	870.00	870.00
463 EQUIPMENT MILEAGE (ONE WAY)	35.00	3.45	120.75

*Cement for plugging*

VEN. NO. CONOW WELL # 01503-01  
ACCT. # 71155 AMT. 2293.31  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_

RECEIVED  
DEC 31 2009

KCC WICHITA

Parts:	955.90	Freight:	.00	Tax:	50.66	AR	2293.31
Labor:	.00	Misc:	.00	Total:	2293.31		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK 918/338-0808    ELDORADO, KS 316/322-7022    EUREKA, KS 620/583-7664    GILLETTE, WY 307/686-4914    McALESTER, OK 918/426-7667    OTTAWA, KS 785/242-4044    THAYER, KS 620/839-5269    WORLAND, WY 307/347-4577



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 23887

LOCATION EURORA

FOREMAN Rick Ledford

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
12-17-09	2776	Joneson 1-12	19	285	86	Burt Co
CUSTOMER			TRUCK #		DRIVER	
Eagle Creek Corporation			463		Shannon	
MAILING ADDRESS			439		John	
150 N. Main Ste 905						
CITY						
Wichita						
STATE						
KS						
ZIP CODE						
67202						

JOB TYPE QTA HOLE SIZE \_\_\_\_\_ HOLE DEPTH 2865' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH \_\_\_\_\_ DRILL PIPE 4 1/2' TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14" SLURRY VOL \_\_\_\_\_ WATER gal/sk 2.0 CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT \_\_\_\_\_ DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to drill pipe. Plugging orders as follows

35 SKS @ 271'  
25 SKS @ 100' to surface  
15 SKS @ mousehole  
10 SKS @ mousehole  
85 SKS total

CONFIDENTIAL  
 DEC 2 2009  
 KCC

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54051	1	PUMP CHARGE	870.00	870.00
5406	35	MILEAGE	3.45	120.75
1131	95 SKS	60/40 Premix cement	10.20	909.50
118A	290"	470 gal	.16	46.40
5407	3.66	ton mileage bulk/trk	m/k	296.00
RECEIVED				
DEC 31 2009				
KCC WICHITA				
			Subtotal	2242.65
			SALES TAX	50.66
			ESTIMATED TOTAL	2293.31

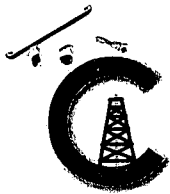
Ravin 3737

232455

HORIZION Witnessed by Dave Carter

TITLE Trk/price/ob

DATE \_\_\_\_\_



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INVOICE

Invoice # 232412

Invoice Date: 12/15/2009 Terms:

Page 1

EAGLE CREEK CORP.  
150 N. MAIN  
WICHITA KS 67202  
( ) -

JIMESON 1-18  
23891  
12-12-09

CONFIDENTIAL

DEC 30 2009

KCC

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	130.00	12.7000	1651.00
1102	CALCIUM CHLORIDE (50#)	365.00	.7100	259.15
1118A	S-5 GEL/ BENTONITE (50#)	245.00	.1600	39.20
1107	FLO-SEAL (25#)	32.00	1.9700	63.04

Description	Hours	Unit Price	Total
445 CEMENT PUMP (SURFACE)	1.00	680.00	680.00
445 EQUIPMENT MILEAGE (ONE WAY)	35.00	3.45	120.75
515 MIN. BULK DELIVERY	1.00	296.00	296.00

*Cement for surface pipe*

VEN. NO. CONOW WELL # D1502-01  
ACCT. # 71140 AMT. \$3,215.80  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_  
ACCT. # \_\_\_\_\_ AMT. \_\_\_\_\_

RECEIVED  
DEC 31 2009

KCC WICHITA

Parts:	2012.39	Freight:	.00	Tax:	106.66	AR	3215.80
Labor:	.00	Misc:	.00	Total:	3215.80		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_ Date \_\_\_\_\_

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