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JAN 06 2011

KCC WICHITA

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 # 32702
Name: Kutter Oil Co. Inc.
Address 1: 701 E River
Address 2:
City: Eureka State: KS Zip: 67045 +
Contact Person: Tim Gulick
Phone: (620) 583-4306
CONTRACTOR: License # 32701
Name: C&G Drilling Co., Inc.
Wellsite Geologist: Bill Jackson
Purchaser:

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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 #:

7-27-10	7-29-10	8-4-10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23866-00-00
Spot Description:
NE SE NE Sec. 11 Twp. 25 S. R. 7 East West
1,650 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Butler
Lease Name: Roy Well #: 6
Field Name: Rosalia
Producing Formation: Squirrel
Elevation: Ground: 1485 Kelly Bushing: 1494
Total Depth: 2561 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 200 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

(Data must be collected from the Reserve Pit)

Chloride content: 300 ppm Fluid volume: 40 bbls
Dewatering method used: Let Settle Out
Location of fluid disposal if hauled offsite:
Operator Name: Kutter Oil Co., Inc.
Lease Name: Gish License #: 32702
Quarter SW Sec. 12 Twp. 25 S. R. 7 East West
County: Butler Permit #: E19,605

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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:

Title: Date: 1-17-11

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: Date: 1/21/11

Operator Name: Kutter Oil Co. Inc. Lease Name: Roy Well #: 6
 Sec. 11 Twp. 2625 S. R. 7 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 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 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 Squirrel Sand 2470 -976 <div style="text-align: center;"> RECEIVED JAN 05 2011 KCC WICHITA </div>
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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	12 1/4	8 5/8	24#	200	ClassA	105	3%CC
Prod	7 7/8	5 1/2	15#	2560	Thickset	285	

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
11	2468-2478	500 Gal Mud Acid	2468-2492
11	2482-2492	8500# Sand Frac	2468-2492

TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>2460</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>10-6-10</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 28940

LOCATION Eureka

FOREMAN Troy Strick

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-27-10	4488	Ray #6				Butler
CUSTOMER Kutter Oil			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 701 E River			520	Cliff		
CITY Eureka	STATE Ks	ZIP CODE 67045	479	Chris		

JOB TYPE Slp 0 HOLE SIZE 12 1/4" HOLE DEPTH 222' CASING SIZE & WEIGHT 8 5/8" used
 CASING DEPTH 221' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL _____ WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
 DISPLACEMENT 12.586 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting! Rig up to 8 5/8" casing. Break circulation w/ 586l water.
Mixed 105sk Class A Cement w/ 22 Gal, 37 Coals + 1/4" Floccle @ 15"/gal.
Displace w/ 12.586l water. shut casing in w/ Good Cement to surface =
686l slury to pit
Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	20	MILEAGE	3.65	73.00
11045	105sk	Class A Cement	13.50	1417.50
1118A	200*	22 Gal	.20	40.00
1102	300*	37 Coals	.75	225.00
1107	25*	1/4" Floccle	2.10	52.50
5407		Ton-mileage	m/c	315.00
RECEIVED				
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KCC WICHITA				
				2848.00
			EM SB Osgood	126.65
			Sub Total	
			SALES TAX	113.65
			ESTIMATED TOTAL	2835.00

Revin 3737 835489 DATE 7-27-2010

AUTHORIZATION witnessed by Duke TITLE CO/OWNER

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 form.



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 28993

LOCATION Eureka

FOREMAN Troy Strickler

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
7-29-10	4488	Roy #6				Butler
CUSTOMER Kutter Oil, Inc.			TRUCK #			
MAILING ADDRESS 303 S. High			DRIVER			
CITY Eureka			TRUCK #			
STATE Ks			DRIVER			
ZIP CODE 67045			TRUCK #			
			DRIVER			

JOB TYPE 4/5 0 HOLE SIZE 7 7/8" HOLE DEPTH 2561' K.B. CASING SIZE & WEIGHT 5 1/2" used
 CASING DEPTH 2560' K.B. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.6-13.4" SLURRY VOL 908bl WATER gal/sk 7.8" CEMENT LEFT in CASING 0'
 DISPLACEMENT 60.5bl DISPLACEMENT PSI 600 MIX PSI 1100 BpM RATE _____

REMARKS: Safety marking: Rig up to 5 1/2" casing w/ Rotary head. Pump 56bl Fresh
Water. Mixed 200skt 60/40 Poz-mix Cement w/ 8% Gel @ 12.6"/gal. Tail in
w/ 85skt ThickSet Cement w/ 5" Kol-Seal @ 13.4"/gal. Work out Pump + liner.
Displace w/ 60.5bl Water. Final Pump Pressure 600 PSI. Bump Plug @ 1100PSI.
wait 2mins. Release Pressure. Plug @ Float Held. Good circulation @ all
times. No Cement to surface.

Job Complete.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	20	MILEAGE	3.65	73.00
1131	200skt	60/40 Poz-mix Cement	11.35	2270.00
1118A	1376"	Gel 8% RECEIVED	.20	275.20
1107	50"	Floccs 1/4" /sk JAN 16 2011	2.10	105.00
1126A	85skt	ThickSet Cement KCC WICHITA	17.00	1445.00
1110A	425"	Kol-Seal 5"/sk	.42	178.50
5407A	13.3 Ton	Ton-mileage	1.20	319.20
4454	1	5 1/2" Latch Down Plug	242.00	242.00
4157	1	5 1/2" AFLU Float shoe	328.00	328.00
4130	3	5 1/2" Centralizers	46.00	138.00
			Sub Total	6298.90
			50% Dis	314.95
			SALES TAX	306.31
			ESTIMATED TOTAL	6310.26

Ravin 3737

Thank You!
235581

AUTHORIZATION entered by Tim Galick TITLE Partner 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 form.