

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 # 33576
Name: David L. Cornish dba Cornish oil Co.
Address 1: 8467 S.E. Teter Rd.
Address 2: _____
City: Leon State: Ks. Zip: 67074 + _____
Contact Person: David Cornish
Phone: (316) 259-7042
CONTRACTOR: License # 32854
Name: Gulick Drilling Company Inc.
Wellsite Geologist: Thomas E. Blair
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 #: _____

1-07-11	1-10-11	1-10-11
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23886-00-00

Spot Description: _____

W2 SW SE SE Sec. 8 Twp. 28 S. R. 6 East West
330 Feet from North / South Line of Section
1,150 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Butler

Lease Name: Jones Well #: 2-8

Field Name: Wornack

Producing Formation: Kansas City

Elevation: Ground: 1307 Kelly Bushing: 1315

Total Depth: 2705 Plug Back Total Depth: 2299

Amount of Surface Pipe Set and Cemented at: 202 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: 800 ppm Fluid volume: 80 bbls

Dewatering method used: Hauled Off

Location of fluid disposal if hauled offsite:

Operator Name: MWK Petroleum

Lease Name: Blakeman #1 License #: 30582

Quarter _____ Sec. 3 Twp. 28s S. R. 6 East West

County: Butler Permit #: E17,267

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: [Signature] DBA CORNISH OIL CO.
Title: OWNER-RES. Date: 2-2-11

KCC Office Use ONLY RECEIVED

- Letter of Confidentiality Received Date: FEB 04 2011
 Confidential Release Date: _____
 Wireline Log Received **KCC WICHITA**
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: [Signature] Date: 2/7/11

Operator Name: David L. Cornish dba Cornish oil Co. Lease Name: Jones Well #: 2-8
 Sec. 8 Twp. 28 S. R. 6 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 checked="" 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: Cased hole gamma-ray-nuetron, sonic bond log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Kansas City</td> <td>2036</td> <td>-721</td> </tr> <tr> <td>KC Hertha Porosity</td> <td>2196</td> <td>-881</td> </tr> <tr> <td>Base Kansas City</td> <td>2218</td> <td>-903</td> </tr> <tr> <td>Cherokee</td> <td>2460</td> <td>-1145</td> </tr> <tr> <td>Bartlesville Zone</td> <td>2576</td> <td>-1261</td> </tr> <tr> <td>Mississippi</td> <td>2662</td> <td>-1347</td> </tr> <tr> <td>Rotary Total depth</td> <td>2705</td> <td>-1390</td> </tr> </tbody> </table>	Name	Top	Datum	Kansas City	2036	-721	KC Hertha Porosity	2196	-881	Base Kansas City	2218	-903	Cherokee	2460	-1145	Bartlesville Zone	2576	-1261	Mississippi	2662	-1347	Rotary Total depth	2705	-1390
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Rotary Total depth	2705	-1390																							

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
Production	7 7/8	4 1/2	10 1/2	2299	Class- A	100 sks	Bentonite,
<i>surf</i>	<i>12 1/4</i>	<i>8 5/8</i>		<i>211</i>		<i>140</i> 50#	Calcium Chloride
						50#	KOL 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 (Amount and Kind of Material Used)	Depth
2	2197-2205	500 Gal Mud Acid	2200
		1500 gal Mud acid-Hydrochloric	2200

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>2205</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>02-01-11</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. <u>6</u>	Gas Mcf <u>60</u> Water Bbls. <u>60</u> Gas-Oil Ratio <u>10%</u> Gravity <u>34%</u>

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: <u>2197-2205</u>
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30816
LOCATION E. Broadway #80
FOREMAN LARRY STORM

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																
1-8-11	3093	122222 Jones 2-8	8	58	5	Butler																
CUSTOMER Cornish Oil Company			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>491</td> <td>Ron M.</td> <td></td> <td></td> </tr> <tr> <td>502</td> <td>KEVIN</td> <td></td> <td></td> </tr> <tr> <td>539</td> <td>LARRY</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	491	Ron M.			502	KEVIN			539	LARRY		
TRUCK #	DRIVER	TRUCK #					DRIVER															
491	Ron M.																					
502	KEVIN																					
539	LARRY																					
MAILING ADDRESS 8467 SE Teter Rd																						
CITY Heav	STATE Ks	ZIP CODE 67074																				

JOB TYPE Surfacer B HOLE SIZE 12 1/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 211 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 13119 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 1/2 bbls

REMARKS Spud Meeting - Roped up to 8 5/8 casing - broke circulation
Mixed 140 sks Class A + 3% Cacka - Displaced cement with 1 1/2
bbls water. Circulated cement to surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5400	21	MILEAGE	3.65	76.65
11043	140	skt A	13.50	1890.00
1102	320	lbs CACKA	.75	240.00
5407	1	Bulk Delivery	315.00	315.00
<u>Subtotal</u>				3246.65
SALES TAX				139.52
ESTIMATED TOTAL				3386.17

RECEIVED
FEB 04 2011
KCC WICHITA

Revin 3737 AUTHORIZATION TITLE 2390804 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.



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30817
LOCATION C100000 #80
FOREMAN LARRY STORM

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
1-11-10	3093	JONES 2-8	8	283	5E	BUTLER
CUSTOMER Carnish OPI Co			SAFETY MEETING			
MAILING ADDRESS 8467 SE Teter Rd			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Leaw			STATE KS	ZIP CODE 67074		
			08. 539	LARRY		
			Am 467	Row M.		
			IS 502	TEH		
			LW 481	TFM M.		

JOB TYPE Prod B HOLE SIZE 7 7/8 HOLE DEPTH 2705 CASING SIZE & WEIGHT 4 1/2 105.16
CASING DEPTH 2291 DRILL PIPE _____ TUBING _____ OTHER 2004 float
SLURRY WEIGHT 14.8 SLURRY VOL 284 WATER gal/sk 7.5 CEMENT LEFT in CASING 27.4
DISPLACEMENT 35.99 DISPLACEMENT PSI 500 MIX PSI 0 RATE 4 bbl/s

REMARKS: Safety Meeting - Rigger up to 4 1/2 Csg. - Opened Basket Shoe at 950 lbs. - M PUG 100 sks A + 3% DCL + 2% CACL2 5 lbs Kol-seal pack - Flush to Pump & PWS - Displaced Plug with 575 lbs water water landed plug at 1350 lbs - Released and float held.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	21	MILEAGE	3.65	76.65
11045	100	3/8 A	13.50	1350.00
1118B	300	1/2 Gal	.20	60.00
1102	160	1/2 CACL2	.75	120.00
1110A	500	1/2 Kol/Seal	.42	210.00
5407	1	Bulk Delivery	315.00	315.00
5502.C	3	80 VAR	100.00	300.00
1123	3	CITY WATER	14.90	44.70
4254	1	1/2 Basket Shoe	1092.00	1092.00
4108	1	4 1/2 Cement Basket	208.00	208.00
4453	1	4 1/2 Latchdown Plug	221.00	221.00
4129	4	4 1/2 x 7 1/2 Control Joints	40.00	160.00
		Subtotal		5082.35
		SALES TAX		281.02
		ESTIMATED TOTAL		5363.37

Ravin 3737

239148

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 form.



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 # 239084

Invoice Date: 01/13/2011 Terms:

Page 1

CORNISH OIL CO
8467 SE TETER ROAD
LEON KS 67074
() -

JONES 2-8
30816
01-08-11

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	140.00	13.5000	1890.00
1102	CALCIUM CHLORIDE (50#)	320.00	.7500	240.00

Description	Hours	Unit Price	Total
491 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
491 EQUIPMENT MILEAGE (ONE WAY)	21.00	3.65	76.65
502 MIN. BULK DELIVERY	1.00	315.00	315.00

SURFACE

*P.D. # 1167
1-18-11*

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Parts:	2130.00	Freight:	.00	Tax:	139.52	AR	3386.17
Labor:	.00	Misc:	.00	Total:	3386.17		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



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 # 239148

Invoice Date: 01/17/2011 Terms: Page 1

CORNISH OIL CO
8467 SE TETER ROAD
LEON KS 67074
() -

JONES 2-8
30817
01-11-11

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	100.00	13.5000	1350.00
1118B	PREMIUM GEL / BENTONITE	300.00	.2000	60.00
1102	CALCIUM CHLORIDE (50#)	160.00	.7500	120.00
1110A	KOL SEAL (50# BAG)	500.00	.4200	210.00
1123	CITY WATER	3000.00	.0149	44.70
4254	TYPE B BASKET SHOE 4 1/2	1.00	1092.0000	1092.00
4103	CEMENT BASKET 4 1/2"	1.00	208.0000	208.00
4453	4 1/2" LATCH DOWN PLUG	1.00	221.0000	221.00
4129	CENTRALIZER 4 1/2"	4.00	40.0000	160.00

Description	Hours	Unit Price	Total
437 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
467 CEMENT PUMP	1.00	925.00	925.00
467 EQUIPMENT MILEAGE (ONE WAY)	21.00	3.65	76.65
502 MIN. BULK DELIVERY	1.00	315.00	315.00

Consolidated
P.R. EX# 1169
1-21-11

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KCC WICHITA

Parts:	3465.70	Freight:	.00	Tax:	227.02	AR	5309.37
Labor:	.00	Misc:	.00	Total:	5309.37		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____