

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33813
Name: Jason Oil Company, LLC.
Address: P O Box 701
Russell, Kansas 67665
City/State/Zip:
Purchaser:
Operator Contact Person: James Schoenberger
Phone: (785) 483-8027
Contractor: Name: Royal Drilling, Inc.
License: 33905
Wellsite Geologist: Francis C. Whisler

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

11/01/10 11/07/10 11/7/10
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 165-21906-00-00
County: Rush
W2 SW SE SW Sec. 3 Twp. 16 S. R. 16 East West
330 feet from (S) / N (circle one) Line of Section
1610 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: McCracken Well #: 2
Field Name: Beeching So.

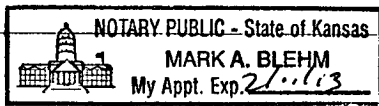
Producing Formation: _____
Elevation: Ground: 1958 Kelly Bushing: 1963
Total Depth: 3650 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 1051 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 7600 ppm Fluid volume 400 bbls
Dewatering method used let pits dry & backfil
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: James I. Schoenberger
Title: President Date: 11-18-2010
Subscribed and sworn to before me this 19 day of November
20 10
Notary Public: _____
Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
PWA-DLG- 02/14/11

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1-31-11
KCC WICHITA

Operator Name: Jason Oil Company, LLC. Lease Name: McCracken Well #: 2
 Sec. 3 Twp. 16 S. R. 16 East West County: Rush

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.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 <i>(Submit Copy)</i> List All E. Logs Run: <u>Radiation-Guard & Microresistivity</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1052</td> <td>+ 911</td> </tr> <tr> <td>Topeka Lime</td> <td>2948</td> <td>- 985</td> </tr> <tr> <td>Heebner Shale</td> <td>3171</td> <td>-1208</td> </tr> <tr> <td>Lansing-Kansas City</td> <td>3228</td> <td>-1265</td> </tr> <tr> <td>Base Kansas City</td> <td>3458</td> <td>-1495</td> </tr> <tr> <td>Cherty Conglomerate</td> <td>3496</td> <td>-1533</td> </tr> <tr> <td>Arbuckle Dolomite</td> <td>3548</td> <td>-1585</td> </tr> <tr> <td>Granite</td> <td>3610</td> <td>-1647</td> </tr> <tr> <td>Total Depth</td> <td>3650</td> <td>-1684</td> </tr> </table>	Name	Top	Datum	Anhydrite	1052	+ 911	Topeka Lime	2948	- 985	Heebner Shale	3171	-1208	Lansing-Kansas City	3228	-1265	Base Kansas City	3458	-1495	Cherty Conglomerate	3496	-1533	Arbuckle Dolomite	3548	-1585	Granite	3610	-1647	Total Depth	3650	-1684
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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	12 1/4"	8 5/8"	24	1051	common	400	

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

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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

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