

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM ORIGINAL
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4226
Name: galemore oil
Address 1: 305 east rutledge
Address 2: _____
City: yates center State: ks Zip: 66783 + _____
Contact Person: matt galemore
Phone: (620) 625-2621
CONTRACTOR: License # 31751
Name: jv oil
Wellsite Geologist: _____
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 #: _____

10-22-2010	10-27-2010	11-15-2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001-30112-00-00

Spot Description: _____
sw ne sw sw Sec. 17 Twp. 26 S. R. 18 East West
815 Feet from North / South Line of Section
4,455 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: allen

Lease Name: mendenhall Well #: 15

Field Name: humboldt-charute

Producing Formation: bartlesville and cattleman

Elevation: Ground: 936 Kelly Bushing: _____

Total Depth: 871 Plug Back Total Depth: 864.85

Amount of Surface Pipe Set and Cemented at: 20' 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: _____ ppm Fluid volume: _____ bbls:

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: KCC WICHITA

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

RECEIVED
FEB 25 2011

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: Matt Gale

Title: owner Date: 1-18-2011

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: _____

RECEIVED
FEB 07 2011
Dg date: 3/3/11
KCC WICHITA

Operator Name: galemore oil Lease Name: mendenhall Well #: 15
 Sec. 17 Twp. 26 S. R. 18 East West County: allen

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 (Attach Additional Sheets) 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, Submit Copy) List All E. Logs Run: <u>Gamma Ray / Neutron / CCL</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input type="checkbox"/> New <input checked="" 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
casing	5.78	2.38		864.85	portland	125	6gal water per sack
Surface Casing		8.5/8		20'	portland	5.5	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	804-833	portland	125	6 gal water per sack

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
3	804-810 19 perms 828-833 16 perms	see tickets attached	871
RECEIVED			FEB 25 2011

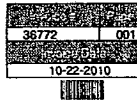
TUBING RECORD: Size: <u>2.38</u> Set At: <u>864.85</u> Packer At:		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	KCC WICHITA
Date of First, Resumed Production, SWD or ENHR. <u>12-07-2010</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>3</u>	Gas Mcf <u>1</u>	Water Bbls. <u>1</u> Gas-Oil Ratio <u>29</u> Gravity <u>29</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <div style="text-align: right; font-size: 1.2em; font-weight: bold;">RECEIVED</div>
---	--	---

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

FEB 07 2011
KCC WICHITA

Superior Building Supply, Inc.
215 West Rutledge
Yates Center, KS 66783
620-625-2447



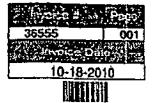
SOLD TO: Galemore Matt & Julie
305 E. Rutledge
Yates Center, KS 66783

620-625-2621

Please Remit To: Superior Building Supply, Inc., 215 West Rutledge, Yates Center, KS 66783

Net 10th	36772	House	MED	G26210	AEO	Extended Price
4.000	MA1235	MA Portland Cement 94#			11.60	46.40
Comment: WE CAN E-MAIL YOUR INVOICES & STATEMENTS LET US KNOW YOUR E-MAIL ADDRESS						Taxable: 46.40 Tax: 4.20 Non-Tax: 0.00 Total: 50.60

Superior Building Supply, Inc.
215 West Rutledge
Yates Center, KS 66783
620-625-2447



SOLD TO: Galemore Matt & Julie
305 E. Rutledge
Yates Center, KS 66783

620-625-2621

Please Remit To: Superior Building Supply, Inc., 215 West Rutledge, Yates Center, KS 66783

Net 10th	36555	House	MED	G26210	AEO	Extended Price
7.000	MA1235	MA Portland Cement 94#			11.60	81.20
Comment: WE CAN E-MAIL YOUR INVOICES & STATEMENTS LET US KNOW YOUR E-MAIL ADDRESS						Taxable: 81.20 Tax: 7.35 Non-Tax: 0.00 Total: 88.55

Received by:

Superior Building Supply, Inc.
215 West Rutledge
Yates Center, KS 66783
620-625-2447



SOLD TO: Galemore Matt & Julie
305 E. Rutledge
Yates Center, KS 66783

620-625-2621

Please Remit To: Superior Building Supply, Inc., 215 West Rutledge, Yates Center, KS 66783

Net 10th	37242	House	MED	G26210	LDB	Extended Price
5.000	MA1235	MA Portland Cement 94#			11.60	58.00
Comment: WE CAN E-MAIL YOUR INVOICES & STATEMENTS LET US KNOW YOUR E-MAIL ADDRESS						Taxable: 58.00 Tax: 5.25 Non-Tax: 0.00 Total: 63.25

Received by:

RECEIVED
FEB 25 2011
KCC WICHITA