

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 # 33554
Name: K. & B. Norton Oil & Investments, L.L.C.
Address 1: 1209 W. Park Grove Dr.
Address 2: _____
City: Manhattan State: KS Zip: 66503 + 2469
Contact Person: Ken Norton
Phone: (785) 320-2545
CONTRACTOR: License # 33793
Name: H2 Drilling, L.L.C.
Wellsite Geologist: Steven P. Murphy, P.G.
Purchaser: None--Dry

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD SIOW
 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 #: _____

11/4/10 11/14/10 11/14/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 203-20156-00-00

Spot Description: _____
SE SW NW SE Sec. 21 Twp. 16 S. R. 35 East West
1,570 Feet from North / South Line of Section
2,220 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Wichita
Lease Name: Harp Well #: 1
Field Name: Wildcat
Producing Formation: None
Elevation: Ground: 3203' Kelly Bushing: 3213'
Total Depth: 4900' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 287.7' 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: 21,000 ppm Fluid volume: 750 bbls
Dewatering method used: Air Dry, Backfill
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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: Kenneth A. Norton
Title: President Date: February 11, 2011

KCC Office Use ONLY

RECEIVED
FEB 14 2011
KCC WICHITA

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: PLA Dg Date: 2/18/11

Operator Name: K. & B. Norton Oil & Investments, L.L.C. Lease Name: Harp Well #: 1
 Sec. 21 Twp. 16 S. R. 35 East West County: Wichita

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 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Induction Log, Sonic Log & Dual Compensated Porosity Log	<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>Heebner</td> <td>4003'</td> <td>- 790'</td> </tr> <tr> <td>Lansing</td> <td>4049'</td> <td>- 836'</td> </tr> <tr> <td>Pawnee</td> <td>4540'</td> <td>-1327'</td> </tr> <tr> <td>Cherokee</td> <td>4620'</td> <td>-1407'</td> </tr> <tr> <td>Morrow</td> <td>4757'</td> <td>-1544'</td> </tr> <tr> <td>Mississippi</td> <td>4832'</td> <td>-1619'</td> </tr> <tr> <td>RTD</td> <td>4900'</td> <td>-1687'</td> </tr> </table>	Name	Top	Datum	Heebner	4003'	- 790'	Lansing	4049'	- 836'	Pawnee	4540'	-1327'	Cherokee	4620'	-1407'	Morrow	4757'	-1544'	Mississippi	4832'	-1619'	RTD	4900'	-1687'
Name	Top	Datum																							
Heebner	4003'	- 790'																							
Lansing	4049'	- 836'																							
Pawnee	4540'	-1327'																							
Cherokee	4620'	-1407'																							
Morrow	4757'	-1544'																							
Mississippi	4832'	-1619'																							
RTD	4900'	-1687'																							

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"	20#	287'	Common	180	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	None			

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
None	None	None	

TUBING RECORD: Size: <u>None</u> Set At: <u>None</u> Packer At: <u>None</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR: <u>None</u>	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 <u>None</u> Bbls. Gas <u>None</u> Mcf Water <u>None</u> Bbls. Gas-Oil Ratio <u>None</u> Gravity <u>None</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 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: _____ _____
---	---	--

ALLIED CEMENTING CO., LLC. 040826

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Oakley

DATE <u>11-4-10</u>	SEC. <u>21</u>	TWP. <u>16s</u>	RANGE <u>35w</u>	CALLED OUT	ON LOCATION	JOB START <u>3:30 Am</u>	JOB FINISH <u>4:00 Am</u>
LEASE <u>Harp</u>	WELL # <u>1</u>	LOCATION <u>pence 6w 3/4s</u>			COUNTY <u>wichita</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		LOCATION <u>1/2w Ninto</u>					

CONTRACTOR H2 Drilling #2
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 284'
 CASING SIZE 8 5/8 DEPTH 282.20'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 12.32 BBL
 EQUIPMENT _____

OWNER same
 CEMENT
 AMOUNT ORDERED 180 sks com
30cc 2 1/2 gel
 COMMON 180 sks @ 15.45 2781.00
 POZMIX _____ @ _____
 GEL 3 sks @ 20.80 62.40
 CHLORIDE 6 sks @ 58.20 349.20
 ASC _____ @ _____

PUMP TRUCK CEMENTER Andrew
 # 423-281 HELPER Larene
 BULK TRUCK
 # 396 DRIVER Darrin
 BULK TRUCK
 # _____ DRIVER _____

RECEIVED
FEB 4 2011
KCC WICHITA
 @ _____
 @ _____
 HANDLING 189 sks @ 2.40 453.60
 MILEAGE 104 sk/mile 945.00
 TOTAL 4591.20

REMARKS:

Cement did circulate
thank you

CHARGE TO: K+B Norton oil investments
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB 282.20'
 PUMP TRUCK CHARGE _____ 1018.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 50 miles @ 7.00 350.00
 MANIFOLD _____ @ _____
 @ _____
 @ _____
 TOTAL 1368.00

PLUG & FLOAT EQUIPMENT

5/8
8 5/8
~~1 surface plug~~ @ ~~68.00~~
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL 68.00

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME STEVEN CRAIG
 SIGNATURE Steven Craig

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 125188

Invoice Date: Nov 4, 2010

Page: 1

Voice: (785) 483-3887
Fax: (785) 483-5566

Bill To:
K & B Norton Oil & Inv. LLC 1209 W. Park Grove Dr. Manhattan, KS 66503-2469

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Norton	Harp #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Oakley	Nov 4, 2010	12/4/10

Quantity	Item	Description	Unit Price	Amount
180.00	MAT	Class A Common	15.45	2,781.00
3.00	MAT	Gel	20.80	62.40
6.00	MAT	Chloride	58.20	349.20
189.00	SER	Handling	2.40	453.60
50.00	SER	Mileage 189 sx @.10 per sk per mi	18.90	945.00
1.00	SER	Surface	1,018.00	1,018.00
50.00	SER	Pump Truck Mileage	7.00	350.00

RECEIVED
FEB 14 2011
KCC WICHITA

Subtotal	5,959.20
Sales Tax	264.99
Total Invoice Amount	6,224.19
Payment/Credit Applied	
TOTAL	6,224.19

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 1489.80

ONLY IF PAID ON OR BEFORE
Nov 29, 2010



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 125330

Invoice Date: Nov 14, 2010

Page: 1

Voice: (785) 483-3887
 Fax: (785) 483-5566

Bill To:
K & B Norton Oil & Inv. LLC 1209 W. Park Grove Dr. Manhattan, KS 66503-2469

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Norton	Harp #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Oakley	Nov 14, 2010	12/14/10

Quantity	Item	Description	Unit Price	Amount
180.00	MAT	Class A Common	15.45	2,781.00
120.00	MAT	Pozmix	8.00	960.00
10.00	MAT	Gel	20.80	208.00
75.00	MAT	Flo Seal	2.50	187.50
313.00	SER	handling	2.40	751.20
50.00	SER	Mileage 313 sx @ .10 per sk per mi	31.30	1,565.00
1.00	SER	Abandoned Well Plug	1,185.00	1,185.00
50.00	SER	Pump Truck Mileage	7.00	350.00

RECEIVED
 FEB 14 2011
 KCC WICHITA

Subtotal	7,987.70
Sales Tax	662.98
Total Invoice Amount	8,650.68
Payment/Credit Applied	
TOTAL	8,650.68

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 1597.54

ONLY IF PAID ON OR BEFORE
 Dec 9, 2010

