

CONFIDENTIAL

ORIGINAL

2/25/11

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33168
 Name: WOOLSEY OPERATING COMPANY, LLC
 Address: 125 N. MARKET, SUITE 1000
 City/State/Zip: WICHITA, KANSAS 67202
 Purchaser: BLUESTEM GAS MARKETING / PLAINS MARKETING
 Operator Contact Person: DEAN PATTISSON, OPERATIONS MANAGER
 Phone: (316) 267-4379 (ext 107)
 Contractor: Name: BEREDCO, INC.
 License: 5147
 Wellsite Geologist: BILLY G. KLAVER
 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: n/a
 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. _____

<u>10/28/2008</u>	<u>11/07/2008</u>	<u>12/11/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007 - 23368 0000 Qtr call: 15' N, 85' E of C SE NE
 County: BARBER
 SW NE - SE - NE Sec. 13 Twp. 34 S. R. 13 East West
1965 feet from S / (N) (circle one) Line of Section
575 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) (NE) SE NW SW
 Lease Name: COOK B Well #: 1
 Field Name: BOGGS SOUTHWEST
 Producing Formation: MISSISSIPPIAN
 Elevation: Ground: 1600 Kelly Bushing: 1613
 Total Depth: 5400 Plug Back Total Depth: 5233
 Amount of Surface Pipe Set and Cemented at 225 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from n/a
 feet depth to _____ w/ _____
Att-1-Dlg - 4/17/09 ^{5x cmt.}

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 26,000 ppm Fluid volume 1200 bbls
 Dewatering method used HAUL FREE FLUIDS AND ALLOW TO DRY
 Location of fluid disposal if hauled offsite:
 Operator Name: n/a
 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: _____
 Title: Dean Pattison, Operations Manager Date: February 25, 2009
 Subscribed and sworn to before me this 25th day of February,
20 09 .
 Notary Public: Debra K. Clingan
 Date Commission Expires: March 27, 2010

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



KANSAS CORPORATION COMMISSION

FEB 25 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: COOK B Well #: 1
 Sec. 13 Twp. 34 S. R. 13 East West County: BARBER

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Compensated Neutron Density PE
 Dual Induction
 Sonic Cement Bond

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Chase	2037	- 424
Toronto	3929	- 2316
Douglas	3983	- 2370
Swope	4586	- 2968
Hertha	4620	- 3007
Mississippian	4822	- 3209
Viola	5194	- 3581
Simpson	5286	- 3673

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	14 3/4"	10 3/4"	32# / ft	225'	Class A	250	2% gel, 3% cc
Production	7 7/8"	4 1/2"	10.5# / ft	5285'	60/40 poz	50	4% gel, 1/4# Floseal
					Class H	160	10% salt, 10% Gypseal, 1/4# Floseal, 6# Kalseal, ClaPro & .8% FL180

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
3	Mississippian 4824'-4870' & 4880'-4902'	ACID: 3600 gal 10% MIRA	
		FRAC: 374,050 gal treated fr wtr, 135,100# 30/70 sd,	
		24,000# 16/60 sd & 11,500# 16/30 resin coated sd	

TUBING RECORD	Size 2 3/8"	Set At 4953'	Packer At n/a	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First Resumerd Production, SWD or Enhr. 02/04/2009	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 5	Gas Mcf 25	Water Bbls. 100	Gas-Oil Ratio 5000 : 1	Gravity n/a
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Disposition of Gas: Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled 4824' - 4902' OA

Production Interval: Other (Specify) _____

ALLIED CEMENTING CO., LLC. 32510

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

SERVICE POINT:
Medicine Lodge KS.

DATE <u>12-28-09</u>	SEC <u>13</u>	TWP <u>34S</u>	RANGE <u>13W</u>	CALLED OUT <u>0230 AM</u>	ON LOCATION <u>0400 AM</u>	JOB START <u>0820AM</u>	JOB FINISH <u>0840AM</u>
LEASE <u>COOK B</u>	WELL # <u>01</u>	LOCATION <u>2818 Hartner Street, 8 S, w/into</u>			COUNTY <u>Barber</u>	STATE <u>KS.</u>	
OLD OR <u>(NEW)</u> (Circle one)							

CONTRACTOR Beredco #1 OWNER Woodsey Oper.

TYPE OF JOB Surface
 HOLE SIZE 14 3/4 T.D. 230
 CASING SIZE 10 3/4 DEPTH 219'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 400 psi MINIMUM 100
 MEAS. LINE _____ SHOE JOINT 20'
 CEMENT LEFT IN CSG. 20 per customer request
 PERFS. _____
 DISPLACEMENT 19 1/2 Bbls Fresh Water.

CEMENT AMOUNT ORDERED 250 SA + 290 GEL + 380 CL

EQUIPMENT
 PUMP TRUCK CEMENTER Gleg G
 # 480 HELPER Heath M
 BULK TRUCK # 389 DRIVER Scott P
 BULK TRUCK # _____ DRIVER _____

COMMON 250 A @ 15.45 3862.50
 POZMIX _____ @ _____
 GEL 5 @ 20.80 104.00
 CHLORIDE 9 @ 58.20 523.80
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 264 @ 2.40 633.60
 MILEAGE 30 x 264 x .10 792.00
 TOTAL 5915.90

REMARKS:

Pipe on bottom, Best Circulation, Pump 5 Bbls Ahead, Pump Cement 250 SA + 290 GEL + 380 CL, Stop pump, Stop Disp, See lift, slow rate, disp. with 19 1/2 Bbls fresh water, Shut in, Cement Circulated To Surface

SERVICE

DEPTH OF JOB 230'
 PUMP TRUCK CHARGE 0-300' 1018.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 30 @ 7.00 210.00
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL 1228.00

PLUG & FLOAT EQUIPMENT

ADVE @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

Thank You

CHARGE TO: Woodsey Oper.
 STREET _____
 CITY _____ STATE _____ ZIP _____

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 Allen F. Dick
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES [Crossed out]
 DISCOUNT [Crossed out] IF PAID IN 30 DAYS

ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING

[Faint stamp]

KANSAS CONSERVATION COMMISSION
 FEB 25 2010
 CONSERVATION DIVISION
 WICHITA KS

ALLIED CEMENTING CO., LLC. 042754

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

SERVICE POINT: Medicine Lodge

DATE <u>11-7-08</u>	SEC. <u>13</u>	TWP. <u>S4S</u>	RANGE <u>13W</u>	CALLED OUT <u>8:00pm</u>	ON LOCATION <u>9:30pm</u>	JOB START <u>8:30pm</u>	JOB FINISH <u>10:00pm</u>
LEASE <u>Cook B</u>		WELL # <u>1</u>		LOCATION <u>Hardtree 2nd cont. 8 s, w/into</u>		COUNTY <u>Barber</u>	STATE <u>KO.</u>
OLD OR NEW (Circle one)							

CONTRACTOR Beredco
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 5700'
 CASING SIZE 4 1/2 DEPTH 5285'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1750' MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 41'
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 8 1/2 BBs 2% KCl water

OWNER Woolsey Oper. Co.
 CEMENT
 AMOUNT ORDERED 755x604x4 + 14 #11 Seal
1100x1110 2 gals + 10% b5c 11-16 #Kcl Seal
1.8% H-1-60 + 14 #11 Seal Clap 10-9 gals.

EQUIPMENT
 PUMP TRUCK CEMENTER AT/Out C.
 # 360-265 HELPER Steve K.
 BULK TRUCK
 # 363-259 DRIVER Randy F.
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>45</u>	<u>A</u>	@ <u>15.45</u>	<u>695.25</u>
POZMIX	<u>30</u>		@ <u>8.00</u>	<u>240.00</u>
GEL	<u>3</u>		@ <u>20.80</u>	<u>62.40</u>
CHLORIDE			@ _____	_____
ASC			@ _____	_____
	<u>160</u>	<u>H</u>	@ <u>16.75</u>	<u>2680.00</u>
	<u>Flo Seal</u>	<u>59</u>	@ <u>2.50</u>	<u>147.50</u>
	<u>Gyp Seal</u>	<u>15</u>	@ <u>29.20</u>	<u>438.00</u>
	<u>FL-110</u>	<u>121</u>	@ <u>13.30</u>	<u>1609.30</u>
	<u>Kal Seal</u>	<u>960</u>	@ <u>1.89</u>	<u>854.40</u>
	<u>Clap Pro</u>	<u>8</u>	@ <u>36.25</u>	<u>250.00</u>
	<u>Salt</u>	<u>17</u>	@ <u>12.00</u>	<u>204.00</u>

REMARKS: Regulatory Compliance
 Dept. of Comp. Weighers
 State of Kansas Operations

HANDLING	<u>294</u>	@ <u>2.40</u>	<u>705.60</u>
MILEAGE	<u>30 X 294 X .10</u>		<u>882.00</u>
TOTAL			<u>8768.45</u>

*Ripe imbedation, Great City, plus test & raise
 w/ 25% mix 50% cap 40% mix 10%
 H-10 2 gals + 10% b5c 11-16 #Kcl Seal
 1.8% H-1-60 + 14 #11 Seal Clap 10-9 gals.
 Pump wash pump driver release
 Pump 4 1/2" Kcl flow over top 3 psi
 Rate. Pump plug flow over. Stated
 hold*

SERVICE

DEPTH OF JOB	<u>5285'</u>		
PUMP TRUCK CHARGE			<u>2295.00</u>
EXTRA FOOTAGE		@ _____	_____
MILEAGE	<u>30</u>	@ <u>7.00</u>	<u>210.00</u>
MANIFOLD		@ _____	_____
<u>Head Rental</u>		@ <u>113.00</u>	<u>113.00</u>
TOTAL			<u>2618.00</u>

CHARGE TO: Woolsey Oper. Co.
 STREET _____
 CITY _____ ZIP _____

RECEIVED
 STATE COMMISSION
 KANSAS CORPORATION
 FEB 25 2009

To Allied Cementing Co. CONSERVATION DIVISION
 WICHITA, KS 4/2
 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.

PLUG & FLOAT EQUIPMENT

<u>26 Scrubbers</u>	@ <u>68.00</u>	<u>1768.00</u>
<u>2- fuelizers</u>	@ <u>68.00</u>	<u>612.00</u>
<u>1-AFD float shoe</u>	@ <u>434.00</u>	<u>434.00</u>
<u>float Dam Assm</u>	@ <u>405.00</u>	<u>405.00</u>
TOTAL		<u>3219.00</u>

PRINTED NAME Allen F. Dick
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES [Crossed out]
 DISCOUNT [Crossed out] IF PAID IN 30 DAYS

ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING

KOC
 FEB 25 2009
 COMMISSION