

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 # 34477
Name: Alvin Row
Address 1: 8701 W. 90th
Address 2: _____
City: Overland Park State: KS Zip: 66212 + _____
Contact Person: Alvin Row
Phone: (913) 492-9150
CONTRACTOR: License # 33715
Name: Town Oilfield Service, Inc.
Wellsite Geologist: _____
Purchaser: Pacer

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 #: _____

<u>12/1/2010</u>	<u>12/3/2010</u>	<u>1/15/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 103-21309-00-00

Spot Description: _____
SW SE NW SW Sec. 13 Twp. 12 S. R. 20 East West

1,485 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: Leavenworth

Lease Name: Cox Well #: 2

Field Name: Six Corners

Producing Formation: Squirrel

Elevation: Ground: 910 Kelly Bushing: NA

Total Depth: 858 Plug Back Total Depth: 14

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 40
feet depth to: surface w/ 6 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1500-3000 ppm Fluid volume: 80 bbls

Dewatering method used: on lease

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: Alvin Row

Title: Operator Date: 3/16/11

KCC Office Use ONLY

RECEIVED

- Letter of Confidentiality Received Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Dg Date: 3/22/11

MAR 18 2011

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Operator Name: Alvin Row Lease Name: Cox Well #: 2
 Sec. 13 Twp. 12 S. R. 20 East West County: Leavenworth

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 checked="" type="checkbox"/> Yes <input 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: Gamma Ray/Neutron/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input 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	9	6 1/4"		40	Portland	6	
Completion	5 5/8	2 7/8"		844	Portland	135	50/50 POZ

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	775.0-783.0 25 Perfs	775.0-783.0	

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: <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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	RECEIVED PRODUCTION INTERVAL MAR 18 2011
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KCC WICHITA



CONSOLIDATED
OIL FIELD SERVICES, LLC

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8878

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 27265
LOCATION Ottawa
FOREMAN Alan Mader

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
12-3-10	7047	Cox #3	54/13	12	20	6V	
CUSTOMER <u>Rowland Development</u>			TRUCK #	DRIVER	TRUCK #	DRIVER	
MAILING ADDRESS <u>8701 W 90th St</u>			<u>516</u>	<u>Alan M</u>	<u>Sally</u>	<u>Meeting</u>	
CITY <u>Overland Park</u>			<u>368</u>	<u>Ken H</u>	<u>KH</u>		
STATE <u>Ks</u>			<u>369</u>	<u>Cecil P</u>	<u>CP</u>		
ZIP CODE <u>66212</u>			<u>516</u>	<u>Tim W</u>	<u>TW</u>		
JOB TYPE	<u>long string</u>	HOLE SIZE	<u>5 5/8</u>	HOLE DEPTH	<u>858</u>	CASING SIZE & WEIGHT	<u>2 1/2</u>
CASING DEPTH	<u>844</u>	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	<u>yes</u>
DISPLACEMENT	<u>4.9</u>	DISPLACEMENT PSI	<u>800</u>	MIX PSI	<u>200</u>	RATE	<u>4 bps</u>
REMARKS: <u>Held crew meeting. Established rate. Mixed & pumped 139 sk 50/50 p02, 2 bags 1/2 # here-seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float valve.</u>							

105 Drilling

Alan Mader

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	45	MILEAGE		164.25
5402	844	casing footage		
5407A	262.71	for miles		315.25
5502C	2 1/2	800 val		250.00
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1107A	70 #	Pheno seal		80.50
1118B	334 #	gel	MAR 18 2011	68.80
1124	1353K	50/50 p02		1328.40
4402	1	2 1/2 plug	KCC WICHITA	23.00
				3202.61
less 2%				65.25
				3137.36
				K0# 238433
SALES TAX				169.41
ESTIMATED TOTAL				3264.61

Form 3737

AUTHORIZATION No Company Rep TITLE Jim OK'd DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the invoice 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.

Leavenworth County, KS
 Well: Cox #2
 Lease Owner: Rowland

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 12/1/2010

WELL LOG

Thickness of Strata	Formation	Total Depth
0-18	Dirt/Clay	18
12	Lime	30
123	Shale/Shells	153
24	Lime	177
15	Shale	192
18	Lime	210
35	Shale	245-Some Red Bed
21	Lime	266
4	Shale	270
26	Lime	296
32	Shale	628
4	Lime	332
2	Shale	334-Dark
3	Lime	337
15	Shale	352
12	Lime	364
14	Shale	378
30	Lime	408
9	Shale	417
14	Lime	431
8	Shale	439
22	Lime	461
5	Shale	466
2	Lime	468
5	Shale	473
9	Lime	482-Hertha
5	Shale	487
26	Sandy Shale	513-No Odor
13	Shale	526
24	Sandy Shale	550-No Odor
184	Shale/Shells	736
12	Sandy Shale	748
2	Sandy Shale	750-Oil, Little Bleed, 10%
3	Sandy Shale	753-No Oil
9	Sandy Shale	762
12	Sandy Shale	774-No Oil
8	Sand	782-50% Oil
23	Sandy Shale	805
23	Sandy Shale	828-Dead Oil
30	Shale	858-TD

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Core # 2

728	
730	
732	Light Grey
734	5% Oil Tops
736	
738	
740	
742	
744	
746	
748	
750	
752	
754	
756	Dark Grey
758	15% Oil
760	
762	
764	
766	Dark Grey
768	50% Oil
770	Dar
772	30% Oil
774	
776	
778	
780	

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MAR 18 2011
KCC WICHITA



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 # 238433

Invoice Date: 12/08/2010 Terms:

Page 1

ROWLAND DEVELOPMENT
8701 WEST 90TH ST
OVERLAND PARK KS 66212
() -

COX 2
27265
SW 13-12-20 LV
12/03/2010
KS

Part Number	Description	Qty	Unit Price	Total
1107A	PHENOSEAL (M) 40# BAG)	70.00	1.1500	80.50
1118B	PREMIUM GEL / BENTONITE	334.00	.2000	66.80
1124	50/50 POZ CEMENT MIX	135.00	9.8400	1328.40
4402	2 1/2" RUBBER PLUG	1.00	23.0000	23.00

Description	Hours	Unit Price	Total
368 CEMENT PUMP	1.00	925.00	925.00
368 EQUIPMENT MILEAGE (ONE WAY)	45.00	3.65	164.25
368 CASING FOOTAGE	844.00	.00	.00
369 80 BBL VACUUM TRUCK (CEMENT)	2.50	100.00	250.00
510 TON MILEAGE DELIVERY	262.71	1.20	315.25

*Ad CK#110
Thank you
Suzanne
AK*

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MAR 18 2011
KCC WICHITA

Parts:	1498.70	Freight:	.00	Tax:	109.41	AR	3262.61
Labor:	.00	Misc:	.00	Total:	3262.61		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed

Date

BARTLEWILLE, OK 918/338-0808 S.DORADO, KS 316/322-7022 EUREKA, KS 620/583-7864 GILLETTE, WY 307/686-4914 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4000 WICHITA, KS WOLAND, WY 307/677-1222