

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 # 33335
Name: IA Operating, Inc
Address 1: 9915 W 21st Street, Ste B
Address 2: _____
City: Wichita State: KS Zip: 67205 + _____
Contact Person: Robert Swann
Phone: (316) 721-0036
CONTRACTOR: License # 34233
Name: Maverick Drilling, LLC
Wellsite Geologist: Randall Kilian
Purchaser: None

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 #: _____

1/17/11	1/23/11	1/23/11
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-26081-00-00
Spot Description: _____
SE_NW_SE Sec. 8 Twp. 14 S. R. 20 East West
1,400 Feet from North / South Line of Section
1,835 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Henman Well #: 8-1
Field Name: Wildcat
Producing Formation: None
Elevation: Ground: 2175' Kelly Bushing: 2183'
Total Depth: 3915' Plug Back Total Depth: 3915'
Amount of Surface Pipe Set and Cemented at: 223' 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: 32,000 ppm Fluid volume: 1100 bbls
Dewatering method used: Evaporation, then 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: Robert Swann
Title: Vice President Date: 3-9-2011

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: RHA Date: 3/16/11

RECEIVED
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Operator Name: IA Operating, Inc Lease Name: Henman Well #: 8-1
 Sec. 8 Twp. 14 S. R. 20 East West County: Ellis

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: Geologist's Well Report, Mico Log, Compensated Density/Neutron Log, Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>1482'</td> <td>+701</td> </tr> <tr> <td>Topeka</td> <td>3191'</td> <td>-1008</td> </tr> <tr> <td>Heebner Shale</td> <td>3432'</td> <td>-1249</td> </tr> <tr> <td>Toronto</td> <td>3451'</td> <td>-1268</td> </tr> <tr> <td>Lansing</td> <td>3470'</td> <td>-1287</td> </tr> <tr> <td>Total Depth</td> <td>3915'</td> <td>-1732</td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	1482'	+701	Topeka	3191'	-1008	Heebner Shale	3432'	-1249	Toronto	3451'	-1268	Lansing	3470'	-1287	Total Depth	3915'	-1732
Name	Top	Datum																				
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Lansing	3470'	-1287																				
Total Depth	3915'	-1732																				

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"	23#	223'	Common	160	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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		60/40 Poz	220	4%gel, 1/4 # flo-seal

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	RECEIVED MAR 14 2011
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. <u>0</u>	Gas Mcf <u>0</u>
	Water Bbls. <u>0</u>	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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 035545

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

SERVICE POINT: Dakley, KS

DATE <u>1/17/11</u>	SEC. <u>8</u>	TWP. <u>14</u>	RANGE <u>20</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00</u>	JOB FINISH <u>2:15</u>
LEASE <u>Herron</u>	WELL # <u>1-8</u>	LOCATION <u>Ellis S To Springfield Rd</u>				COUNTY <u>Ellis</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one)		<u>1/2 W N = E 10</u>					

CONTRACTOR Marrick

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 5/8 DEPTH 223

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13.2496

OWNER Same

CEMENT

AMOUNT ORDERED 160 SKs Con 370cc 290gal

COMMON	<u>160</u>	@	<u>13.50</u>	<u>2160.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.00</u>	<u>60.00</u>
CHLORIDE	<u>6</u>	@	<u>51.50</u>	<u>309.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>169</u>	@	<u>2.25</u>	<u>380.25</u>
MILEAGE	<u>10 @ 5K/mile</u>			<u>338.00</u>
TOTAL				<u>3248.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Alan

422 HELPER Wynal

BULK TRUCK

391 DRIVER Jerry

BULK TRUCK

DRIVER

REMARKS:

Ran 8 5/8 Cas, Circulate,

Mix 160 SKs Con 370cc 290gal

Displace w/ 13.2496 BBL H₂O

Cement Dsd Circulate

Frank En

Alan - Wynal,

Jerry

CHARGE TO: I.A. Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<u>223</u>		
PUMP TRUCK CHARGE	<u>99.00</u>		
EXTRA FOOTAGE		@	
MILEAGE	<u>20 miles</u>	@	<u>7.00</u>
MANIFOLD		@	
		@	
		@	
TOTAL			<u>1131.00</u>

PLUG & FLOAT EQUIPMENT

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TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

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 Bill Skeen

SIGNATURE Bill Skeen

ALLIED CEMENTING CO., LLC. 034127

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

COPY

SERVICE POINT:

Russell

DATE <u>1-23-11</u>	SEC. <u>8</u>	TWP. <u>14 S</u>	RANGE <u>20 W</u>	CALLED OUT	ON LOCATION	JOB START <u>7:30 A.M.</u>	JOB FINISH <u>4:30 A.M.</u>
LEASE <u>Henman</u>	WELL # <u>8-1</u>	LOCATION <u>Ellis South to Springhill Rd</u>			COUNTY <u>Ellis</u>	STATE <u>Ks.</u>	
<u>OLD</u> OR NEW (Circle one)		<u>1/2 W Ninto</u>					

CONTRACTOR Maugerick Drilling 108

TYPE OF JOB PTH

HOLE SIZE 7 7/8 T.D. 3915

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 7 1/2 DEPTH 1500'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT

AMOUNT ORDERED 220 6 3/4 49.6cl 1/4 476

COMMON	<u>132</u>	@	<u>13.50</u>	<u>1782.00</u>
POZMIX	<u>88</u>	@	<u>7.55</u>	<u>664.40</u>
GEL	<u>7</u>	@	<u>20.25</u>	<u>141.75</u>
CHLORIDE	_____	@	_____	_____
ASC	_____	@	_____	_____

EQUIPMENT

PUMP TRUCK CEMENTER Shane Hawk

417 HELPER Todd

BULK TRUCK _____

427-187 DRIVER Mike

BULK TRUCK _____

_____ DRIVER _____

<u>Flo Seal</u>	<u>55</u>	@	<u>2.45</u>	<u>134.75</u>
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
HANDLING	<u>220</u>	@	<u>2.25</u>	<u>495.00</u>
MILEAGE	<u>10/sk/mile</u>	_____	_____	<u>660.00</u>

REMARKS:

RECEIVED

TOTAL 3877.90

1500' 25 sks
725' 100 sks
270' 40 sks
40' 10 sks

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KCC WICHITA

SERVICE

DEPTH OF JOB	_____	_____	_____	_____
PUMP TRUCK CHARGE	_____	_____	_____	<u>990.00</u>
EXTRA FOOTAGE	_____	@	_____	_____
MILEAGE	<u>30</u>	@	<u>7.00</u>	<u>210.00</u>
MANIFOLD	_____	@	_____	_____
_____	_____	@	_____	_____

TOTAL 1200.00

CHARGE TO: IA Operating

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>Dry Hole Plug</u>	_____	@	_____	_____
_____	_____	@	_____	<u>N-C</u>
_____	_____	@	_____	_____
_____	_____	@	_____	_____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

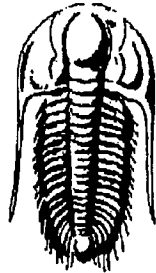
DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Orlan Eukie

SIGNATURE [Signature]

Thanks!

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.



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **IA Operating, Inc**

9915 W. 21st. N STE B
Wichita, KS. 67205

ATTN: Randy Kilian

8-14s-20w Ellis KS

Henman #8-1

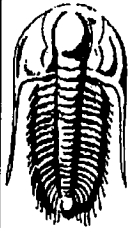
Start Date: 2011.01.21 @ 02:28:55

End Date: 2011.01.21 @ 08:44:40

Job Ticket #: 41292 DST #: 1

Trilobite Testing, Inc
PO Box 1733 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

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KCC WICHITA



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

IA Operating, Inc
9915 W. 21st. N STE B
Wichita, KS. 67205
ATTN: Randy Kilian

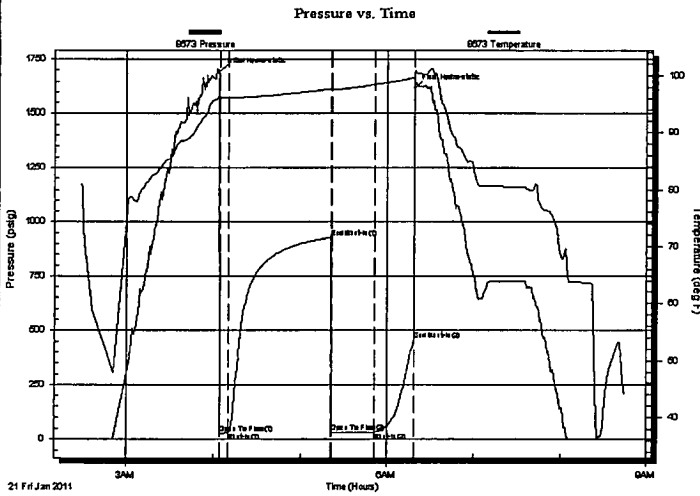
Henman #8-1
8-14s-20w Ellis KS
Job Ticket: 41292 DST#: 1
Test Start: 2011.01.21 @ 02:28:55

GENERAL INFORMATION:

Formation: **LKC-A-C**
Deviated: No Whipstock: ft (KB)
Time Tool Opened: 04:03:40
Time Test Ended: 08:44:40
Interval: **3462.00 ft (KB) To 3514.00 ft (KB) (TVD)**
Total Depth: **3514.00 ft (KB) (TVD)**
Hole Diameter: 7.80 inches Hole Condition: Good
Test Type: Conventional Bottom Hole
Tester: Jason McLemore
Unit No: 54
Reference Elevations: 2183.00 ft (KB)
2175.00 ft (CF)
KB to GR/CF: 8.00 ft

Serial #: 8673 Inside
Press@RunDepth: 32.33 psig @ 3498.00 ft (KB) Capacity: 8000.00 psig
Start Date: 2011.01.21 End Date: 2011.01.21 Last Calib.: 2011.01.21
Start Time: 02:28:57 End Time: 08:44:40 Time On Btm: 2011.01.21 @ 04:03:25
Time Off Btm: 2011.01.21 @ 06:18:40

TEST COMMENT: IFP-Weak, 1"
IS-Dead
FFP-Dead
FSI-Dead



PRESSURE SUMMARY

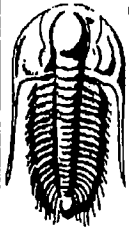
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1693.68	96.37	Initial Hydro-static
1	28.42	95.78	Open To Flow (1)
7	31.83	96.09	Shut-In (1)
78	927.64	97.72	End Shut-In (1)
78	30.47	97.27	Open To Flow (2)
108	32.33	98.51	Shut-In (2)
135	455.24	99.64	End Shut-In (2)
136	1619.62	100.39	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
6.00	Mud W/Oil Spots	0.08

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

TOOL DIAGRAM

IA Operating, Inc
9915 W. 21st. N STE B
Wichita, KS. 67205
ATTN: Randy Kilian

Henman #8-1
8-14s-20w Ellis KS
Job Ticket: 41292 DST#: 1
Test Start: 2011.01.21 @ 02:28:55

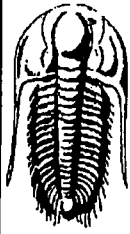
Tool Information

Drill Pipe:	Length: 3460.00 ft	Diameter: 3.80 inches	Volume: 48.53 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 0.00 ft	Diameter: 2.25 inches	Volume: 0.00 bbl	Weight to Pull Loose: 55000.00 lb
			<u>Total Volume: 48.53 bbl</u>	Tool Chased 0.00 ft
Drill Pipe Above KB:	19.00 ft			String Weight: Initial 50000.00 lb
Depth to Top Packer:	3462.00 ft			Final 50000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	52.00 ft			
Tool Length:	73.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
Change Over Sub	1.00			3442.00	
Shut In Tool	5.00			3447.00	
Hydraulic tool	5.00			3452.00	
Packer	5.00			3457.00	21.00 Bottom Of Top Packer
Packer	5.00			3462.00	
Stubb	1.00			3463.00	
Perforations	2.00			3465.00	
Change Over Sub	1.00			3466.00	
Blank Spacing	31.00			3497.00	
Change Over Sub	1.00			3498.00	
Recorder	0.00	8673	Inside	3498.00	
Recorder	0.00	6755	Outside	3498.00	
Perforations	13.00			3511.00	
Bullnose	3.00			3514.00	52.00 Bottom Packers & Anchor

Total Tool Length: 73.00



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

IA Operating, Inc
9915 W. 21St. N STE B
Wichita, KS. 67205
ATTN: Randy Kilian

Henman #8-1
8-14s-20w Ellis KS
Job Ticket: 41292 DST#: 1
Test Start: 2011.01.21 @ 02:28:55

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	ppm
Viscosity: 48.00 sec/qt	Cushion Volume: bbl		
Water Loss: 7.19 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 1200.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
6.00	Mud W/Oil Spots	0.084

Total Length: 6.00 ft Total Volume: 0.084 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments:

