

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 # 34158
Name: O'Brien Resources, LLC
Address 1: P.O. Box 6149
Address 2: _____
City: Shreveport State: LA Zip: 71136 + 6149
Contact Person: Steve Harris
Phone: (318) 865-8568
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Josh Austin
Purchaser: Plains Marketing, LP

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: O'Brien Resources, LLC
Well Name: Boomhower 36-1

Original Comp. Date: 3/19/2009 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 #: _____

1/19/2009	1/30/2009	1/29/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 101-22151-0001

Spot Description: _____

SE SW NE NW Sec. 36 Twp. 17 S. R. 29 East West

1,310 Feet from North / South Line of Section

1,850 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Lane

Lease Name: Boomhower Well #: 36-1

Field Name: Wildcat

Producing Formation: Lansing

Elevation: Ground: 2784 Kelly Bushing: 2789

Total Depth: 4650 Plug Back Total Depth: 4620

Amount of Surface Pipe Set and Cemented at: 216 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2175 Feet

If Alternate II completion, cement circulated from: 2175

feet depth to: Surface w/ 450 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 2000 ppm Fluid volume: 240 bbls

Dewatering method used: Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: N/A

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: Heather Haynes

Title: Operations Assistant Date: 3/10/2011

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____ RECEIVED

Confidential Release Date: _____

MAR 16 2011

Wireline Log Received

Geologist Report Received

KCC WICHITA

UIC Distribution

ALT I II III Approved by: Dlg Date: 3/17/11

Operator Name: O'Brien Resources, LLC Lease Name: Boomhower Well #: 36-1
 Sec. 36 Twp. 17 S. R. 29 East West County: Lane

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 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: Sonic Log Micro Log Dual Induction Log Compensated Density/Neutron PE 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>Anhydrite</td> <td>2164</td> <td>+625</td> </tr> <tr> <td>Wabaunsee</td> <td>3450</td> <td>-751</td> </tr> <tr> <td>Lansing</td> <td>3971</td> <td>-1182</td> </tr> <tr> <td>Cherokee Sh.</td> <td>4508</td> <td>-1719</td> </tr> <tr> <td>Miss.</td> <td>4584</td> <td>-1795</td> </tr> </table>	Name	Top	Datum	Anhydrite	2164	+625	Wabaunsee	3450	-751	Lansing	3971	-1182	Cherokee Sh.	4508	-1719	Miss.	4584	-1795
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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	12-1/4	8-5/8	24	216	Common	160 Sx.	3% cc, 2% gel
Production	7-7/8	5-1/2	15.5	4,650	ASC	175 Sx.	10% Salt, 2% gel
					60/40	450 Sx.	4% gel, 1/4 flo seal

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
4	4,546' - 4,548'	500 gal of 15% MCA w/ 2% MS	
4	4,553' - 4,556'		
4	4,208' - 4,211'	500 gal of 15% MCA	

TUBING RECORD: Size: <u>2-7/8</u> Set At: <u>4,528'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>1/29/2011</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>17</u>	Gas Mcf <u>N/A</u>
	Water Bbls. <u>132</u>	Gas-Oil Ratio <u>N/A</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 checked="" 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: <u>Lansing</u>
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RECEIVED
MAR 16 2011

KCC WICHITA