



KANSAS CORPORATION COMMISSION 1053426
OIL & GAS CONSERVATION DIVISION

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 # 5399
Name: American Energies Corporation
Address 1: 155 N MARKET STE 710
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 1821
Contact Person: Alan L. DeGood, President
Phone: (316) 263-5785
CONTRACTOR: License # 5123
Name: Pickrell Drilling Company, Inc.
Wellsite Geologist: David Barker
Purchaser: American Energies Pipeline, LLC

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 #: _____
01/26/2011 02/03/2011 02/17/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-151-22364-00-00
Spot Description: SE NW SW
SE NW SW Sec. 30 Twp. 29 S. R. 11 East West
1,650 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pratt
Lease Name: McGuire Well #: 2-30
Field Name: _____
Producing Formation: Indian Cave, Severy Sand
Elevation: Ground: 1860 Kelly Bushing: 1870
Total Depth: 3934 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 264 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: 75000 ppm Fluid volume: 1000 bbls
Dewatering method used: Evaporated
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

Submitted Electronically

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: Deanna Garrison Date: 04/11/2011



1053426

Operator Name: American Energies Corporation Lease Name: McGuire Well #: 2-30
 Sec. 30 Twp. 29 S. R. 11 East West County: Pratt

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name Attached	Top Attached	Datum Attached
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Submitted Electronically (If no, Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E. Logs Run: Gamma Ray Neutron Bond Gamma Ray Neutron Bond				

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	12.25	8.6250	23	264	60/40 poz	225	2% gel
Production	7.875	4.5	10.5	3061	Class A	100	5# KC/sx, 5% FL

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
— Perforate				
— Protect Casing	-			
— Plug Back TD				
— 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			2790- 2796
		15% FE Acid	2790-2796

TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>2780'</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>03/21/2011</u>	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbbs. <u>0</u>	Gas Mcf <u>60</u>	Water Bbbs. <u>0</u>	Gas-Oil Ratio <u>100</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	American Energies Corporation
Well Name	McGuire 2-30
Doc ID	1053426

Tops

Chase	2002	-132
Onaga Shale	2782	-912
Indian Cave	N/A	
Wabaunsee	2829	-959
Stotler Lime	2977	-1107
Howard	3222	-1352
Topeka	3378	-1508
Heebner	3732	-1862

ALLIED CEMENTING CO., LLC. 040642

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

SERVICE POINT:
McBride

DATE <i>1-27-11</i>	SEC <i>30</i>	TWP <i>24S</i>	RANGE <i>11W</i>	CALLED OUT	ON LOCATION	JOB START <i>3:30 am</i>	JOB FINISH <i>4:00 am</i>
LEASE <i>McBride</i>		WELL # <i>2-30</i>	LOCATION <i>6 miles E of Sanger on 42</i>		COUNTY <i>Pratt</i>	STATE <i>KS</i>	
OLD OR <input checked="" type="checkbox"/> NEW (Circle one)			<i>1/2 S E into</i>				

CONTRACTOR *Parker* OWNER *American Energies*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *268'*

CASING SIZE *8 5/8* DEPTH *252'*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *1400 psi* MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. *20'*

PERFS.

DISPLACEMENT *15 1/2 bbls H₂O*

EQUIPMENT

PUMP TRUCK CEMENTER *Mark Thomas*

441202 HELPER *Jason Thomas*

BULK TRUCK

364 DRIVER *David Felro*

BULK TRUCK

DRIVER

CEMENT

AMOUNT ORDERED *225 sk 60:40 + 2% adm + 3% cc*

COMMON *135 sk @ 15 4/8 2085 75*

POZMIX *90 sk @ 8 00 720 00*

GEL *4 sk @ 20 00 80 00*

CHLORIDE *7 sk @ 58 00 407 00*

ASC @

@

@

@

@

HANDLING *236 @ 2 40 566 40*

MILEAGE *236 / 10 / 25 590 00*

TOTAL *4452 75*

REMARKS:

Back circulation with Pig.

run 3 bbls H₂O ahead

mix 225 sk cement. Shot down. Release Plug

displ 15 1/2 bbls H₂O. SHUT IN.

cement did circulate

CHARGE TO: *American Energies*

STREET

CITY STATE ZIP

TOTAL *1193 00*

PLUG & FLOAT EQUIPMENT

8 5/8

1-wooden Plug @ 68 00

@

@

@

TOTAL *68 00*

SALES TAX (If Any)

TOTAL CHARGES *1193 00*

DISCOUNT *00* IF PAID IN 30 DAYS

PRINTED NAME *Mike Kern*

SIGNATURE *Mike Kern*

ALLIED CEMENTING CO., LLC. 040623

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

SERVICE POINT:

DATE <u>2-4-2011</u>	SEC <u>30</u>	TWP <u>29S</u>	RANGE <u>11W</u>	CALLED OUT <u>5:00pm</u>	ON LOCATION <u>7:00pm</u>	JOB START <u>1:15</u>	JOB FINISH <u>2:45 AM</u>
McGuire LEASE		WELL # <u>2-30</u>	LOCATION <u>Snyder, KS Gess</u>		COUNTY <u>Pratt</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>1/2 Sarn, East, into</u>				

CONTRACTOR Pickersill #1

TYPE OF JOB Production

HOLE SIZE 7 7/8 I.D. 3934'

CASING SIZE 4 1/2 DEPTH 3061'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 471 bbls of Freshwater

EQUIPMENT

PUMP TRUCK CEMENTER Delio E

360-265 HELPER Jason T

BULK TRUCK

364 DRIVER msjt T.

BULK TRUCK

_____ DRIVER _____

OWNER American Energies

CEMENT

AMOUNT ORDERED 505 @ 60' 40' 40' 60'

1505 @ Class A ASC FSA Kelsco

.5% FL 160 2 1/2 SSLS ASF

COMMON <u>A</u>	<u>30 SK</u>	@ <u>15⁴⁵</u>	<u>463³⁰</u>
POZMIX	<u>20 SK</u>	@ <u>8⁰⁰</u>	<u>160⁰⁰</u>
GEL	<u>2 SK</u>	@ <u>20⁰⁰</u>	<u>41⁰⁰</u>
CHLORIDE		@	
ASC	<u>150 SK</u>	@ <u>18⁰⁰</u>	<u>2790⁰⁰</u>
	<u>Kolsal 750⁰⁰</u>	@ <u>-89⁰⁰</u>	<u>667⁰⁰</u>
	<u>FL-160 70.5⁰⁰</u>	@ <u>13⁰⁰</u>	<u>937⁰⁰</u>
	<u>WFR-2 500 Gals</u>	@ <u>1.23⁰⁰</u>	<u>635⁰⁰</u>
		@	
		@	
		@	
		@	
HANDLING	<u>246</u>	@ <u>2⁴⁰</u>	<u>590⁴⁰</u>
MILEAGE	<u>246/10/20</u>		<u>492⁰⁰</u>
			TOTAL <u>6777⁰⁰</u>

REMARKS:

Pipe on bottom & brosk circulation
pump 3 bbls water, 200 SSLS ASF 3 bbls
water, mix water for pipe maintenance
mix 1505 of cement, shut down, wash
pump & lines, Release plug, Start displacement
Life pressure @ 25' bbls, Slow rate to
3 bpm @ 40' bbls, bump plus @ 47 1/2
bbls 700-1400 PSI, float did hold

SERVICE

DEPTH OF JOB 3061'

PUMP TRUCK CHARGE 2011⁰⁰

EXTRA FOOTAGE @ _____

MILEAGE 20 @ 7⁰⁰ 140⁰⁰

MANIFOLD @ _____

Hesarenal @ _____

TOTAL 2151⁰⁰

CHARGE TO: American Energies

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

4 1/2

<u>1- Picker shoe</u>	@	<u>931⁰⁰</u>
<u>1- Jason Down plug</u>	@	<u>144⁰⁰</u>
<u>1- Basket</u>	@	<u>147⁰⁰</u>
<u>4- Centralizers</u>	@ <u>37⁰⁰</u>	<u>151⁰⁰</u>
	@	

TOTAL 1373⁰⁰

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.

SALES TAX (If Any) _____

TOTAL CHARGES 2011

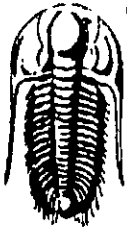
DISCOUNT 0 IF PAID IN 30 DAYS

PRINTED NAME x Thed Star

SIGNATURE x Thed Star

FEB 10 2011

Thank you!!!



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

American Energies
155 N Market STE710
Wichita Ks, 67202
ATTN: Dave

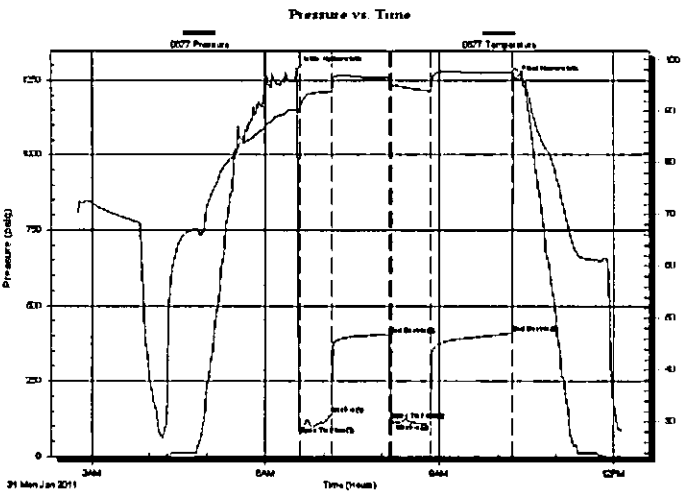
McGuire #2-30
30/29s11w
Job Ticket: 39381 **DST#: 1**
Test Start: 2011.01.31 @ 02:45:30

GENERAL INFORMATION:

Formation: **Indian Cave**
Deviated: **No Whipstock:** ft (KB)
Time Tool Opened: 06:35:15
Time Test Ended: 12:09:45
Interval: **2760.00 ft (KB) To 2815.00 ft (KB) (TVD)**
Total Depth: **2815.00 ft (KB) (TVD)**
Hole Diameter: **7.78 inches** Hole Condition: **Good**
Test Type: **Conventional Bottom Hole**
Tester: **Mike Slemp**
Unit No: **53**
Reference Elevations: **1876.00 ft (KB)**
1866.00 ft (CF)
KB to GR/CF: **10.00 ft**

Serial #: 8677 **Inside**
Press@RunDepth: **110.58 psig @ 2762.00 ft (KB)** Capacity: **8000.00 psig**
Start Date: **2011.01.31** End Date: **2011.01.31** Last Calib.: **2011.01.31**
Start Time: **02:45:31** End Time: **12:09:45** Time On Btm: **2011.01.31 @ 06:32:45**
Time Off Btm: **2011.01.31 @ 10:17:45**

TEST COMMENT: IF- BOB in 1 min, GTS in 10 min
IS- No blow back
FF- BOB ASAO, GTS ASAO
FS- No blow back



PRESSURE SUMMARY

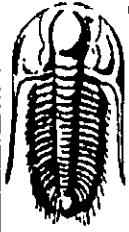
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1285.05	90.58	Initial Hydro-static
3	73.26	90.76	Open To Flow (1)
35	139.57	93.73	Shut-In(1)
95	404.29	96.49	End Shut-In(1)
98	121.27	95.15	Open To Flow (2)
138	110.58	94.01	Shut-In(2)
223	410.31	97.53	End Shut-In(2)
225	1252.11	98.26	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
90.00	100% mud	1.26

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	0.25	30.00	70.44
Last Gas Rate	0.25	45.00	94.23
Max. Gas Rate	0.25	45.00	94.23



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

American Energies
155 N Market STE710
Wichita Ks, 67202
ATTN: Dave

McGuire #2-30
30/29s11w
Job Ticket: 39381 **DST#: 1**
Test Start: 2011.01.31 @ 02:45:30

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: 49.00 sec/qt	Cushion Volume: bbl		
Water Loss: 9.98 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 2000.00 ppm			
Filter Cake: inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
90.00	100% mud	1.262

Total Length: 90.00 ft Total Volume: 1.262 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

