

CONFIDENTIAL

ORIGINAL

3/03/09

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5004

Name: Vincent Oil Corporation

Address 1: 155 N. Market, Ste 700

Address 2: _____

City: Wichita State: Kansas Zip: 67202 + 1821

Contact Person: M.L. Korphage

Phone: (316) 262-3573

CONTRACTOR: License # 34190

Name: Vision Oil & Gas Services LLC

Wellsite Geologist: Jim Hall

Purchaser: M V Purchasing LLC

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SIOW

Gas ENHR SIGW

CM (Coal Bed Methane) Temp. Abd.

Dry Other _____

(Core, WSW, Expl., Cathodic, 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

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

11-09-2008 11-20-2008 2-27-2009

Spud Date or
Recompletion Date

Date Reached TD

Completion Date or
Recompletion Date

API No. 15 - 151-22317-00-00

Spot Description: W/2-SW-SW

W/2 SW SW Sec. 33 Twp. 28 S. R. 15 East West

660 Feet from North / South Line of Section

330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Pratt

Lease Name: Schuster Well #: 1-33

Field Name: Wildcat

Producing Formation: Mississippian

Elevation: Ground: 2030 Kelly Bushing: 2037

Total Depth: 4795 Plug Back Total Depth: 4792

Amount of Surface Pipe Set and Cemented at: 372 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/ _____

ALF-1-Dg-4/17/09 ^{sx cmt}

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 31,000 ppm Fluid volume: 1200 bbls

Dewatering method used: Allow to dry by evaporation, backfill, and level.

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

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: M.L. Korphage

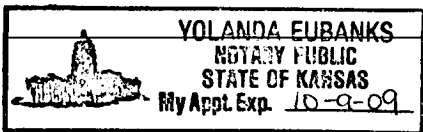
Title: Geologist Date: 3-3-2009

Subscribed and sworn to before me this 3rd day of March

20 09

Notary Public: Yolanda Eubanks

Date Commission Expires:



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

KANSAS CORPORATION COMMISSION

MAR 04 2009

RECEIVED

JAN 10 1969

Operator Name: Vincent Oil Corporation Lease Name: Schuster Well #: 1-33
 Sec. 33 Twp. 28 S. R. 15 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 copy of all Electric Wireline 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 <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction, Density / Neutron, Micro-log, Sonic, & Cement Bond 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>Heebner Shale</td> <td>3917</td> <td>(-3917)</td> </tr> <tr> <td>Brown Lime</td> <td>4076</td> <td>(-2039)</td> </tr> <tr> <td>Lansing</td> <td>4091</td> <td>(-2054)</td> </tr> <tr> <td>Cherokee Shale</td> <td>4576</td> <td>(-2539)</td> </tr> <tr> <td>Mississippian</td> <td>4584</td> <td>(-2547)</td> </tr> <tr> <td>Viola</td> <td>4758</td> <td>(-2721)</td> </tr> <tr> <td>LTD</td> <td>4794</td> <td>(-2757)</td> </tr> </table> | Name | Top | Datum | Heebner Shale | 3917 | (-3917) | Brown Lime | 4076 | (-2039) | Lansing | 4091 | (-2054) | Cherokee Shale | 4576 | (-2539) | Mississippian | 4584 | (-2547) | Viola | 4758 | (-2721) | LTD | 4794 | (-2757) |
| Name | Top | Datum | | | | | | | | | | | | | | | | | | | | | | | |
| Heebner Shale | 3917 | (-3917) | | | | | | | | | | | | | | | | | | | | | | | |
| Brown Lime | 4076 | (-2039) | | | | | | | | | | | | | | | | | | | | | | | |
| Lansing | 4091 | (-2054) | | | | | | | | | | | | | | | | | | | | | | | |
| Cherokee Shale | 4576 | (-2539) | | | | | | | | | | | | | | | | | | | | | | | |
| Mississippian | 4584 | (-2547) | | | | | | | | | | | | | | | | | | | | | | | |
| Viola | 4758 | (-2721) | | | | | | | | | | | | | | | | | | | | | | | |
| LTD | 4794 | (-2757) | | | | | | | | | | | | | | | | | | | | | | | |

| 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 Casing | 12 1/4" | 8 5/8" | 23# | 372' | 60-40 Poz | 375 Sx | 2% Gel, 3% CC |
| Production Casing | 7 7/8" | 5 1/2" | 14# | 4792' | ASC | 175 Sx | 5# Kol-seal / sx |

| 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 <i>(Amount and Kind of Material Used)</i> | Depth |
|-----------------|---|--|------------------|
| 30 Holes | Perforated 30 holes from 4584-4596, A/1500 gal 10% MIRA. Swabbed | down w/ show of oil, swb 3.5 bbl/hr (15% oil & show of gas). | 4584-4596 |
| | Treated perms with 12 tank slickwater frac., flowed and swabbed fluid | till free of frac sand, fluid carried good show of oil, SICP 20#. | |
| | fluid at 1100 ft. from surface, ran tubing, rods & downhole pump, set | pumping unit and pumped fluid to frac tank, initial average | |
| | rate gaged at 32 BOPD & 178 BW, total frac load not yet recovered. | | |

| | | | | |
|----------------|---------------------|------------------------|------------------------|--|
| TUBING RECORD: | Size: <u>2 7/8"</u> | Set At: <u>4542 ft</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>2-27-2009</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>32</u> | Gas Mcf | Water Bbls. <u>178</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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: <u>Mississippian 4584 - 4596</u> |
|---|---|--|

ALLIED CEMENTING CO., LLC. 32600

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

SERVICE POINT:
Medicine Lodge, ks

| | | | | | | | |
|--|----------------|--------------------|------------------|---|-----------------------------|--------------------------|---------------------------|
| DATE <u>11-21-08</u> | SEC. <u>33</u> | TWP. <u>28S</u> | RANGE <u>15W</u> | CALLED OUT <u>9:00 AM</u> | ON LOCATION <u>11:30 AM</u> | JOB START <u>3:00 PM</u> | JOB FINISH <u>4:00 PM</u> |
| LEASE <u>Schuster</u> | | WELL # <u>1-33</u> | | LOCATION <u>Collison KS, 4 1/2 W, 4 1/2 S</u> | | COUNTY <u>Prest</u> | STATE <u>KS</u> |
| OLD OR <input checked="" type="radio"/> NEW (Circle one) | | | E/ina | | | | |

| | |
|---|---------------------------|
| CONTRACTOR <u>Vision #17</u> | OWNER <u>Vincent O. J</u> |
| TYPE OF JOB <u>Production</u> | |
| HOLE SIZE <u>7 7/8</u> | T.D. <u>4795</u> |
| CASING SIZE <u>5 1/2</u> | DEPTH <u>4794</u> |
| TUBING SIZE | DEPTH |
| DRILL PIPE | DEPTH |
| TOOL | DEPTH |
| PRES. MAX | MINIMUM |
| MEAS. LINE | SHOE JOINT <u>42</u> |
| CEMENT LEFT IN CSG. | |
| PERFS. | |
| DISPLACEMENT <u>119 bbls of Fresh water</u> | |
| EQUIPMENT | |
| PUMP TRUCK # <u>372</u> | CEMENTER <u>Darin F.</u> |
| | HELPER <u>Newton P.</u> |
| BULK TRUCK # <u>389</u> | DRIVER <u>Daniel H</u> |
| BULK TRUCK # | DRIVER |

| | |
|-------------------------------|--------------------------------------|
| CEMENT | |
| AMOUNT ORDERED | <u>200sx ASC + 5 # Kol Seal</u> |
| | <u>.5% FL-160, 12 gals of cispro</u> |
| | <u>500 gals. ASF</u> |
| | KGC |
| COMMON | @ <u>MAR 03 2009</u> |
| POZMIX | @ |
| GEL | @ <u>CONFIDENTIAL</u> |
| CHLORIDE | @ |
| ASC <u>200</u> | @ <u>18.60</u> <u>3720.00</u> |
| <u>Kol Seal 1000 #</u> | @ <u>.89</u> <u>890.00</u> |
| <u>FL-160 94 #</u> | @ <u>13.30</u> <u>1250.20</u> |
| <u>ASF 500 gal.</u> | @ <u>1.27</u> <u>635.00</u> |
| <u>Fla Pro 12 gal.</u> | @ <u>31.25</u> <u>375.00</u> |
| | @ |
| | @ |
| | @ |
| HANDLING <u>257</u> | @ <u>2.40</u> <u>616.80</u> |
| MILEAGE <u>45 x 257 x .10</u> | <u>1156.50</u> |
| | TOTAL <u>8643.50</u> |

REMARKS:
Pipe on bottom & break circulation
mix 25sx of cement for rest & max hor
mix 175sx of cement, shut down,
loss pump lines & release plug, start
displacement, lift pressure at 80 bbls
slow rate to 3 bpm at 100 bbls, bump
plug at bbls plug, plug
did not bump plug

CHARGE TO: Vincent O. J
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 x Pat Livingston
SIGNATURE x Pat Livingston

| | |
|--------------------------|-------------------------------|
| SERVICE | |
| DEPTH OF JOB <u>4794</u> | |
| PUMP TRUCK CHARGE | <u>2185.00</u> |
| EXTRA FOOTAGE | @ |
| MILEAGE <u>45</u> | @ <u>7.00</u> <u>315.00</u> |
| MANIFOLD | @ |
| <u>Residents</u> | @ <u>113.00</u> <u>113.00</u> |
| | @ |
| | TOTAL <u>2613.00</u> |

| | |
|------------------------|-------------------------------|
| PLUG & FLOAT EQUIPMENT | |
| <u>5 1/2</u> | |
| <u>1- Guide Shoe</u> | @ <u>192.00</u> <u>192.00</u> |
| <u>1- AFU Insert</u> | @ <u>293.00</u> <u>293.00</u> |
| <u>6- Centralizers</u> | @ <u>57.00</u> <u>342.00</u> |
| <u>1- Rubber Plug</u> | @ <u>74.00</u> <u>74.00</u> |
| | @ |
| | TOTAL <u>901.00</u> |

SALES TAX (If Any) _____
TOTAL CHARGES ~~8643.50~~
DISCOUNT ~~1156.50~~ IF PAID IN 30 DAYS

**ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING**

RECEIVED
MAR 04 2009
KANSAS CORPORATION COMMISSION

ALLIED CEMENTING CO., LLC. 34295

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

SERVICE POINT:
Medicine Lodge, KS.

| | | | | | | | |
|------------------------------------|--------------------|---|------------------|--------------------------|-----------------------------|--------------------------|---------------------------|
| DATE <i>11-9-08</i> | SEC. <i>33</i> | TWP. <i>28S</i> | RANGE <i>15W</i> | CALLED OUT <i>7:30AM</i> | ON LOCATION <i>10:00 AM</i> | JOB START <i>5:30 PM</i> | JOB FINISH <i>6:00 PM</i> |
| LEASE <i>Schuster</i> | WELL # <i>1-33</i> | LOCATION <i>Cullison, KS, 4 1/2 W, 4 1/2 S,</i> | | | COUNTY <i>PRATT</i> | STATE <i>KS.</i> | |
| OLD OR NEW (Circle one) <i>NEW</i> | | | <i>ET INTO</i> | | | | |

CONTRACTOR *Vision # 17*
 TYPE OF JOB *Surface*
 HOLE SIZE *12 1/4* T.D. *373*
 CASING SIZE *8 7/8* 24" DEPTH *373*
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX *1,000* MINIMUM *100*
 MEAS. LINE _____ SHOE JOINT *40.28*
 CEMENT LEFT IN CSG. *40.28*
 PERFS. _____
 DISPLACEMENT *Bbl Fresh water*

OWNER *Vincent oil Co.* **KCC**
MAR 9 2009
 CEMENT AMOUNT ORDERED *375sf 60:40:2+3%cc*

EQUIPMENT

PUMP TRUCK CEMENTER *Thomas D Morrow*
 # *414-302* HELPER *J.R.*
 BULK TRUCK DRIVER *Michelle N.*
 # _____ DRIVER _____

| | | | |
|--------------------------------------|-----------------------|----------------|----------------------|
| COMMON | <i>225 A</i> | @ <i>15.45</i> | <i>3476.25</i> |
| POZMIX | <i>150</i> | @ <i>8.00</i> | <i>1200.00</i> |
| GEL | <i>7</i> | @ <i>20.80</i> | <i>145.60</i> |
| CHLORIDE | <i>12</i> | @ <i>58.20</i> | <i>698.40</i> |
| ASC | | @ | |
| KANSAS CORPORATION COMMISSION | | | |
| MAR 4 2009 | | | |
| RECEIVED | | | |
| HANDLING | <i>394</i> | @ <i>2.40</i> | <i>945.60</i> |
| MILEAGE | <i>45 x 394 x .10</i> | | <i>1773.00</i> |
| | | | TOTAL <i>8238.85</i> |

REMARKS:

Ripe on bottom, break circulation, pump 375sf x 60:40:2+3% cc, start pumps, release plug, start D's placement, 5' lift, show rate, dump plug, float held, D's placed w/ 2 1/2 bbl fresh water, cement circulated to surface

Thank you

CHARGE TO: *Vincent oil Co.*
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

| | | | |
|--------------------|---------------|-----------------|----------------------|
| DEPTH OF JOB | <i>373'</i> | | |
| PUMP TRUCK CHARGE | <i>0-300'</i> | | <i>1018.00</i> |
| EXTRA FOOTAGE | <i>73'</i> | @ <i>.85</i> | <i>62.05</i> |
| MILEAGE | <i>45</i> | @ <i>7.00</i> | <i>315.00</i> |
| MANIFOLD | | @ | |
| <i>Head Rental</i> | <i>1</i> | @ <i>113.00</i> | <i>113.00</i> |
| | | | TOTAL <i>1508.05</i> |

8 7/8"

PLUG & FLOAT EQUIPMENT

| | | | |
|-------------------------|----------|-----------------|---------------------|
| <i>Toll Rubber Plug</i> | <i>1</i> | @ <i>113.00</i> | <i>113.00</i> |
| <i>AFO Insert</i> | <i>1</i> | @ <i>377.00</i> | <i>377.00</i> |
| | | @ | |
| | | @ | |
| | | @ | |
| | | | TOTAL <i>490.00</i> |

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 *X Benny Wright*
 SIGNATURE *X Benny Wright*

SALES TAX (If Any) _____
 TOTAL CHARGES ~~_____~~
 DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

**ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING**