

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

**ORIGINAL**

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

OPERATOR: License # 3830  
Name: AX&P, Inc.  
Address 1: P.O. Box 1176  
Address 2: \_\_\_\_\_  
City: Independence State: Ks Zip: 67301 + 1176  
Contact Person: JJ Hanke  
Phone: ( 620 ) 325-5212  
CONTRACTOR: License # 33079  
Name: Patrick Tubbs  
Wellsite Geologist: JJ Hanke  
Purchaser: Pacer Energy

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 #: \_\_\_\_\_

1/5/2011 1/18/2011 1/28/2011

Spud Date or  
Recompletion Date Date Reached TD Completion Date or  
Recompletion Date

API No. 15 - 205-27898-0000

Spot Description: \_\_\_\_\_

SE SE NW NW Sec. 29 Twp. 30 S. R. 16 ☒ East ☐ West

1,161 Feet from ☒ North / ☐ South Line of Section

4,190 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SW

County: Wilson

Lease Name: Unit 1 - Wolfe West Well #: WW#23D

Field Name: Neodesha

Producing Formation: Neodesha Sand

Elevation: Ground: 794 Kelly Bushing: 796

Total Depth: 850 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 35 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from: 845

feet depth to: surface w/ 90 sx cmf.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 40 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 #: \_\_\_\_\_

**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: [Signature] Date: 5/10/2011

**KCC Office Use ONLY**

☐ Letter of Confidentiality Received

Date: \_\_\_\_\_ **RECEIVED**

☐ Confidential Release Date: \_\_\_\_\_

☒ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☒ II ☐ III Approved by: [Signature] Date: 5/19/11 **KCC WICHITA**

Operator Name: AX&P, Inc. Lease Name: Unit1 - Wolfe West Well #: WW#23D  
 Sec. 29 Twp. 30 S. R. 16 ☒ East ☐ West County: Wilson

**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 ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No

Electric Log Submitted Electronically ☐ Yes ☒ No  
 (If no, Submit Copy)

List All E. Logs Run:

**Gamma Ray - Neutron**

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
Oswego	610'	
Neodesha Sand	802'	

### CASING RECORD ☐ New ☐ 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	11"	6.625	15	35'	Portland	8	none
Production	5.125"	2.875"	6.5	845'	Portland	90	2% gel

### 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
1	Perforate Neodesha Sand from 806-16'	Acidized followed with gel/water frac	806-16'

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. 1/28/2011		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.  6	Gas      Mcf min.	Water      Bbls. 20	Gas-Oil Ratio	Gravity 39 API

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. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: 806-16' <b>RECEIVED</b> <b>MAY 18 2011</b>
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**PO Box 884, Chanute, KS 66720**  
**620-431-9210 or 800-467-8676**



**ENTERED**

TICKET NUMBER 30195  
LOCATION Eureka  
FOREMAN Try Stockle

## FIELD TICKET & TREATMENT REPORT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-19-11	1124	Unit Wolf Nest # 23 D				Wilcox
CUSTOMER Ax + P			<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">           34843            445            543            78         </div> <div>           TRUCK # DRIVER TRUCK # DRIVER            John Calvin Kim (McGraw Trucking)         </div> </div>			
MAILING ADDRESS P.O. Box 1176						
CITY Independence	STATE KS	ZIP CODE 67301				

JOB TYPE	<u>L/S O</u>	HOLE SIZE	<u>8 1/2"</u>	HOLE DEPTH	<u>850'</u>	CASING SIZE & WEIGHT	<u>5 1/2" x 26 lb/ft</u>
CASING DEPTH	<u>845'</u>	DRILL PIPE	<u>4 1/2"</u>	TUBING	<u>2 7/8"</u>	OTHER	<u>5 1/2" x 26 lb/ft</u>
SLURRY WEIGHT	<u>14.5#</u>	SLURRY VOL	<u>22 bbl</u>	WATER gal/sk	<u>1000</u>	CEMENT LEFT in CASING	<u>0'</u>
DISPLACEMENT	<u>4.9 bbl</u>	DISPLACEMENT PSI	<u>600</u>	MIX PSI	<u>1100</u>	RATE	<u>100 bbl/hr</u>

REMARKS: Set Job Machine Rig up to 2 3/4" tubing. Break Circulation w/ SBBI Water.  
Mixed 90sbs Cement w/ 2% Gcl + 2% Cech @ 14.5#/gal. Wash out Plug +  
lines stuff 2 Plugs Displace w/ 4.9 Bbl Water. Final Pump Pressure 600 PSI.  
Bump plug to 1100 PSI. ~~2000~~ 2000 shut tubing in @ 600 PSI. Good Cement  
to surface = 5.661 Slugs to pit.

Tib Cuyler

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
S401	1	PUMP CHARGE	925.00	925.00
S406	60	MILEAGE	J. 65	219.00
1104S	90sk <sub>1</sub>	Class A Cement	13.50	1215.00
1118B	200"	Gel 7%	.20	40.00
1102	100"	Cac <sub>12</sub> 1%	.75	75.00
S407	4.77 Ton	Ton-mileage	n/c	\$15.60
S502C	Shrs.	80861 vac Truck	85.00	255.00
1127	3000gpl	C.G walyr	14.90	44.70
y402	2	2½" Top Rubber Plyr	23.00	46.00
		Fully KCC WICHITA	46.50	3134.70
			SALES TAX	89.52
			ESTIMATED TOTAL	3224.22

Bayin 3737

### AUTHORIZATION

**TITLE**

DATE \_\_\_\_\_

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