

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5953 Name: A.R.&R. Ltd. Address 1: 6213 Sawgrass Pl Address 2: City: Bartlesville State: OK Zip: 74006 Contact Person: Andy Park Phone: (620) 252-5009 CONTRACTOR: License # Name: Kurtis Energy Wellsite Geologist: Andy Park Purchaser: Pacer

Designate Type of Completion: [X] New Well [ ] Re-Entry [ ] Workover [X] 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 #:

9-22-10 10-5-10 10-8-10

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

API No. 15 - 125-31974-00-00

Spot Description:

30 34 14 East West

3937 Feet from North / [X] South Line of Section

660 Feet from [X] East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

[ ] NE [ ] NW [X] SE [ ] SW

County: montgomery

Lease Name: Kincaid Well #: 2 Weiser

Field Name: havana/wayside

Producing Formation: Mississippi

Elevation: Ground: 830 Kelly Bushing:

Total Depth: 1615 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 24 Feet

Multiple Stage Cementing Collar Used? [ ] Yes [X] No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 1609

feet depth to: 2 w/ 160 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: ppm Fluid volume: 400 bbls

Dewatering method used: let dry and fill

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: Andy Park Agent

5-17-11

KCC Office Use ONLY

RECEIVED

[ ] Letter of Confidentiality Received

Date: MAY 23 2011

[ ] Confidential Release Date:

[X] Wireline Log Received

[ ] Geologist Report Received

[ ] UIC Distribution

KCC WICHITA

AH2-Dlg -5/27/11

Operator Name: A.R.&R. Ltd. Lease Name: Kincaid Well #: 2 Weiser  
 Sec. 30 Twp. 34 S. R. 14  East  West County: montgomery

**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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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:	<input 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>altomont</td> <td>764</td> <td></td> </tr> <tr> <td>oswego</td> <td>1036</td> <td></td> </tr> <tr> <td>Burgess</td> <td>1513</td> <td></td> </tr> <tr> <td>Mississippi</td> <td>1520</td> <td></td> </tr> </tbody> </table>	Name	Top	Datum	altomont	764		oswego	1036		Burgess	1513		Mississippi	1520	
Name	Top	Datum														
altomont	764															
oswego	1036															
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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 5/8	8 5/8	new	24	portland	10	
production	6 3/4	4 1/2	new	1609	portland	160	

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
2	1547.5 to 1553.5	1000 lbs. frac sand	1547.5

TUBING RECORD:	Size: <u>2 3/8</u>	Set At: <u>1570</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>KCC WICHITA</b>
Date of First, Resumed Production, SWD or ENHR. <b>10-23-10</b>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls. <b>2</b>	Gas Mcf <b>trace</b>	Water Bbls. <b>300</b>	Gas-Oil Ratio	Gravity <b>29</b>

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <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 <i>(Specify)</i> _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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