

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

5/19/11

OPERATOR: License # 6569

Name: Carmen Schmitt, Inc

Address 1: P.O. Box 47

Address 2: 915 Harrison

City: Great Bend State: KS Zip: 67530 + 0 0 4 7

Contact Person: Carmen Schmitt, Inc

Phone: (620) 793-5100

CONTRACTOR: License # 33905

Name: Royal Drilling

Wellsite Geologist: Robert Schreiber

Purchaser: _____

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.: _____

4/20/2010 4/25/2010 4/26/2010

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

API No. 15 - 053-21241-00-00

Spot Description: _____

NW SW NE SE Sec. 11 Twp. 17 S. R. 10 East West

1840 Feet from North / South Line of Section

1270 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Ellsworth

Lease Name: Petermann Well #: 1

Field Name: Stoltenberg

Producing Formation: _____

Elevation: Ground: 1797 Kelly Bushing: 1804

Total Depth: 3301 Plug Back Total Depth: Surface

Amount of Surface Pipe Set and Cemented at: 305 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 PAW 5-25-10
(Data must be collected from the Reserve Pit)

Chloride content: 56000 ppm Fluid volume: 1000 bbls

Dewatering method used: Evaporate and Backfill

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: Francis Stuchman

Title: Operations Manager Date: 5/12/2010

Subscribed and sworn to before me this 12th day of May

Notary Public: Elaine Meyer

Date Commission Expires: 12-13-2011

NOTARY PUBLIC - State of Kansas
ELAINE MEYER
My Appt. Exp. 12-13-2011

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 20 2010
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Carmen Schmitt, Inc Lease Name: Petermann Well #: 1
 Sec. 11 Twp. 17 S. R. 10 East West County: Ellsworth

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>Topeka</td> <td>2551</td> <td>-745</td> </tr> <tr> <td>Heebner</td> <td>2807</td> <td>-1001</td> </tr> <tr> <td>Toronto</td> <td>2827</td> <td>-1021</td> </tr> <tr> <td>LKC</td> <td>2940</td> <td>-1134</td> </tr> <tr> <td>BKC</td> <td>3212</td> <td>-1406</td> </tr> <tr> <td>Arbuckle</td> <td>3253</td> <td>-1447</td> </tr> </table> | Name | Top | Datum | Topeka | 2551 | -745 | Heebner | 2807 | -1001 | Toronto | 2827 | -1021 | LKC | 2940 | -1134 | BKC | 3212 | -1406 | Arbuckle | 3253 | -1447 |
| Name | Top | Datum | | | | | | | | | | | | | | | | | | | | |
| Topeka | 2551 | -745 | | | | | | | | | | | | | | | | | | | | |
| Heebner | 2807 | -1001 | | | | | | | | | | | | | | | | | | | | |
| Toronto | 2827 | -1021 | | | | | | | | | | | | | | | | | | | | |
| LKC | 2940 | -1134 | | | | | | | | | | | | | | | | | | | | |
| BKC | 3212 | -1406 | | | | | | | | | | | | | | | | | | | | |
| Arbuckle | 3253 | -1447 | | | | | | | | | | | | | | | | | | | | |

| 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 1/4" | 8 5/8 | 23 | 305 | Common | 170 | 3%cc, 2% gel |
| | | | | | | | |
| | | | | | | | |

| 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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone | 3254 | | 190 | 60/40 4% gel, 1/4# flo seal |

| 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 |
|---|---|--|-------|
| n/a | n/a | n/a | n/a |
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| | | | | |
|--|------------------|--|--------------------|---|
| TUBING RECORD: | Size: N/A | Set At: N/A | Packer At: N/A | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. N/A | | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil Bbls. N/A | Gas Mcf N/A | Water Bbls. N/A | Gas-Oil Ratio N/A |
| | | | | Gravity N/A |

| | | |
|---|--|------------------------------------|
| 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <u>P&A</u> | PRODUCTION INTERVAL: N/A N/A |
|---|--|------------------------------------|

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Ceil 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 3857

| | | | | | | | |
|-----------------------------------|---------------------------|----------------|--|---|---------------------|------------------------------|-----------------------|
| Date: <u>4-20-10</u> | Sec. <u>11</u> | Twp. <u>17</u> | Range <u>10</u> | County <u>Ellsworth</u> | State <u>Kansas</u> | On Location <u>(Russell)</u> | Finish <u>9:00 AM</u> |
| Lease <u>Reagan</u> | Well No. <u>1</u> | | Location <u>Holmes 1 1/2 E 15 3/4 W N1/4</u> | | | | |
| Contractor <u>Kayak Drilling</u> | Rig <u>2</u> | | | Owner To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | |
| Type Job <u>Surface</u> | Hole Size <u>12 1/4</u> | | T.D. <u>305</u> | Charge To <u>Carmen Schmitt</u> | | | |
| Csg. <u>8 3/8 23 1/2</u> | Depth <u>305</u> | | Street | | | | |
| Tbg. Size | Depth | | City | | | | |
| Tool | Depth | | State | | | | |
| Cement Left in Csg. <u>10-15'</u> | Shoe Joint | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | |
| Meas Line | Displace <u>18 1/2 BU</u> | | Cement Amount Ordered <u>170 Com 3CC 286 1/4</u> | | | | |

EQUIPMENT

| | | | | | |
|-----------------------------------|-----|-----------------------|----------|----------|------------|
| Pumptrk <u>9</u> | No. | Cementer <u>Steve</u> | <u>3</u> | Common | <u>170</u> |
| Bulktrk <u>2</u> | No. | Driver <u>Deate</u> | <u>3</u> | Poz. Mix | |
| Bulktrk | No. | Driver <u>Doug</u> | <u>3</u> | Gel. | <u>3</u> |
| JOB SERVICES & REMARKS | | | | Calcium | <u>6</u> |

| | |
|-----------------------------|-------------------------|
| Remarks: | Hulls |
| Rat Hole | Salt |
| Mouse Hole | Flowseal |
| Centralizers | Kol-Seal |
| Baskets | Mud CLR 48 |
| D/V or Port Collar | CFL-117 or CD110 CAF 38 |
| <u>Cement did Circulate</u> | Sand |
| | Handling <u>179</u> |
| | Mileage <u>46</u> |

FLOAT EQUIPMENT

| | |
|-------------|--|
| Guide Shoe | |
| Centralizer | |
| Baskets | |
| AFU Inserts | |
| Float Shoe | |
| Latch Down | |

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KANSAS CORPORATION COMMISSION
MAY 20 2010
CONSERVATION DIVISION
WICHITA, KS

Quality Oilwell

| | | |
|----------------------------|---------|--------------|
| Signature <u>Doug Buey</u> | Russell | Tax |
| | | Discount |
| | | Total Charge |

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

(Russell) No.

3818

3:45 AM

| | | | | | | | | |
|---------------------|-----------------------|------------------------------------|-----------------|--|---------------------------------------|-------|-------------|--------|
| Date | 4-26-2010 | Sec. | Twp. | Range | County | State | On Location | Finish |
| Lease | Petermann | Well No. | #1 | Location | Hollywood, Ks + T Rd 1E to 6th Rd, S. | | | |
| Contractor | Royal Drilling Rig #2 | Owner | 8 W - 10 to Rig | | | | | |
| Type Job | PTA | To Quality Oilwell Cementing, Inc. | | | | | | |
| Hole Size | 7 7/8" | T.D. | 3301' | You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | |
| Csg. | | Depth | | Charge To | Carmen - Schmidt | | | |
| Drill Size | 4 1/2" | Depth | 3254' | Street | | | | |
| Tool | | Depth | | City | State | | | |
| Cement Left in Csg. | | Shoe Joint | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | |
| Meas Line | | Displace | H 20 | Cement Amount Ordered 190 sx 60/40 4% Gel 4# F.S. | | | | |

EQUIPMENT

| | | | | | | | |
|---------|---------|-----|----------|---------|---|----------|--------|
| Pumptrk | 7 | No. | Cementor | Brandon | 5 | Common | 114 sx |
| | | | Helper | | | | |
| Bulktrk | 8 | No. | Driver | Rocky | 5 | Poz. Mix | 76 sx |
| | | | Driver | | | | |
| Bulktrk | pick-up | No. | Driver | Rick | 5 | Gel. | 8 gel |
| | | | Driver | | | | |

JOB SERVICES & REMARKS

| | | | |
|--------------------|---------------------------|-------------------------|------------------|
| Remarks: | | Calcium | |
| Rat Hole | 15sx 60/40 4% Gel 4# F.S. | Hulls | |
| Mouse Hole | 10sx 60/40 4% Gel 4# F.S. | Salt | |
| Centralizers | | Flowseal | 4# 4B |
| Baskets | | Kol-Seal | |
| D/V or Port Collar | | Mud CLR 48 | |
| | | CFL-117 or CD110 CAF 38 | |
| | | Sand | |
| 3254' - 35 sx | | Handling | 198 |
| 1275' - 35 sx | | Mileage | 46 |

FLOAT EQUIPMENT

| | | | |
|-----------------------------|--|-------------|--|
| 950' - 35 sx | | Guide Shoe | |
| 355' - 35 sx | | Centralizer | |
| 60' - 25 sx | | Baskets | |
| Rat - 15 sx | | AFU Inserts | |
| Mouse 10 sx | | Float Shoe | |
| 190 sx 60/40 4% Gel 4# F.S. | | Latch Down | |

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KANSAS CORPORATION COMMISSION

MAY 20 2010

CONSERVATION DIVISION
SCHIEFFELIN

Pumptrk Charge plug
Mileage 46

Russell

X Signature *Roy B...*

| | |
|--------------|--|
| Tax | |
| Discount | |
| Total Charge | |