

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 6804
Name: LACHENMAYR OIL, LLC
Address 1: P. O. BOX 526
Address 2: _____
City: NEWTON State: KS Zip: 67114 + _____
Contact Person: Howard Lachenmayr
Phone: (316) 558-3625
CONTRACTOR: License # 5123
Name: Pickrell Drilling Company, Inc.
Wellsite Geologist: Frank Mize
Purchaser: _____

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APR 22 2011

KCC WICHITA

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 (Cora, 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 #: _____

01/13/2011 01/24/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-151-22363 - 0000
Spot Description: C NW NW NE 29-26S-14W
C NW NW NE Sec. 29 Twp. 26 S. R. 14 East West
330 Feet from North / South Line of Section
2,310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pratt
Lease Name: Achterberg Trust Well #: 1
Field Name: Wildcat
Producing Formation: P & A
Elevation: Ground: 2011 Kelly Bushing: 2021
Total Depth: 4425 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 363 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: 39000 ppm Fluid volume: 1500 bbls
Dewatering method used: Empty pit
Location of fluid disposal if hauled offsite:
Operator Name: Bob's Hauling Service
Lease Name: Waters License #: 33779
Quarter NW Sec. 30 Twp. 25 S. R. 14 East West
County: Stafford Permit #: D-24863

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: Howard M Lachenmayr
Title: Operator Date: 04/13/2011

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: RJA DG Date: 4/27/11

Operator Name: LACHENMAYR OIL, LLC Lease Name: Achterberg Trust Well #: 1
 Sec. 29 Twp. 26 S. R. 14 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 <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 type="checkbox"/> Yes <input checked="" 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 checked="" 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>Anhydrite</td> <td>965</td> <td>+1056</td> </tr> <tr> <td>Indian Cave</td> <td>2890</td> <td>-876</td> </tr> <tr> <td>Lansing</td> <td>3893</td> <td>-1872</td> </tr> <tr> <td>BKC</td> <td>4211</td> <td>-2190</td> </tr> <tr> <td>Mississippian</td> <td>4328</td> <td>-2307</td> </tr> <tr> <td>Kinderhook</td> <td>4395</td> <td>-2374</td> </tr> <tr> <td>Viola</td> <td>4406</td> <td>-2385</td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	965	+1056	Indian Cave	2890	-876	Lansing	3893	-1872	BKC	4211	-2190	Mississippian	4328	-2307	Kinderhook	4395	-2374	Viola	4406	-2385
Name	Top	Datum																							
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Viola	4406	-2385																							

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
Conductor	14.75	10.75	32.75	363	Class A	500	3%gel,3%cc,1/2#pf
SURFACE	9.875	8.625	24	983	Class A	535	3%cc,3/4#pf

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 (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR.	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. Gas Mcf Water Bbls. 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 type="checkbox"/> Perf. <input type="checkbox"/> Dualty Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30834
LOCATION #80 Eldorado
FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-13-11	4897	Achterburg trust #1	29	26 S	14 W	Pratt
CUSTOMER Lachenmayer Oil CO			TRUCK # DRIVER 446 Jeff 491 Kevin 511 Jacob			
MAILING ADDRESS PO box 526						
CITY Newton	STATE KS	ZIP CODE 67114				
Safety meeting JS Kivi J.S.						

JOB TYPE Surface HOLE SIZE 14.5 in HOLE DEPTH 390ft CASING SIZE & WEIGHT 10 3/4
 CASING DEPTH 384.56 DRILL PIPE 4 1/2 TUBING N/A OTHER _____
 SLURRY WEIGHT 14.5 lb SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20ft +
 DISPLACEMENT 38.45 DISPLACEMENT PSI 200 MIX PSI 200 RATE 5bpm

REMARKS: Safety meeting, pumped to break circulation, mixed 300 stks class A 3X gel, 3X CC, 1/2 lb poly per sk, displaced with 36 bbl water and shut in, did not circulate cement, called for one in and more cement mixed 200 stks class A 3X CC to circulate cement to surface from 35 ft.

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	98.50	98.50
5406	45	MILEAGE	4.50	202.50
5407	2	min bulk delivery	390.00	780.00
11045	500 stks	Class A cement	16.00	8000.00
1107	150 lbs	poly flack	2.50	375.00
1118 B	700 lbs	gel	.22	198.00
1102	1280 lbs	Calcium Chloride	.88	1126.4
4434	1	10 3/4 Rubber plug	105.00	105.00
5404	3 hr	Personnel standby on location	100.00	300.00
			Subtotal	
			Subtotal	12071.90
			SALES TAX	115.13
			ESTIMATED TOTAL	12187.03

Rev'n 3737

AUTHORIZATION Mike Kern TITLE 039150 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.



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30835

LOCATION # 80 Eldorado

FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-16-11	4897	Achterburg - trust #1	29	26S	14w	Pratt
CUSTOMER <u>Lachenmayr oil co</u>			SAFTY MEETING <u>JS</u> K.V. T.S. J.S.			
MAILING ADDRESS <u>PO Box 526</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY <u>Newton</u>	STATE <u>KS</u>	ZIP CODE <u>67114</u>	<u>467</u>	<u>Jeff</u>		
			<u>491</u>	<u>Kevin</u>		
			<u>502</u>	<u>Jeff</u>		
			<u>511</u>	<u>Jacob</u>		

JOB TYPE <u>Surface B</u>	HOLE SIZE <u>9 3/4</u>	HOLE DEPTH <u>985</u>	CASING SIZE & WEIGHT <u>8 5/8</u>
CASING DEPTH <u>941</u>	DRILL PIPE	TUBING <u>N/A</u>	OTHER
SLURRY WEIGHT <u>14.0 lb</u>	SLURRY VOL	WATER gal/sk	CEMENT LEFT IN CASING <u>36 ft</u>
DISPLACEMENT <u>59.50 bbl</u>	DISPLACEMENT PSI <u>400</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>

REMARKS: Safety meeting, ran 8 5/8 to 941, mixed 275 sks class A 3 1/2 cc 3/4 lb poly per sack, d/b placed with 59.50 bbl water and shut in at 400 psi fluid fell back to 30+ ft on back side, mixed 260 sks class A 3 1/2 cc 1/3 lb poly per sack, hole still falling back, filled cellar with class A 3 1/2 cc, and let settle

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KCC WICHITA

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	985.00	985.00
5406	4.5 mile	MILEAGE	4.50	202.50
5407	2	min bulk delivery	390.00	780.00
1104.S	53.5	class A cement	16.00	856.00
1102	1440 lb.S	calcium chloride	0.88	1267.20
1107	275 lb.S	Poly-Flack	2.50	687.50
4106	0	8 5/8 cement basicet	367.00	N/C
4411	1	8 5/8 Rubber plug	135.00	135.00
4229	1	8 5/8 AFu Baffle Plate	284.00	284.00
			Subtotal	12901.20
			SALES TAX	198.14
			ESTIMATED TOTAL	13099.34

Rev'n 3737

239107

AUTHORIZATION mike

TITLE

DATE 1-16-11

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.



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30839

LOCATION #80 Eldorado

FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY												
1-24-11	4897	Achterburg-trust #1	29	36S	14W	Pratt												
CUSTOMER Lachenmayr Oil CO			Saffty meeting JB K.H. J.S.															
MAILING ADDRESS P.O. Box 526																		
CITY Newton	STATE KS	ZIP CODE 67114																
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TRUCK #	DRIVER	TRUCK #	DRIVER															
446	Jeff																	
491	Kevin																	
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JOB TYPE Plug B HOLE SIZE 7 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT N/A
 CASING DEPTH N/A DRILL PIPE 5 1/2 TUBING N/A OTHER _____
 SLURRY WEIGHT 1416 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI 100 MIX PSI 200 RATE 46pm

REMARKS: Saffty meeting, Run pipe to 1010ft, pumped to break circulation mixed, 50 SKS 60/40 po2, 4 1/2 gal, 3 1/2 CC, 1/2 lb poly per suck, displaced with 10 bbl water, pulled pipe to 390 ft, mixed 100 SKS 60/40 4 1/2 gal displaced with 4 1/2 bbl water, pulled pipe to 60 ft, mixed 40 SKS 60/40 4 1/2 gal, circulated cement to surface, pulled pipe out, Run one joint into Rat hole mixed 30 SKS 60/40 4 1/2 gal, and Run 1 joint into mouse hole mixed 20 SKS 60/40 4 1/2 gal, topped hole off with 15 SKS 60/40 4 1/2 gal. Run 7:30am

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	1200.00	1200.00
5406	45	MILEAGE	4.50	202.50
5407	1	min bulk delivery	390.00	390.00
1131	255 SKS	60/40 po2 mix	13.00	3315.00
1118 B	1050 lbs	gel RECEIVED	0.22	231.00
1102	160 lbs	Calcium Chloride APR 22 2011	0.88	140.80
1107	25 lbs	Poly Flakes	2.50	62.50
		KCC WICHITA		
		Subtotal		6641.80
		SALES TAX		213.10
		ESTIMATED TOTAL		6815.50

Ravin 3737

AUTHORIZATION Jef Lead

839310

TITLE _____

DATE 1-24-11

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.