



KANSAS CORPORATION COMMISSION 1055677
OIL & GAS CONSERVATION DIVISION

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 # 32044
Name: Trimble & Maclaskey Oil LLC
Address 1: 110 SOUTH ST
Address 2: PO BOX 171
City: GRIDLEY State: KS Zip: 66852 + _____
Contact Person: Randall L. Trimble
Phone: (620) 836-2000
CONTRACTOR: License # 32854
Name: Gulick Drilling Co., Inc.
Wellsite Geologist: Thomas E. Blair
Purchaser: _____

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 #: _____

12/06/2010	12/10/2010	12/10/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-111-20437-00-00

Spot Description: _____
E2 NE NW NE Sec. 25 Twp. 21 S. R. 10 East West
330 Feet from North / South Line of Section
1485 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Lyon
Lease Name: Rossillion Well #: 2

Field Name: _____
Producing Formation: Viola

Elevation: Ground: 1265 Kelly Bushing: 1273

Total Depth: 2597 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 110 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: 0 ppm Fluid volume: 0 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 #: _____

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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: 05/20/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Deanna Garcia Date: 06/02/2011



1055677

Operator Name: Trimble & Maclaskey Oil LLC Lease Name: Rossillion Well #: 2
 Sec. 25 Twp. 21 S. R. 10 East West County: Lyon

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron	<input 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>Mississippi</td> <td>2145</td> <td>872</td> </tr> <tr> <td>Kinder hook</td> <td>2492</td> <td>1219</td> </tr> <tr> <td>Viola</td> <td>2582</td> <td>1309</td> </tr> <tr> <td>Simpson</td> <td>2590</td> <td>1317</td> </tr> <tr> <td>Arbuckle</td> <td>2597</td> <td>1324</td> </tr> </table>	Name	Top	Datum	Mississippi	2145	872	Kinder hook	2492	1219	Viola	2582	1309	Simpson	2590	1317	Arbuckle	2597	1324
Name	Top	Datum																	
Mississippi	2145	872																	
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Viola	2582	1309																	
Simpson	2590	1317																	
Arbuckle	2597	1324																	

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	12.25	8.625	20	110		80	
Production	7.875	5.5	17	2640		125	

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	2599-2602		

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.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

✓
MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 238438

=====
Invoice Date: 12/08/2010 Terms:

Page 1

TRIMBLE & MACLASKEY OIL LLC
BOX 171
GRIDLEY KS 66852
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ROSSILLION #2
30027
12-06-10

=====
Part Number Description Qty Unit Price Total

1104S	CLASS "A" CEMENT (SALE)	80.00	13.5000	1080.00
1102	CALCIUM CHLORIDE (50#)	225.00	.7500	168.75
1118B	PREMIUM GEL / BENTONITE	150.00	.2000	30.00
1107	FLO-SEAL (25#)	20.00	2.1000	42.00

Description Hours Unit Price Total

479	MIN. BULK DELIVERY	1.00	315.00	315.00
520	CEMENT PUMP (SURFACE)	1.00	725.00	725.00
520	EQUIPMENT MILEAGE (ONE WAY)	35.00	3.65	127.75

=====
Parts: 1320.75 Freight: .00 Tax: 103.02 AR 2591.52
Labor: .00 Misc: .00 Total: 2591.52
Subt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 30027
LOCATION Eureka
FOREMAN Troy Strickler

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-6-10	7842	Rossillion #2				Lyon
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						
Gridley						
Ks						
66852						

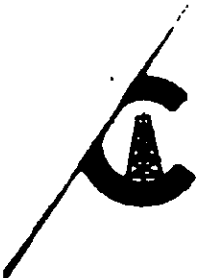
JOB TYPE S/P 0 HOLE SIZE _____ HOLE DEPTH 123' CASING SIZE & WEIGHT _____
 CASING DEPTH 122' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL 20851 WATER gal/sk 65 CEMENT LEFT IN CASING 20'
 DISPLACEMENT 6.584 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8" casing. Break Circulation w/ 5841 water.
Mix 80SK1 Reg Cement w/ 3% Cacl₂, 2% Gel, 1/4" Floccle. Displace
w/ 6.584 water. Shut casing in w/ Good Cement to surface = 5841
slurry to pit.
Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	35	MILEAGE	3.65	127.75
11045	80 SK1	Class A Cement	13.50	1080.00
1102	225"	3% Cacl ₂	.75	168.75
1118A	150"	2% Gel	.20	30.00
1107	20"	1/4" SK Floccle	2.10	42.00
5407		Ten-mileage Bulk Truck	m/c	315.00
			Sub Total	2488.50
			SALES TAX	103.02
			ESTIMATED TOTAL	2591.52

Form 3737 AUTHORIZATION TITLE 238438 DATE _____

I acknowledge that the payment terms, conditions 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

✓

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/457-8676
FAX 620/431-0012

INVOICE

Invoice # 238624

Invoice Date: 12/15/2010 Terms: 0/0/30,n/30

Page 1

TRIMBLE & MACLASKEY OIL LLC
BOX 171
GRIDLEY KS 66852
() -

ROSSILLION #2
30040
12-10-10

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	125.00	17.0000	2125.00
1110A	KOL SEAL (50# BAG)	625.00	.4200	262.50
1107A	PHENOSEAL (M) 40# BAG)	30.00	1.1500	34.50
1103	CAUSTIC SODA	100.00	1.4500	145.00
4159	FLOAT SHOE AFU 5 1/2"	1.00	328.0000	328.00
4104	CEMENT BASKET 5 1/2"	1.00	219.0000	219.00
4130	CENTRALIZER 5 1/2"	6.00	46.0000	276.00
4454	5 1/2" LATCH DOWN PLUG	1.00	242.0000	242.00
1123	CITY WATER	3000.00	.0149	44.70

Description	Hours	Unit Price	Total
436 80 BBL VACUUM TRUCK (CEMENT)	3.00	85.00	255.00
WASH- WASH OR SWIVEL HEAD	1.00	100.00	100.00
515 MIN. BULK DELIVERY	1.00	315.00	315.00
520 CEMENT PUMP	1.00	925.00	925.00
520 EQUIPMENT MILEAGE (ONE WAY)	30.00	3.65	109.50

Parts: 3676.70 Freight: .00 Tax: 286.79 AR 5667.99
 Labor: .00 Misc: .00 Total: 5667.99
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____

CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30040

LOCATION EUREKA

FOREMAN KEVIN MCCOY

Box 884, Chanute, KS 66720
820-431-8210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-10-10	7842	Rossillion # 2	25	215	10E	Lyon
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Trimble & MacLuskey Oil LLC			520	RICK L.		
MAILING ADDRESS			515	CALIN H		
P.O. Box 171			436	DAVE G.		
CITY	STATE	ZIP CODE				
Gridley	Ks	66852				

Safety Meeting
KM
RL
GH
DS

JOB TYPE Longstring O HOLE SIZE 7 7/8 HOLE DEPTH 2641' CASING SIZE & WEIGHT 5 1/2 17" NBW
 CASING DEPTH 2633' G.L. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.7" SLURRY VOL 41 BBL WATER gal/ft 9.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 61.3 BBL DISPLACEMENT PSI 800 PSI 1300 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 5 1/2 Csg w/ Rotating Head. Break Circulation w/ Fresh water. Pump 12 Bbl Caustic Soda Pre Flush, 5 Bbl water spacer. Mixed 125 sks Thick Set Cement w/ 5" Kol-Seal /sk. Pheno-Seal 44" /sk @ 13.7" /gal. wash out Pump & Lines shut down. Release Latch down Plug. Displace Plug to Seat w/ 61.3 BBL Fresh water. Final Pumping Pressure 800 PSI. Bump Plug to 1300 PSI. wait 2 minutes. Release Pressure. Float & Plug Held. Good Circulation @ All times during Cementing Procedures. Rotated Casing while Displacing Cement. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	30	MILEAGE	3.65	109.50
1126 A	125 sks	THICK Set Cement	17.00	2125.00
1110 A	625 "	Kol-Seal 5" /sk	.42	262.50
1107 A	30 "	Pheno-Seal 44" /sk	1.15	34.50
1103	100 "	Caustic Soda Pre Flush (12 BBL)	1.45	145.00
5407	6.87 tons	Ton Mileage Bulk Delv.	M/c	315.00
5502C	3 two	80 Bbl Ore	85.00	255.00
4159	1	5 1/2 AFE Float Shoe	328.00	328.00
4104	1	5 1/2 Cement Basket	219.00	219.00
4130	6	5 1/2 x 7 7/8 Centralizers	46.00	276.00
4454	1	5 1/2 Latch down Plug	242.00	242.00
1123	2000 gal	City Water	14.90	44.90
5811	1	Rental on Rotating Head	100.00	100.00
			Sub Total	5281.00
		THANK YOU	SALES TAX 7.8%	286.19
			ESTIMATED TOTAL	5567.19

Rev 9/97

AUTHORIZATION By Randy Trimble TITLE Partner 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.

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



phone: 316-337-6200
fax: 316-337-6211
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

May 20, 2011

Randall L. Trimble
Trimble & Maclaskey Oil LLC
110 SOUTH ST
PO BOX 171
GRIDLEY, KS 66852

Re: ACO1
API 15-111-20437-00-00
Rossillion 2
NE/4 Sec.25-21S-10E
Lyon County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Randall L. Trimble

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



phone: 316-337-6200
fax: 316-337-6211
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

May 23, 2011

Randall L. Trimble
Trimble & Maclaskey Oil LLC
110 SOUTH ST
PO BOX 171
GRIDLEY, KS 66852

Re: ACO-1
API 15-111-20437-00-00
Rossillion 2
NE/4 Sec.25-21S-10E
Lyon County, Kansas

Dear Randall L. Trimble:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 12/06/2010 and the ACO-1 was received on May 20, 2011 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department