



KANSAS CORPORATION COMMISSION 1057614  
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 # 34170  
Name: Sirius Energy Corp.  
Address 1: 526 COUNTRY PL, SOUTH  
Address 2: \_\_\_\_\_  
City: ABILENE State: TX Zip: 79606 + 7032  
Contact Person: Randy Teter  
Phone: ( 785 ) 4488571  
CONTRACTOR: License # 32079  
Name: Leis, John E.  
Wellsite Geologist: n/a  
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 #: \_\_\_\_\_

<u>03/16/2011</u>	<u>03/16/2011</u>	<u>03/30/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-003-24997-00-00

Spot Description: \_\_\_\_\_  
NW SE SE NE Sec. 14 Twp. 21 S. R. 20  East  West  
2987 Feet from  North /  South Line of Section  
442 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Anderson

Lease Name: West Van Winkle Well #: S-32

Field Name: \_\_\_\_\_

Producing Formation: Squirrel sand

Elevation: Ground: 1070 Kelly Bushing: 0

Total Depth: 755 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at: 22 Feet

Multiple Stage Cementing Collar Used?  Yes  No

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

If Alternate II completion, cement circulated from: 22

feet depth to: 0 w/ 6 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 120 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: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: Deanna Garriso Date: 06/14/2011



1057614

Operator Name: Sirius Energy Corp. Lease Name: West Van Winkle Well #: S-32  
 Sec. 14 Twp. 21 S. R. 20  East  West County: Anderson

**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 / CCL	<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>Squirrel sand</td> <td>670</td> <td>gl</td> </tr> </table>	Name	Top	Datum	Squirrel sand	670	gl
Name	Top	Datum					
Squirrel sand	670	gl					

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	9.875	7	20	21	Portland	6	
Production	5.625	2.875	6.5	750	OWC	66	Kol seal 40%

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> 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"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# GARNETT TRUE VALUE HOMECENTER

410 N Maple  
Garnett, KS 66032  
{785} 448-7106 FAX {785} 448-7135

Merchant Copy  
**INVOICE**

THIS COPY MUST REMAIN AT  
MERCHANT AT ALL TIMES!

Page: 1		Invoice: <b>10169600</b>	
Special :		Time:	14:34:12
Instructions :		Ship Date:	03/15/11
		Invoice Date:	03/15/11
Sale rep #: <b>MARILYN</b>	Acct rep code:	Dus Date:	04/08/11
Sold To: <b>SIRIUS ENERGY CORP</b> <b>526 COUNTRYPLACE SOUTH</b> <b>ABILENE, TX 79606-7032</b>		Ship To: <b>SIRIUS ENERGY CORP</b> (325) 665-9152  (325) 665-9152	
Customer #: <b>0001860</b>	Customer PO:	Order By:	

6TH  
T 120

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	All Price/Uom	PRICE	EXTENSION
60.00	60.00	P	BAG	CPFA	FLY ASH MIX 80 LBS PER BAG	6.9900 BAG	6.9900	419.40
60.00	60.00	P	BAG	CPPC	PORTLAND CEMENT-94#	9.4900 BAG	9.4900	569.40

FILLED BY				CHECKED BY				DATE SHIPPED				DRIVER				Sales total		\$988.80			
SHIP VIA				Customer Pick up				RECEIVED COMPLETE AND IN GOOD CONDITION				Taxable				988.80		Sales tax		82.08	
x				<i>Randy Jeter</i>				Non-taxable				0.00		Tax #							

**TOTAL \$1070.88**

1 - Merchant Copy

