



KANSAS CORPORATION COMMISSION 1057613
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 #:
02/23/2011 02/23/2011 03/18/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-003-24964-00-00
Spot Description:
NE SW SE NE Sec. 14 Twp. 21 S. R. 20 East West
2982 Feet from North / South Line of Section
770 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-34
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: Doanna Garrison Date: 06/15/2011



1057613

Operator Name: Sirius Energy Corp. Lease Name: West Van Winkle Well #: S-34
 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>688</td> <td>gl</td> </tr> </table> | Name | Top | Datum | Squirrel sand | 688 | gl |
| Name | Top | Datum | | | | | |
| Squirrel sand | 688 | 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 | 22 | Portland | 6 | |
| Production | 5.625 | 2.875 | 6.5 | 748 | 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: _____ _____ |
|--|--|---|

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: 10169600 | |
| Special : | | Time: | 14:34:12 |
| Instructions : | | Ship Date: | 03/15/11 |
| | | Invoice Date: | 03/15/11 |
| Sales rep #: | MARILYN | Acct rap code: | Due Date: 04/08/11 |
| Sold To: SIRIUS ENERGY CORP | | Ship To: SIRIUS ENERGY CORP. | |
| 526 COUNTRYPLACE SOUTH | | (325) 665-9152 | |
| ABILENE, TX 79606-7032 | | (325) 665-9152 | |
| Customer #: | 0001860 | Customer PO: | Order By: |

8TH
 T 120

| ORDER | SHIP | L | U/M | ITEM# | DESCRIPTION | Alt 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 SHIP VIA RECEIVED COMPLETE AND IN GOOD CONDITION x <i>Randy Jeter</i> | CHECKED BY | DATE SHIPPED | DRIVER | Sales total \$988.80 |
| | Customer Pick up | | | |
| | Taxable | 888.80 | Non-taxable | 0.00 |

TOTAL \$1070.88

1 - Merchant Copy

