

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

6/02/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3293
Name: Russell Oil Inc
Address 1: PO BOX 1469
Address 2: _____
City: Plainfield State: IL Zip: 60544 + _____
Contact Person: LeRoy Holt
Phone: (815) 609-7000
CONTRACTOR: License # 33350

Name: Southwind Drilling Inc
Wellsite Geologist: Steve Angle
Purchaser: NA

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 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.: _____
2/13/2009 2/22/09 2/22/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 195-22597-00-00
Spot Description: _____
NE SW SW NW Sec. 6 Twp. 11 S. R. 22 East West
2150' Feet from North / South Line of Section
400 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Trego
Lease Name: Virginia Well #: 1-6

Field Name: Wildcat
Producing Formation: NA
Elevation: Ground: 2262 Kelly Bushing: 2272
Total Depth: 4025' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 267' 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.

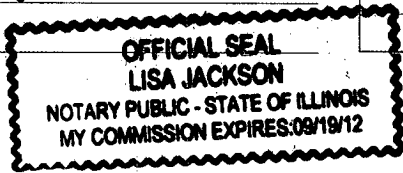
Drilling Fluid Management Plan PANJ 7-9-09
(Data must be collected from the Reserve Pit)
Chloride content: 25000 ppm Fluid volume: 975 bbls
Dewatering method used: evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ 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: Lisa Jackson
Title: Executive Assistant Date: 6/4/09
Subscribed and sworn to before me this 4 day of JUNE
09
Notary Public: Lisa Jackson
Date Commission Expires: 9/19/12

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Operator Name: Russell Oil Inc Lease Name: Virginia Well #: 1-6
 Sec. 6 Twp. 11 S. R. 22 East West County: Trego

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Microresistivity; borehole compensated sonic; dual compensated porosity; dual induction; computer processed interpretation	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See attached geologist report <div style="text-align: right; font-weight: bold; font-size: 1.2em;"> RECEIVED JUN 09 2009 KCC WICHITA </div>
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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#	267'	common	165	3%cc, 2%gel
<div style="font-weight: bold; font-size: 1.5em; opacity: 0.5;"> CONFIDENTIAL JUN 02 2009 KCC </div>							

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: NA Set At: Packer At: Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. NA	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. NA 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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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QUALITY OILWELL CEMENTING, INC.

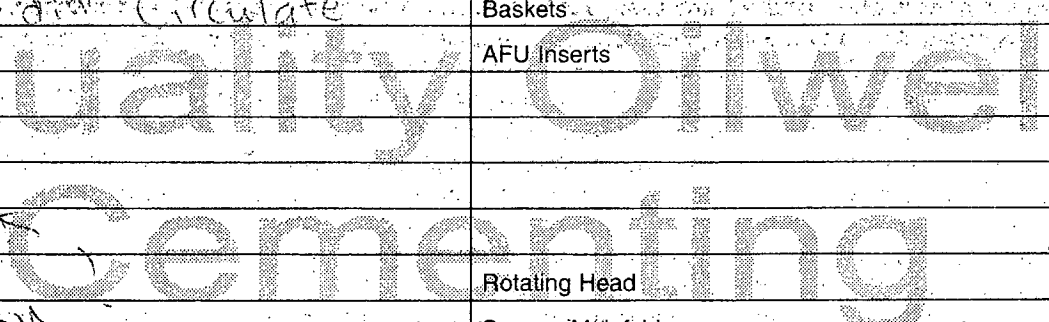
Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67003

No. 3183

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2/13/09	6	11S	22 23 W	Trego	KS		1:00 PM
Lease Virginia	Well No. 1-6	Location Wakeney 7N, 2E, 1N, 3/4 E, S into					
Contractor Southwind Drilling Rig #1				Owner			
Type Job				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.			
Hole Size 12 1/4		T.D. 269'		Charge To Russell Oil Inc.			
Csg. 8 5/8 20#		Depth 267'		Street			
Tbg. Size		Depth		City State			
Drill Pipe		Depth		City State			
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg. 10-12 5/8		Shoe Joint		CEMENT			
Press Max.		Minimum		Amount Ordered 165 cam 2% gel 3% CC			
Meas Line		Displace 16 3/4 bbls.		Common			
Perf.				Poz. Mix			
EQUIPMENT				Gel.			
Pumptrk 9	No.	Cementer Dave	CONFIDENTIAL		Calcium		
Bulktrk 2	No.	Driver Doug	JUN 18 2009		Mills		
Bulktrk 40	No.	Driver Paul			Salt		
JOB SERVICES & REMARKS KCC				Flowseal			
Pumptrk Charge				RECEIVED			
Mileage				JUN 09 2009			
Footage				KCC WICHITA			
Total				Handling			
Remarks:				Mileage			
				Pump Truck Charge			
				FLOAT EQUIPMENT			
				Guide Shoe			
				Centralizer			
Cement order circulate				Baskets			
				AFU Inserts			
				Rotating Head			
				Squeez Mainfold			
				Tax			
				Discount			
X Signature Frank Ponce				Total Charge			

Thank You



QUALITY OILWELL CEMENTING, INC.

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

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

No. 3204

Date	Sec.	Twp.	Range	County	State	On Location	Finish
2-22-09	6	11	22	Trego	Kansas		10:30PM
Lease Virginia	Well No. 1-6		Location Wakeeney TN 3E Sinto				
Contractor Southwind Drilling Rig 1				Owner			
Type Job				To Quality Oilwell Cementing, Inc.			
Hole Size 7 7/8				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			
Tbg. Size				Depth			
Drill Pipe 4 1/2 XH				Depth			
Tool				Depth			
Cement Left in Csg.				Shoe Joint			
Press Max.				Minimum			
Meas Line				Displace			
Perf.				Poz. Mix			
EQUIPMENT				CEMENT			
Pumptrk 1 No. Cementer STEW				Amount Ordered 245 60/40 4 1/2 Gal			
Bulktrk 8 No. Driver Blake				Common			
Bulktrk No. Driver Brandon				Salt			
JOB SERVICES & REMARKS JUN 02 2009				Flowseal			
Pumptrk Charge				RECEIVED			
Mileage				JUN 09 2009			
Footage				KCC WICHITA			
Total				Handling			
Remarks:				Mileage			
1st Plug @ 3930' 25sx				Pump Truck Charge			
2nd " " 1781' 25sx				FLOAT EQUIPMENT			
3rd " " 887' 100sx				Guide Shoe			
4th " " 320' 40sx				Centralizer			
5th " " 40' 10sx				Baskets			
Rest Hole 30sx				AFU Inserts			
Mouse Hole 15sx				1 Dry Hole Plug			
Rotating Head				Tax			
Squeeze Mainfold				Discount			
Signature Frank Rouse				Total Charge			

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

COPY

Form ACO-1
October 2008
Form Must Be Typed

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OPERATOR: License # 3293
Name: Russell Oil Inc
Address 1: PO BOX 1469
Address 2: _____
City: Plainfield State: IL Zip: 60544 + _____
Contact Person: LeRoy Holt
Phone: (815) 609-7000
CONTRACTOR: License # 33350
Name: Southwind Drilling Inc
Wellsite Geologist: Steve Angle
Purchaser: NA

API No. 15 - 195-22597-00-00
Spot Description: _____
NE SW SW NW Sec. 6 Twp. 11 S. R. 22 East West
2150' Feet from North / South Line of Section
400 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Trego
Lease Name: Virginia Well #: 1-6
Field Name: Wildcat

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

Producing Formation: NA
Elevation: Ground: 2262 Kelly Bushing: 2272
Total Depth: 4025' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at: 267' 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.

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.: _____
2/13/2009 2/22/09 2/22/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 25000 ppm Fluid volume: 975 bbls
Dewatering method used: evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

RECEIVED
JUN 09 2009

KCC WICHITA

CONFIDENTIAL

JUN 02 2009

KCC

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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: [Signature]
Title: Executive Assistant Date: 6/4/09
Subscribed and sworn to before me this 4 day of JUNE
09
Notary Public: [Signature]
Date Commission Expires: 9/19/12

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

OFFICIAL SEAL
LISA JACKSON
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 09/19/12

Operator Name: Russell Oil Inc Lease Name: Virginia Well #: 1-6
 Sec. 6 Twp. 11 S. R. 22 East West County: Trego

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

**microresistivity; borehole compensated sonic;
 dual compensated porosity; dual induction;
 computer processed interpretation**

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

See attached geologist report

**RECEIVED
 JUN 09 2009
 KCC WICHITA**

CASING RECORD New 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#	267'	common	165	3%cc, 2%gel
CONFIDENTIAL							
JUN 02 2009							

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				

PERFORATION RECORD - Bridge Plugs Set/Type
 Specify Footage of Each Interval Perforated

Shots Per Foot	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

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

Date of First, Resumed Production, SWD or Enhr. NA Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>NA</u>				

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____