



KANSAS CORPORATION COMMISSION 1057810
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 # 5399
Name: American Energies Corporation
Address 1: 155 N MARKET STE 710
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 1821
Contact Person: Mindy Wooten
Phone: (316) 263-5785
CONTRACTOR: License # 5399
Name: American Energies Corporation
Wellsite Geologist: David Barker
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 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 #: _____
4/11/2011 4/21/2011 4/21/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-151-22374-00-00
Spot Description: W/2 W/2 NW NE
W2_W2_NW_NE Sec. 36 Twp. 29 S. R. 12 East West
660 Feet from North / South Line of Section
2600 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pratt
Lease Name: Dudrey Well #: 6-36
Field Name: Unnamed
Producing Formation: Mississippian
Elevation: Ground: 1861 Kelly Bushing: 1870
Total Depth: 4783 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 275 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: 72000 ppm Fluid volume: 900 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: Messenger Petroleum
Lease Name: Nicholas SWD License #: 4706
Quarter NE Sec. 20 Twp. 30 S. R. 8 East West
County: Kingman Permit #: D27434

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 Gantso Date: 06/23/2011



1057810

Operator Name: American Energies Corporation Lease Name: Dudrey Well #: 6-36
 Sec. 36 Twp. 29 S. R. 12 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 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: Compensated Density/Neutron Log Dual Induction Log Sonic Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
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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	12.25	8.6250	23	275	Class A	245	2% Gel, 3% CC

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: _____ 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	American Energies Corporation
Well Name	Dudrey 6-36
Doc ID	1057810

Tops

Chase	2014	-144
Tarkio Lime	2998	-1128
Topeka	3387	-1517
Heebner	3746	-1876
Brown Lime	3924	-2054
Stark Shale	4256	-2386
Mississippi	4556	-2886
Mississippi Osage	4615	-2145



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 126879

Invoice Date: Apr 12, 2011

Page: 1

Voice: (785) 483-3887
Fax: (785) 483-5566

Bill To:
American Energies Corp. 155 N. Market Ste. #710 Wichita, KS 67202

2026.001

Customer ID	Well Name# of Customer P.O.	Payment Terms	
Am Eng	Dudrey #8-36	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-01	Great Bend	Apr 12, 2011	5/12/11

Quantity	Item	Description	Unit Price	Amount
245.00	MAT	Class A Common	16.25	3,981.25
5.00	MAT	Gel	21.25	106.25
9.00	MAT	Chloride	58.20	523.80
259.00	SER	Handling	2.25	582.75
14.00	SER	Mileage 249 sx @ .11 per sk per mi	28.49	398.86
1.00	SER	Surface	1,125.00	1,125.00
28.00	SER	Pump Truck Mileage	7.00	196.00
28.00	SER	Light Vehicle Mileage	4.00	112.00
1.00	EQP	8.5/8 Wooden Plug	53.00	53.00
1.00	CEMENTER	David West		
1.00	OPER ASSIST	Greg Redetzke		
1.00	OPER ASSIST	Kevin Welghous		

END MAY -2

Subtotal	7,078.91
Sales Tax	340.49
Total Invoice Amount	7,419.40
Payment/Credit Applied	
TOTAL	7,419.40

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 1,415.90

ONLY IF PAID ON OR BEFORE

May 7, 2011

6003.62

RECD APR 26 2011

ALLIED CFMENTING CO., LLC. 037184

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Great Bend KS

DATE <u>4-12-2011</u>	SEC <u>36</u>	TWP <u>29</u>	RANGE <u>12</u>	CALLED OUT	ON LOCATION	JOB START <u>10:00AM</u>	JOB FINISH <u>6:30AM</u>
LEASE <u>DUPRE</u> WELL # <u>6-36</u> LOCATION <u>Isabel Ks, 1N, 1/2W</u>				COUNTY <u>PRATT</u>	STATE <u>KS</u>		
OLD OR <u>NEW</u> (Circle one)				<u>3/10</u>			

CONTRACTOR Pickell #1 OWNER American Energy

TYPE OF JOB _____
 HOLE SIZE 12 1/4 T.D. 283 CEMENT AMOUNT ORDERED 2455x A + 39000 + 296 gal
 CASING SIZE 85/8 DEPTH 275
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 283
 TOOL _____ DEPTH _____

PRES. MAX 250PSI MINIMUM _____ COMMON 245 @ 16.25 3981.25
 MEAS. LINE _____ SHOE JOINT 15FT POZMIX _____ @ _____
 CEMENT LEFT IN CSG. 15 FT GEL 5 @ 21.25 106.25
 PERFS. _____ CHLORIDE 9 @ 58.20 523.80
 DISPLACEMENT Fresh Water 16 1/2 BBLs ASC _____ @ _____

EQUIPMENT _____
 PUMP TRUCK CEMENTER David _____
#224 HELPER Greg R _____
 BULK TRUCK _____
#341 DRIVER Kevin W _____
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS: _____
 HANDLING 259 @ 2.25 582.75
 MILEAGE 259 X 14 X .11 398.70 398.75
 TOTAL 5592.91

Open Bottom Break Casing
Mix 2455x A + 39000 + 296 gal
Shut Down Relegs Plug Displace
With 16 1/2 BBLs Fresh Water
Shut in cemented casing

SERVICE _____
 DEPTH OF JOB 275 FT
 PUMP TRUCK CHARGE 1125.00
 EXTRA FOOTAGE @ _____
 MILEAGE 28 @ 7.00 196.00
 MANIFOLD @ _____
Light Touch 28 @ 4.00 112.00
 @ _____

CHARGE TO: American Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1,733.00

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT
Wooden Plug @ 53.00 53.00
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL 53.00

PRINTED NAME Mike Kern SALES TAX (If Any) _____
 SIGNATURE Mike Kern TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS _____

REC'D APR 26 2011



PO BOX 31 Russell, KS 67665

INVOICE

Invoice Number: 126983

Invoice Date: Apr 21, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:
American Energies Corp. 155 N. Market Ste. #710 Wichita, KS 67202

2152.001

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Am Eng	Dudley #6-36	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Medicine Lodge	Apr 21, 2011	5/21/11

Quantity	Item	Description	Unit Price	Amount
102.00	MAT	Class A Common	16.25	1,657.50
68.00	MAT	Pozmix	8.50	578.00
6.00	MAT	Gel	21.25	127.50
178.00	SER	Handling	2.25	400.50
15.00	SER	Mileage 178 sx @ .11 per sk per mi	19.58	293.70
1.00	SER	Rotary Plug	1,250.00	1,250.00
30.00	SER	Pump Truck Mileage	7.00	210.00
30.00	SER	Light Truck Mileage	4.00	120.00
1.00	CEMENTER	Matt Thimesch		
1.00	EQUIP OPER	Jason Thimesch		
1.00	EQUIP OPER	Raymond Romans		

END MAY 12

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ 927.44

ONLY IF PAID ON OR BEFORE

May 16, 2011

Subtotal	4,637.20
Sales Tax	338.52
Total Invoice Amount	4,975.72
Payment/Credit Applied	
TOTAL	4,975.72

4048.28

RECD APR 28 2011

ALLIED CEMENTING CO. LLC. 040145

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Malheur

DATE <u>4-21-11</u>	SEC <u>36</u>	TWP. <u>29S</u>	RANGE <u>12W</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30am</u>	JOB FINISH <u>7:30am</u>
LEASE <u>Ordway</u>	WELL # <u>6-36</u>	LOCATION <u>Federal, 1/2, 1/4 sec, State</u>			COUNTY <u>Pratt</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Procell Drilling OWNER American Energy

TYPE OF JOB Rotary Plug
 HOLE SIZE _____ T.D. _____ CEMENT _____
 CASING SIZE _____ DEPTH _____ AMOUNT ORDERED 170 SK 6040:486 gal

TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 690'

TOOL _____ DEPTH _____
 PRES. MAX 300psi MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

COMMON class A 102X @ 16.25 1657.50
 POZMIX 681X @ 8.50 578.00
 GEL 61X @ 21.2 127.30

CHLORIDE _____ @ _____
 ASC _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER not shown
 # 0971265 HELPER Jason Yarnsch
 BULK TRUCK
 # 364 DRIVER Ryan R
 BULK TRUCK
 # _____ DRIVER _____

HANDLING 170 @ 2.25 379.50
 MILEAGE 15.11/170 344.00
 TOTAL 3057.20

REMARKS:

Run pipe to 690' pump 10 bbls flow
mix 50SK down 5 1/2 bbls flow
plug 300' mix 50SK 25% 1/2 bbls flow
plug 60' mix 20SK
mix 30SK for set hole
mix 20SK for set hole

SERVICE

DEPTH OF JOB 690'
 PUMP TRUCK CHARGE _____ 1250.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 30 @ 7.00 210.00
 MANIFOLD _____ @ _____
Light Vehicle 30 @ 4.00 120.00

CHARGE TO: American Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1580.00

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

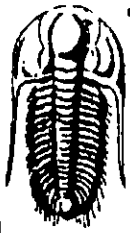
To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (if Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Mike Kern

SIGNATURE Mike Kern

[Signature]



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

American Energies
155 N Market Ste 710
Wichita, KS 67202
ATTN: David Barker

Durdrey #6-36
36-29S-12W Pratt
Job Ticket: 042432 DST#: 2
Test Start: 2011.04.20 @ 04:33:11

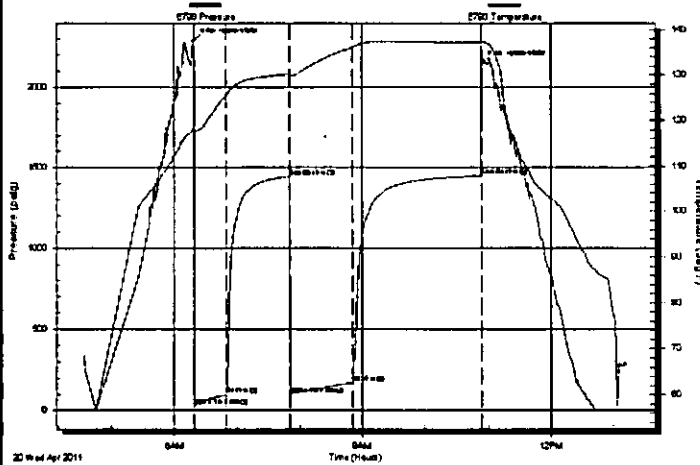
GENERAL INFORMATION:

Formation: **Mississippi**
Deviated: **No** Whipstock: **ft (KB)**
Time Tool Opened: 06:19:11
Time Test Ended: 13:13:56
Interval: **4615.00 ft (KB) To 4626.00 ft (KB) (TVD)**
Total Depth: **4626.00 ft (KB) (TVD)**
Hole Diameter: **7.88 inches** Hole Condition: **Good**
Test Type: **Conventional Bottom Hole**
Tester: **Leal Cason**
Unit No: **45**
Reference Elevations: **1871.00 ft (KB)**
1861.00 ft (CF)
KB to GR/CF: **10.00 ft**

Serial #: 6798 **Inside**
Press@RunDepth: **171.35 psig @ 4616.00 ft (KB)**
Start Date: **2011.04.20** End Date: **2011.04.20**
Start Time: **04:33:12** End Time: **13:13:56**
Capacity: **8000.00 psig**
Last Calib.: **2011.04.20**
Time On Btm: **2011.04.20 @ 06:17:41**
Time Off Btm: **2011.04.20 @ 10:54:11**

TEST COMMENT: IF: Fair Blow, BOB in 26 minutes
IS: No Blow back
FF: Fair Blow, Built to 9 1/2 inches
FS: No Blow back

Pressure vs. Time



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2284.65	118.12	Initial Hydro-static
2	27.84	117.58	Open To Flow (1)
32	95.06	125.55	Shut-in(1)
93	1444.95	130.31	End Shut-in(1)
93	99.00	129.95	Open To Flow (2)
153	171.35	136.09	Shut-in(2)
276	1449.47	137.15	End Shut-in(2)
277	2143.32	137.33	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
185.00	Water	1.47
84.00	SOWCM 2%O 18%W 80%M	1.18
0.00	1800 Feet GIP	0.00

Gas Rates

Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



TRILOBITE
TESTING, INC

DRILL STEM TEST REPORT

FLUID SUMMARY

American Energies
155 N Market Ste 710
Wichita, KS 67202
ATTN: David Barker

Durdrey #6-36
36-29S-12W Pratt
Job Ticket: 042432 **DST#: 2**
Test Start: 2011.04.20 @ 04:33:11

Mud and Cushion Information

Mud Type: Gel Chem	Cushion Type:	Oil API:	deg API
Mud Weight: 9.00 lb/gal	Cushion Length: ft	Water Salinity:	100000 ppm
Viscosity: 42.00 sec/qt	Cushion Volume: bbl		
Water Loss: 11.99 in ³	Gas Cushion Type:		
Resistivity: ohm.m	Gas Cushion Pressure: psig		
Salinity: 4000.00 ppm			
Filter Cake: 0.20 inches			

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
185.00	Water	1.475
84.00	SOWCM 2%O 18%W 80%M	1.178
0.00	1800 Feet GIP	0.000

Total Length: 269.00 ft Total Volume: 2.653 bbl
 Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:
 Laboratory Name: Laboratory Location:
 Recovery Comments:

