



KANSAS CORPORATION COMMISSION 1061019
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 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 #: _____

| | | |
|-----------------------------------|-------------------|---|
| <u>06/17/2011</u> | <u>06/20/2011</u> | <u>06/21/2011</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-003-24886-00-00
Spot Description: _____
NW SW NE SW Sec. 13 Twp. 21 S. R. 20 East West
1757 Feet from North / South Line of Section
3853 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 #: L-20

Field Name: _____
Producing Formation: Squirrel sand
Elevation: Ground: 1067 Kelly Bushing: 0
Total Depth: 730 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 21
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 Garrison Date: 08/09/2011



1061019

Operator Name: Sirius Energy Corp. Lease Name: West Van Winkle Well #: L-20
 Sec. 13 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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

List All E. Logs Run:

Gamma Ray / Neutron / CCL

Log Formation (Top), Depth and Datum Sample

Name Top Datum
 Squirrel sand 660 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 | 724 | OWC | 66 | Kol seal 40% |

| 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 (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift 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 (If vented, Submit ACO-18.) | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|---|

Page: 1

Invoice: 10173224

Special :
 Instructions :
 Sale rep #: JOE

Time: 13:35:15
 Ship Date: 06/17/11
 Invoice Date: 06/17/11
 Due Date: 07/08/11

Acct rep code:

Sold To: SIRIUS ENERGY CORP
 526 COUNTRYPLACE SOUTH
 ABILENE, TX 79606-7032

Ship To: SIRIUS ENERGY CORP
 (325) 685-9152
 (325) 685-9152

Customer #: 0001860

Customer PO:

Order By:

popmg01

8TH
 T 120

| ORDER | SHIP | L | U/M | ITEM# | DESCRIPTION | Alt Price/Uom | PRICE | EXTENSION |
|-------|-------|---|-----|-------|----------------------------|---------------|--------|-----------|
| 30.00 | 30.00 | P | BAG | CPFA | FLY ASH MIX 80 LBS PER BAG | 7.4900 BAG | 7.4900 | 224.70 |
| 36.00 | 36.00 | P | BAG | CPPC | PORTLAND CEMENT-94# | 9.4900 BAG | 9.4900 | 341.64 |

| | | |
|--|--|---|
| FILLED BY _____ CHECKED BY _____ DATE SHIPPED _____ DRIVER _____ | | Sales total \$566.34 Taxable 566.34 Non-taxable 0.00 Sales tax 47.01 |
| SHIP VIA Customer Pick up RECEIVED COMPLETE AND IN GOOD CONDITION x <i>Randy Jeter</i> | | |
| | | TOTAL \$613.35 |

1 - Merchant Copy

