



KANSAS CORPORATION COMMISSION 1062366
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 # 31980
Name: Lotus Operating Company, L.L.C.
Address 1: 100 S: Main, Ste 420
Address 2: _____
City: Wichita State: KS Zip: 67202 + 3737
Contact Person: Tim Hellman
Phone: (316) 262-1077
CONTRACTOR: License # 34233
Name: Maverick Drilling LLC
Wellsite Geologist: Tim Hellman
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>5/24/2011</u>	<u>6/01/2011</u>	<u>6/02/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-097-21693-00-00

Spot Description: _____

 NW NW SE Sec. 1 Twp. 29 S. R. 16 East West
2310 Feet from North / South Line of Section
2310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Kiowa

Lease Name: Dunbar Well #: 1

Field Name: _____

Producing Formation: none

Elevation: Ground: 2053 Kelly Bushing: 2064

Total Depth: 5020 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 290 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: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: Oil Producers Inc. of Kansas

Lease Name: Watson License #: 8061

Quarter SW Sec. 8 Twp. 29 S. R. 15 East West

County: Kiowa Permit #: D24324

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: 09/30/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Deanna Garrison Date: 10/04/2011



1062366

Operator Name: Lotus Operating Company, L.L.C. Lease Name: Dunbar Well #: 1
 Sec. 1 Twp. 29 S. R. 16 East West County: Kiowa

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: Attached	<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	17.5	10.75	32	290	60/40 poz mix	220	2% g, 3% cc

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 Bbbls.	Gas Mcf	Water Bbbls. 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	Lotus Operating Company, L.L.C.
Well Name	Dunbar 1
Doc ID	1062366

All Electric Logs Run

Dual Induction	
Neutron Density w/PE	
Micro	
Sonic	

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Dunbar 1
Doc ID	1062366

Tops

Name	Top	Datum
Heebner	3972	-1908
Brn Lm	4128	-2064
Lansing	4146	-2082
BKC	4511	-2447
Miss	4656	-2592
Viola	4746	-2682
Simp SH	4859	-2795
Arb	4968	-2904
LTD	5020	-2956



PO BOX 31 Russell, KS 67665

RECEIVED

JUN 04 2011

INVOICE

Invoice Number: 127343

Invoice Date: May 25, 2011

Page: 1

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

Bill To:
 Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Dunbar #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Mediche Lodge	May 25, 2011	6/24/11

Quantity	Item	Description	Unit Price	Amount
335.00	MAT	Class A Common	16.25	5,443.75
90.00	MAT	Pozmix	8.50	765.00
4.00	MAT	Gel	21.25	85.00
14.00	MAT	Chloride	58.20	814.80
443.00	SER	Handling	2.25	996.75
35.00	SER	Mileage 443 sx @ .11 per sk per mi	48.73	1,705.55
1.00	SER	Surface	1,125.00	1,125.00
70.00	SER	Pump Truck Mileage	7.00	490.00
70.00	SER	Light Vehicle Mileage	4.00	280.00
1.00	CEMENTER	Darin Franklin		
1.00	EQUIP OPER	Jason Thimesch		
1.00	CEMENTER	David Felio		

ENTERED
 JUN 06 2011

GL# 9208
 DESC. cement surf
CSG
 WELL # Dunbar

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

2341.17

ONLY IF PAID ON OR BEFORE
 Jun 19, 2011

Subtotal	11,705.85
Sales Tax	518.92
Total Invoice Amount	12,224.77
Payment/Credit Applied	
TOTAL	12,224.77

- 2341.17
 19,883.60

ALLIED CEMENTING CO., LLC. 040202

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

SERVICE POINT:

DATE <u>5-28-11</u>	SEC. <u>1</u>	TWP. <u>29S</u>	RANGE <u>16W</u>	CALLED OUT <u>5-24 8:00 pm</u>	ON LOCATION <u>5-24 11:00 pm</u>	JOB START <u>5-25 8:00 am</u>	JOB FINISH <u>5-25 9:00 am</u>
LEASE <u>Dunbar</u>		WELL # <u>Z</u>		LOCATION <u>S4 & Belvidere Blk 7D</u>		COUNTY <u>LeWays</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				<u>4 sears to Rd m, 1/2 e, S into</u>			

CONTRACTOR msverick #106

TYPE OF JOB SURFACC

HOLE SIZE 8 3/4 (17 1/2) I.D. 29'

CASING SIZE 10 3/4 DEPTH 250'

TUBING SIZE 8 3/4 LT DEPTH 10'

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 20'

PERFS. _____

DISPLACEMENT 27 bbls of Fresh water

EQUIPMENT

PUMP TRUCK CEMENTER Dave F

360-265 HELPER Jason T

BULK TRUCK

356-250 DRIVER Dave F

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pipe on bottom & break circulation
pump 3 bbls water shed, mix 275yr
of cement, Displace 27 bbls of
fresh water, shut in, cement did
not circulate, top off with 200sr
of cement

CHARGE TO: Lotus Operating

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME X Cecil E. Farmer

SIGNATURE X Cecil E. Farmer

Thank you!!!

OWNER Lotus Operating

CEMENT

AMOUNT ORDERED 275sr @ 60.1410 + 2% WGA
3% bcc & 200sr class A + 3% bcc

COMMON class A	<u>335sr @ 16.35</u>	<u>5443.75</u>
POZMIX	<u>90sr @ 8.50</u>	<u>765.00</u>
GEL	<u>4sr @ 21.25</u>	<u>85.00</u>
CHLORIDE	<u>14sr @ 50.20</u>	<u>914.80</u>
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING	<u>443</u>	<u>2.25</u>
MILEAGE	<u>35/443/1.11</u>	<u>1705.25</u>
TOTAL		<u>9810.85</u>

SERVICE

DEPTH OF JOB 290'

PUMP TRUCK CHARGE _____ 1125.00

EXTRA FOOTAGE @ _____

MILEAGE 70 @ 7.00 490.00

MANIFOLD @ _____

Swease & Uside @ n/c

Light Vehicle 70 @ 4.00 280.00

TOTAL 1895.00

PLUG & FLOAT EQUIPMENT

none @ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS



PO BOX 31 Russell, KS 67665

RECEIVED

JUN 09 2011

INVOICE

Invoice Number: 127445

Invoice Date: Jun 2, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:
 Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Dunbar #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Medicine Lodge	Jun 2, 2011	7/2/11

Quantity	Item	Description	Unit Price	Amount
126.00	MAT	Class A Common	16.25	2,047.50
84.00	MAT	Pozmix	8.50	714.00
8.00	MAT	Gel	21.25	170.00
219.00	SER	Handling	2.25	492.75
35.00	SER	Mileage 219 sx @ .11 per sk per mi	24.09	843.15
1.00	SER	Rotary Plug	1,250.00	1,250.00
70.00	SER	Pump truck Mileage	7.00	490.00
70.00	SER	Light Vehicle Mileage	4.00	280.00
1.00	CEMENTER	Darin Franklin		
1.00	CEMENTER	David Felio		
1.00	OPER ASSIST	Kevin Weighous		

ENTERED
 JUN 2 2011

GL# 9308
 DESC. Plug well
4/2
 WELL # Dunbar

Subtotal	6,287.40
Sales Tax	458.98
Total Invoice Amount	6,746.38
Payment/Credit Applied	
TOTAL	6,746.38

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

\$ 1257.48

ONLY IF PAID ON OR BEFORE
 Jun 27, 2011

-1,257.48
 5488.90

ALLIED CEMENTING CO., LLC. 040209

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

SERVICE POINT:

Medicine Lodge, KS

DATE <u>6-2-2011</u>	SEC. <u>1</u>	TWP. <u>29S</u>	RANGE <u>16W</u>	CALLED OUT <u>7:00pm</u>	ON LOCATION <u>11:00pm</u>	JOB START <u>3:30pm</u>	JOB FINISH <u>6:30am</u>
LEASE <u>Doubar</u> WELL # <u>1</u>		LOCATION <u>546 Belvedere B/KTP</u>		COUNTY <u>Kiowa</u>		STATE <u>KS</u>	
OLD OR <u>(NEW)</u> (Circle one)				<u>4500 Rm, 1e, 5/1nd</u>			

CONTRACTOR Inguerick 106 OWNER Lotus Operations

TYPE OF JOB Rotary plug

HOLE SIZE 7 7/8 T.D. _____ CEMENT AMOUNT ORDERED 2105x 60' 40' 490.60

CASING SIZE 10 3/4 DEPTH 291'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 5020'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 3 bbls water, 67 bbls mud

EQUIPMENT

PUMP TRUCK CEMENTER Derin F.

352 HELPER Dave F.

BULK TRUCK _____

344 DRIVER Kevin W.

BULK TRUCK _____

_____ DRIVER _____

COMMON 126 SK @ 16.25 2047.50

POZMIX 84 SK @ 8.50 714.00

GEL 8 SK @ 21.25 170.00

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 219 @ 2.25 492.75

MILEAGE 219/35/11 843.15

TOTAL 4267.40

REMARKS:

1st plug - 5020' - Pump 8 bbls water 9 hrs
mix 105x cement, displace 3 bbls water 67 bbls mud
2nd plug - 1356' - Pump 8 bbls water, mix
505x cement, displace 3 bbls water, 10 bbls mud
3rd plug - 310' - Pump 5 bbls water same, mix
805x cement, displace 1 1/2 bbls water
4th plug - 60' - mix 205x cement
Re-hole - mix 305x cement, measure - mix 205x cement

SERVICE

DEPTH OF JOB 5020'

PUMP TRUCK CHARGE 1250.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 70 @ 7.00 490.00

MANIFOLD _____ @ _____

Light Vehicle 70 @ 4.00 280.00

TOTAL 2020.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: Lotus Operations

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME X Becky L. Farmer

SIGNATURE X Becky L. Farmer

SALES TAX (If Any) _____

TOTAL CHARGES 4267.40

DISCOUNT 4267.40 IF PAID IN 30 DAYS



Weatherford®

Completion Systems

DRILL STEM TEST REPORT

Prepared For: **Lotus Operating Co, LLC**

ATTN: Tim Hellman

1-29s-16w Barber

#1 Dunbar

Start Date: 2011.05.30 @ 19:36:37

End Date: 2011.05.31 @ 06:24:37

Job Ticket #: 43856 DST #: 1

ALPINE OIL SERVICES CORPORATION
2460, 240 - 4 Avenue S.W. Calgary, AB. T2P 4H4
ph: 263-7800 fax: 264-7260



Weatherford[®]
Completion Systems

DRILL STEM TEST REPORT

FLUID SUMMARY

Lotus Operating Co, LLC

#1 Dunbar

1-29s-16w Barber

Job Ticket: 43856

DST#: 1

ATTN: Tim Hellman

Test Start: 2011.05.30 @ 19:36:37

Mud and Cushion Information

Mud Type: Gel Chem

Mud Weight: 9.00 lb/gal

Viscosity: 46.00 sec/qt

Water Loss: 11.19 in³

Resistivity: ohm.m

Salinity: 7300.00 ppm

Filter Cake: inches

Cushion Type:

Cushion Length: ft

Cushion Volume: bbl

Gas Cushion Type:

Gas Cushion Pressure: psig

Oil API:

deg API

Water Salinity: ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
10.00	99%M, 1%O	

Total Length: 10.00 ft Total Volume: bbl

Num Fluid Samples: 0

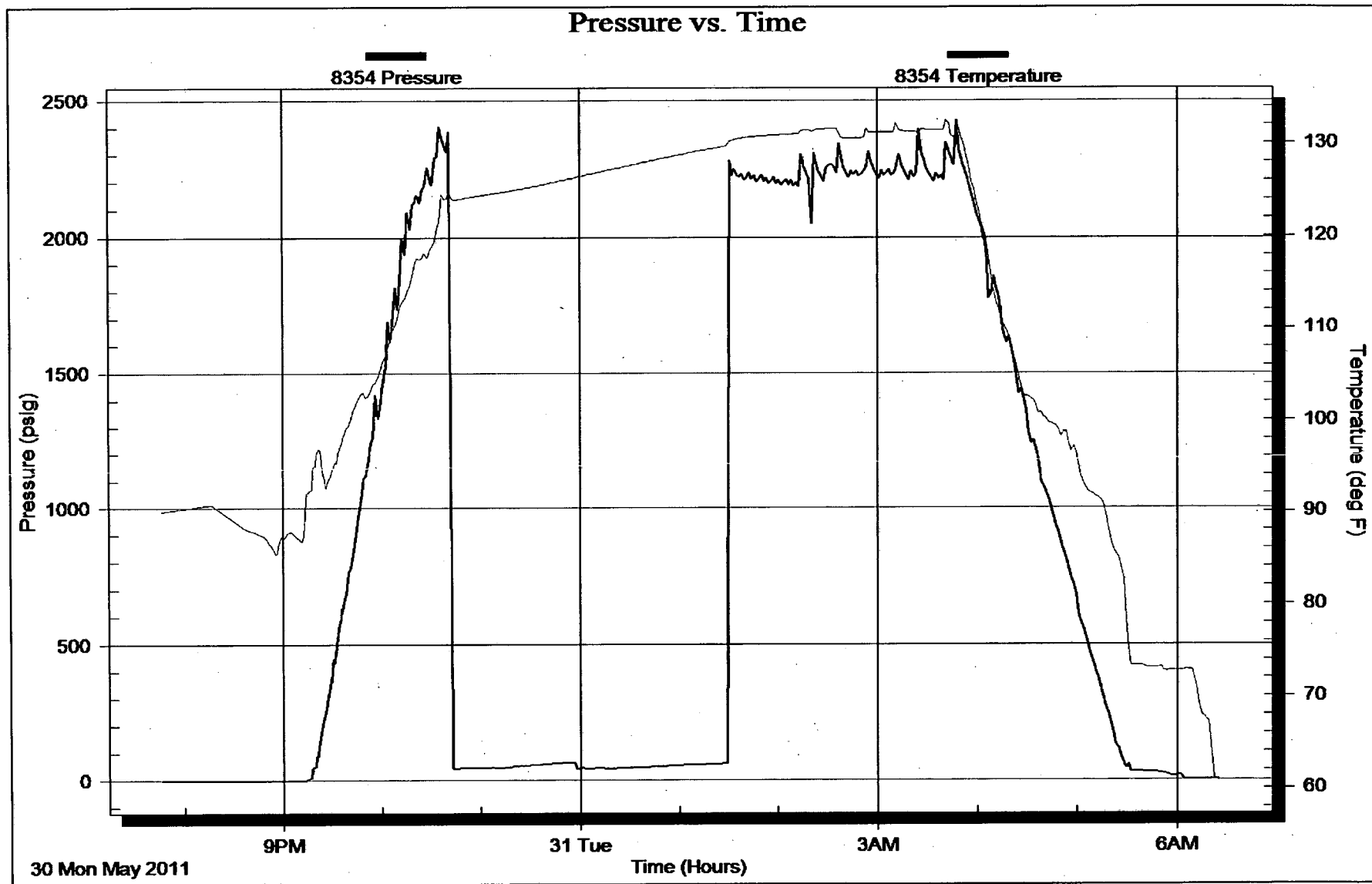
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

September 30, 2011

Tim Hellman
Lotus Operating Company, L.L.C.
100 S. Main, Ste 420
Wichita, KS 67202-3737

Re: ACO1
API 15-097-21693-00-00
Dunbar 1
SE/4 Sec.01-29S-16W
Kiowa County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Tim Hellman

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

October 03, 2011

Tim Hellman
Lotus Operating Company, L.L.C.
100 S. Main, Ste 420
Wichita, KS 67202-3737

Re: ACO-1
API 15-097-21693-00-00
Dunbar 1
SE/4 Sec.01-29S-16W
Kiowa County, Kansas

Dear Tim Hellman:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 5/24/2011 and the ACO-1 was received on September 30, 2011 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department