

KANSAS CORPORATION COMMISSION
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 # 31341
Name: Craig Oil Company
Address 1: 15 South Main
Address 2: _____
City: Russell State: Ks Zip: 67665
Contact Person: Ward Craig
Phone: (785) 483-1543
CONTRACTOR: License # _____
Name: _____
Wellsite Geologist: Francis Whister
Purchaser: PARNOB

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 #: _____
1-6-06 1-18-06 3-3-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-2489-3.00.00
Spot Description: _____
SW-SE-NE Sec. 15 Twp. 16 S. R. 12 East West
2970 Feet from North / South Line of Section
3450 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Barton
Lease Name: Kramer Well #: 5
Field Name: Beaver

Producing Formation: Arbuckle
Elevation: Ground: 1909 Kelly Bushing: 1914
Total Depth: 3519 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 393 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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: allow to Dry and BACKFILL
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

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.

Signature: Ward D Craig
Title: operator Date: 7-29-11

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: _____ Date: _____

RECEIVED 9/2/11
AUG 04 2011

KCC WICHITA

Allied Cementing Co., Inc
P.O. Box 31

Russell, KS 67665

* INVOICE *

Invoice Number: 100206

Invoice Date: 01/12/06

Sold Craig Oil
To: 48 S. Kansas
Russell, KS
67665

Cust I.D.....: Craig
P.O. Number...:
P.O. Date.....: 01/12/06

Due Date.: 02/11/06
Terms.....: Net 30

Item I.D./Desc.	Qty.. Used	Unit	Price	Net	TX
Common	225.00	SKS	8.7000	1957.50	T
Gel	4.00	SKS	14.0000	56.00	T
Chloride	7.00	SKS	38.0000	266.00	T
Handling	236.00	SKS	1.6000	377.60	E
Mileage	30.00	MILE	14.1600	424.80	E
236 sks @.06 per sk per mi					
Surface	1.00	JOB	670.0000	670.00	E
Mileage pmp trk	30.00	MILE	5.0000	150.00	E
Wooden Plug	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 395.69
ONLY if paid within 30 days from Invoice Date

Subtotal: 3956.90
Tax.....: 152.91
Payments: 0.00
Total....: 4109.81

{ 395.69 }

\$ 3714.12

*pd ck # 3442
2-11-06
\$ 3714.12*

RECEIVED
AUG 04 2011
KCC WICHITA

Allied Cementing Co., Inc
P.O. Box 31

Russell, KS 67665

* I N V O I C E *

Invoice Number: 100264

Invoice Date: 01/18/06

Sold Craig Oil
To: 48 S. Kansas
Russell, KS
67665

Cust I.D.....: Craig
P.O. Number...: Kramer #5
P.O. Date.....: 01/18/06

Due Date.: 02/17/06
Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	8.7000	1522.50	T
Handling	175.00	SKS	1.6000	280.00	E
Mileage	30.00	MILE	10.5000	315.00	E
175 sks @.06 per sk per mi					
Longstring	1.00	JOB	1320.0000	1320.00	E
Mileage pmp trk	30.00	MILE	5.0000	150.00	E
T. cents.	8.00	EACH	60.0000	480.00	T
Baskets	2.00	EACH	140.0000	280.00	T
AFU Insert	1.00	EACH	235.0000	235.00	T
Guide Shoe	1.00	EACH	160.0000	160.00	T
Rubber Plug	1.00	EACH	60.0000	60.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$480.25
ONLY if paid within 30 days from Invoice Date

Subtotal: 4802.50
Tax.....: 179.31
Payments: 0.00
Total....: 4981.81

discount taken
(480.25)
\$4501.56

pd ck # 3443
2-17-06
\$4501.56

RECEIVED
AUG 04 2011
KCC WICHITA

Operator Name: Craig Oil Company Lease Name: Kramer Well #: 5
 Sec. 15 Twp. 16 S. R. 12 East West County: Barton

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	- 0 -	NA
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Top KA	2709	- 795
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TORONTO	3014	- 1100
List All E. Logs Run:		LANSING	3098	- 1428
		BASE LANSING	3342	- 1502
		Arbuckle	3416	

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	8.625	24 ^{lb}	393	COMMON	225	Gel 4 Chlendo 7
Long string	7.875	5.5	15.50"	3424	COMMON	175	—

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate	3433			
<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
4	3433 - 3439	HEC Shot	3439

TUBING RECORD:	Size: <u>2 7/8</u>	Set At: <u>3400</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR.	Producing Method:			
<u>Did not Produce</u>	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u>Non Commercial</u>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	<u>0</u>			

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 checked="" 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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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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