

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED ORIGIN

SEP 24 2010

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
Blanks must be Filled

KCC WICHITA

9/23/11

OPERATOR: License # 8914
Name: H & C Oil Operating, Inc.
Address 1: P.O. Box 86
Address 2: _____
City: Plainville State: KS Zip: 67663 + _____
Contact Person: Charles R. Ramsay
Phone: (785) 434-7434
CONTRACTOR: License # 33493
Name: American Eagle Drilling, LLC
Wellsite Geologist: Marc Downing
Purchaser: _____

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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 #: _____

08/16/2010	08/21/2010	08/22/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23668-00-00
Spot Description: _____
SW SW NW Sec. 19 Twp. 6 S. R. 23 East West
2,310 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Stowell Well #: 19-1
Field Name: Wildcat
Producing Formation: none
Elevation: Ground: 2380 Kelly Bushing: 2385
Total Depth: 3885 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 216 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 cml.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: Charles R Ramsay
Title: President Date: 9/23/10

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 9/23/10 - 9/23/11
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: KS Date: 10/11/10
PA

KCC

SEP 23 2010

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Operator Name: H & C Oil Operating, Inc. Lease Name: Stowell Well #: 19-1
 Sec. 19 Twp. 6 S. R. 23 East West County: Graham

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: Microresistivity log, dual compensated porosity log, dual induction, borehole compensated sonic log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Top Anhydrite</td> <td>2082</td> <td>+303</td> </tr> <tr> <td>Base Anhydrite</td> <td>2113</td> <td>+272</td> </tr> <tr> <td>Topeka</td> <td>3410</td> <td>-1025</td> </tr> <tr> <td>Heebner</td> <td>3608</td> <td>-1223</td> </tr> <tr> <td>Toronto</td> <td>3633</td> <td>-1248</td> </tr> <tr> <td>Lansing Kansas City</td> <td>3649</td> <td>-1264</td> </tr> <tr> <td>Base Kansas City</td> <td>3837</td> <td>-1452</td> </tr> </tbody> </table>	Name	Top	Datum	Top Anhydrite	2082	+303	Base Anhydrite	2113	+272	Topeka	3410	-1025	Heebner	3608	-1223	Toronto	3633	-1248	Lansing Kansas City	3649	-1264	Base Kansas City	3837	-1452
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CASING RECORD <input 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#	216	common	150	3%gel, 2%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 (Amount and Kind of Material Used)	Depth

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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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 041744

REFMT TO PO BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell Ks

DATE <i>8-16-10</i>	SEC <i>19</i>	TWP <i>6</i>	RANGE <i>23</i>	CALLED OUT	ON LOCATION	JOB START <i>2:00 PM</i>	JOB FINISH <i>2:30 PM</i>
LEASE <i>Stowell</i>	WELL # <i>19-1</i>	LOCATION <i>Hill City N To RD "CC"</i>		COUNTY <i>Graham</i>	STATE <i>Kansas</i>		
OLD OR <i>(N-B)</i> (Circle one)		WEST TO RD <i>220" 1 1/2 S 1/4 E</i>					

CONTRACTOR *American Eagle Ref #* OWNER _____
 TYPE OF JOB *Cement Surface*
 HOLE SIZE *12 1/4* T.D. *223'*
 CASING SIZE *8 5/8 New* DEPTH *222'*
 TUBING SIZE *23 #* DEPTH _____
 DRILL PIPE DEPTH _____
 TOOL DEPTH _____
 PRES. MAX. MINIMUM _____
 MEAS. LINE SHOULDER JOINT _____
 CEMENT LEFT IN CSG. *15'*
 PERIS _____
 DISPLACEMENT *13 1/4 BBL*

CEMENT AMOUNT ORDERED <i>150 sq Comm</i>	
<i>3% CC</i>	<i>2% Gel</i>
COMMON <i>150</i>	@ <i>1.35 202.50</i>
POZMIX	@
GEL	@ <i>20.25 60.75</i>
CHLORIDE	@ <i>51.50 257.50</i>
ASC	@
HANDLING <i>75</i>	@ <i>2.20 165.00</i>
MILEAGE <i>84/16/2.6</i>	@ <i>3.27 275.58</i>
TOTAL <i>2844.00</i>	

EQUIPMENT

PUMP TRUCK CEMENTER *G'knn*
 # *417* HELPER *Heath*
 BULK TRUCK DRIVER *Ron*
 # *481* DRIVER

REMARKS:

Ran 5 JTS 8 5/8 New 23# CSG. Achieve CIRCULATION & DISPLACED BBL. Mixed Cement, Shot in Cement DID CIRCULATE TO SURFACE. THANKS

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	@ <i>99.00</i>
EXTRA FOOTAGE	@
MILEAGE <i>45</i>	@ <i>2.00 90.00</i>
MANIFOLD	@
TOTAL <i>1705.00</i>	

CHARGE TO: *H. & C. OIL OPERATING*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

SALES TAX (If Any)	
TOTAL CHARGES <i>2844.00</i>	
DISCOUNT <i>2844.00</i>	
TOTAL _____	

IF PAID IN 30 DAYS

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 _____

SIGNATURE: *Bradford Baker*

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