

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 31788
Name: Veenker Resources, Inc.
Address 1: PO Box 14339
Address 2: _____
City: Oklahoma City State: OK Zip: 73113 + _____
Contact Person: Mark Veenker
Phone: (405) 751-1414
CONTRACTOR: License # 5786
Name: McGown Drilling, Inc.
Wellsite Geologist: N/A
Purchaser: _____

API No. 15 - 003-24933-00-00
Spot Description: _____
SW SE NW SE Sec. 32 Twp. 22 S. R. 21 East West
1,590 Feet from North / South Line of Section
1,890 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: Lockwood Well #: 112-VRI
Field Name: Kincaid
Producing Formation: N/A
Elevation: Ground: 1041 Kelly Bushing: 0
Total Depth: 821 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 821
feet depth to: 0 w/ 150 sx cmt.

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 #: E- 16,816
 GSW Permit #: _____
12/17/2010 12/20/2010 1/06/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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 #: **RECEIVED**

JUL 28 2011

KCC WICHITA

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 20781 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: [Signature]
Title: Production Analyst Date: July 26, 2011

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: Dg Date: 10/12/11

Operator Name: Veenker Resources, Inc. Lease Name: Lockwood Well #: 112-VRI
 Sec. 32 Twp. 22 S. R. 21 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	11.25"	7"		21.85'	POZ	8 sx	50/50
casing	6.125"	2.8750"		802.55'			

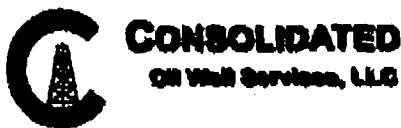
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
		RECEIVED JUL 28 2011 KCC WICHITA	

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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 <i>(Explain)</i> _____
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 checked="" 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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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REMIT TO
 Consolidated Oil Well Services, LLC
 Dept. 970
 P.O. Box 4346
 Houston, TX 77210-4346

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8876
 FAX 620/431-0012

INVOICE

Invoice # 240095

Invoice Date: 03/24/2011 Terms: 0/0/30,n/30

Page 1

VEENKER RESOURCES, INC.
 P.O. BOX 14339
 OKLAHOMA CITY, OK 73113
 (405)751-1414

LOCKWOOD 112VRI, 10VRI, 91VRI
 44877
 32-22-21
 3-21-11

Part Number	Description	Qty	Unit Price	Total
1275	15% HCL	225.00	1.7000	382.50
1202	ACID INHIBITOR	.75	46.0000	34.50
1219B	STIMOIL FBA	.75	40.0000	30.00
1268	CITY WATER	7200.00	.0156	112.32
1215	KCL SUB MB6875 CC3107	7.00	36.5000	255.50
1231	FRAC GEL	250.00	5.2000	1300.00
1208	BREAKER LEB4-ESA 14-GB10	.75	187.0000	140.25
1205A	BIOCIDE (AMA-35-D-P) (DR	6.00	30.0000	180.00
4326	7/8" RUBBER BALL SEALERS	47.00	3.0000	141.00
2101	20/40 BROWN SAND	600.00	.2500	150.00
2102	12/20 BROWN SAND	5400.00	.2700	1458.00

Description	Hours	Unit Price	Total
VALVE FRAC VALVES (2" OR 3")	3.00	100.00	300.00
BALLI BALL INJECTOR	3.00	.00	.00
478 BULK SAND DELIVERY	1.00	.00	.00
T-103 WATER TRANSPORT (FRAC)	3.00	112.00	336.00
T-103 WATER TRANSPORT (FRAC)	3.00	112.00	336.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1250.00	1250.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1250.00	1250.00
524 MINIMUM COMBO CHARGE 1000 HP UNIT	1.00	1250.00	1250.00
524 MILEAGE CHARGE (ONE WAY)	52.00	.00	.00
582 MINIMUM ACID SPOTTING CHARGE	1.00	375.00	375.00
582 MINIMUM ACID SPOTTING CHARGE	1.00	375.00	375.00
582 MINIMUM ACID SPOTTING CHARGE	1.00	375.00	375.00
582 MILEAGE CHARGE (ONE WAY)	52.00	.00	.00

Parts: 4184.07 Freight: .00 Tax: 19.76 AR 10050.83
 Labor: .00 Misc: .00 Total: 10050.83
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLEVILLE, OK
 918/639-0808

ELDORADO, KS
 316/522-7022

EUREKA, KS
 620/583-7884

GILLETTE, WY
 307/686-4914

OAKLEY, KS
 785/672-2227

OTTAWA, KS
 785/242-4044

TRAYER, KS
 620/639-5289

WORLDAM, WY
 307/347-4577



TICKET NUMBER 44877

PO BOX 884 STREET, CHANUTE, KS 66720
820-431-9210 OR 800-467-8676

LOCATION Thayer

#12 URT, 10URT, 91URT FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTY/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
3-21-11	8579	Lockwood		32	22	21	AN	Blville
CHARGE TO <u>Veenker Resources Inc</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

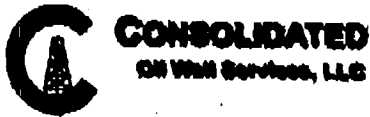
ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102C	1	PUMP CHARGE 1000# Combo 2 nd well	Spec	1250-
5102C	2	1 3 rd -4 th wells	1250.	2500-
5302	3	Acid Spatter		1125-
1275	225	15% HCL Acid		382.50
1202	.75	Inhibitor		34.50
1219B	.75	Stim Oil		30-
1268	7,200	City Water (Balance cust.)		112.32
1215	7	KCL Substitute		255.50
1231	250	Frac Gel		1300-
1208	.75	Breaker		140.25
1205A	6	Stoc rde		180.00
5104	3	Frac Valves		300-
5715	3	Ball Injector		N.C.
4326	47	1/8" Ball Sealers		141.00
BLENDING & HANDLING				
5109	52	TON-MILES Bulk Delivery		-
STAND BY TIME				
5108	52	MILEAGE Mobilization x 2 P's		-
5501F	86	WATER TRANSPORTS Spec. Co.		672.00
VACUUM TRUCKS				
2101	600	FRAC SAND 20/40		150.00
2102	5400	14/20		1458.00
			SALES TAX	19.76
240095-				

ESTIMATED TOTAL 19050.83

CUSTOMER or AGENTS SIGNATURE Dale Maly COWS FOREMAN Greg Winkler

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE 3-21-11

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records at our office, and conditions of services on the back of this form are in effect for services identified on this form.



PO Box 884, Chanute, KS 68720
620-491-9210 or 800-467-8876

2nd well

TICKET NUMBER 51437
FIELD TICKET REF # 44877
LOCATION Thayer
FOREMAN Gary Winkel

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-21-11	8579	Larkwood # 112UR1	32	22	21	AN
CUSTOMER <u>Veener Resources Inc.</u>			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			

WELL DATA

CASING SIZE <u>2 1/2</u>	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<u>752-64</u>	<u>(38) Block</u>

TYPE OF TREATMENT
Acid Spot / Sand Fracture

CHEMICALS

<u>Coaly Weather</u>	<u>75 15% HCl Acid</u>
<u>KCl Sol.</u>	<u>Trilobal</u>
<u>20% Gel Breaker</u>	<u>Stim-O-1</u>
<u>Biocide</u>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI
<u>Pad</u>	<u>15</u>	<u>-16</u>			
<u>20/40</u>				<u>200</u>	BREAKDOWN 1150
<u>12/20</u>				<u>800</u>	START PRESSURE
<u>clean 10 balls</u>					END PRESSURE
<u>12/20 5+8 balls</u>		<u>-15</u>		<u>400</u>	BALL OFF PRESS
<u>12/20</u>				<u>6000</u>	ROCK SALT PRESS
<u>Push</u>					ISIP 586
<u>Kelose balls</u>					5 MIN
<u>Overhaul</u>		<u>16</u>			10 MIN
					15 MIN
					MIN RATE
					MAX RATE
<u>Totals</u>	<u>88</u>			<u>2000</u>	DISPLACEMENT

REMARKS: Spot acid to parts - breakdown and stage

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.