



KANSAS CORPORATION COMMISSION 1066351
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 # 30717
Name: Downing-Nelson Oil Co Inc
Address 1: PO BOX 1019
Address 2: _____
City: HAYS State: KS Zip: 67601 + _____
Contact Person: Ron Nelson
Phone: (785) 621-2610
CONTRACTOR: License # 31548
Name: Discovery Drilling
Wellsite Geologist: Marc Downing
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 #: _____
09/29/2011 10/04/2011 10/05/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-051-26180-00-00
Spot Description: _____
NW SE SW NW Sec. 13 Twp. 14 S. R. 19 East West
2005 Feet from North / South Line of Section
795 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Johnson Well #: 2-13
Field Name: _____
Producing Formation: None
Elevation: Ground: 2151 Kelly Bushing: 2159
Total Depth: 3830 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 223 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: 16000 ppm Fluid volume: 320 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 Carrico Date: 11/01/2011



1066351

Operator Name: Downing-Nelson Oil Co Inc Lease Name: Johnson Well #: 2-13
 Sec. 13 Twp. 14 S. R. 19 East West County: Ellis

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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Attached	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Top Anhydrite</td> <td>1424'</td> <td>+736</td> </tr> <tr> <td>Base Anhydrite</td> <td>1466'</td> <td>+694</td> </tr> <tr> <td>Topeka</td> <td>3172'</td> <td>-1012</td> </tr> <tr> <td>Heebner</td> <td>3419'</td> <td>-1259</td> </tr> <tr> <td>Toronto</td> <td>3438'</td> <td>-1278</td> </tr> <tr> <td>LKC</td> <td>3439'</td> <td>-1304</td> </tr> <tr> <td>BKC</td> <td>3697'</td> <td>-1537</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Top Anhydrite	1424'	+736	Base Anhydrite	1466'	+694	Topeka	3172'	-1012	Heebner	3419'	-1259	Toronto	3438'	-1278	LKC	3439'	-1304	BKC	3697'	-1537
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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 Pipe	12.25	8.0625	23	222.98	Common	150	2% Gel & 3% 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

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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Form	ACO1 - Well Completion
Operator	Downing-Nelson Oil Co Inc
Well Name	Johnson 2-13
Doc ID	1066351

All Electric Logs Run

Compensated Neutron / Density
Dual Induction
Micro
Sonic

ALLIED CEMENTING CO., LLC. 037371

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

SERVICE POINT:
Beet Branch

DATE <u>9-29-11</u>	SEC <u>13</u>	TWP <u>14</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>6:30am</u>	JOB FINISH <u>7:00am</u>
LEASE <u>Johnson</u>		WELL # <u>2-13</u>		LOCATION <u>Hays KS 1 1/2 miles south 4 west</u>		COUNTY <u>Ellis</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)				<u>1/2 south East into</u>			

CONTRACTOR O. Scovary Reg #4

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 225

CASING SIZE 8 5/8 DEPTH 225

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 225

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 150+

PERFS. _____

DISPLACEMENT Freshwater

OWNER Dwain Nelson

CEMENT AMOUNT ORDERED 160.00 Com 3% gel 2% gel

EQUIPMENT

PUMP TRUCK CEMENTER Bob G.

398 HELPER Shane G.

BULK TRUCK

341 DRIVER Dwain

BULK TRUCK

_____ DRIVER _____

COMMON	<u>150</u>	@	<u>16.25</u>	<u>2,437.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>21.25</u>	<u>63.75</u>
CHLORIDE	<u>5</u>	@	<u>58.20</u>	<u>291.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>158</u>	@	<u>2.25</u>	<u>355.50</u>
MILEAGE	<u>158 x 5</u>	@		<u>790.00</u>
TOTAL				<u>3,234.50</u>

REMARKS:

Pipe on bottom was cemented with Reg
made from 160 Com 3% gel 2% gel
Displace with 13.25 bbl Freshwater and
shut in
Cement did Circulate

SERVICE

DEPTH OF JOB	<u>225</u>		
PUMP TRUCK CHARGE			<u>1125.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>Hum 10</u>	@	<u>7.00 70.00</u>
MANIFOLD		@	
<u>Hum 10</u>		@	<u>4.00 40.00</u>
TOTAL <u>1235.00</u>			

CHARGE TO: Dwain Nelson

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

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 [Signature]

SALES TAX (if Any) _____

TOTAL CHARGES 7,469.65

DISCOUNT 20% 893.93 IF PAID IN 30 DAYS

3575.72

Thank you!

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 5181

Date	10-5-11	Sec.	13	Twp.	14	Range	19	County	Ellis	State	Ks	On Location		Finish	8:30AM
Lease	Johnson			Well No.	2-13			Location	Hays, Ks - 1/2 S. to Spring Hill Rd, 4 W to 210th Rd, SE, E/S						
Contractor	Discovery #4							Owner	UW to 210th Rd, SE, E/S						
Type Job	Plug							To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.							
Hole Size	7 7/8"			T.D.	3830'			Charge To	Downing - Nelson						
Csg.								Street							
Tbg. Size	4 1/2" D.P.			Depth	1450'			City	State						
Tool								The above was done to satisfaction and supervision of owner agent or contractor.							
Cement Left in Csg.								Shoe Joint							
Meas Line				Displace	H2O			Cement Amount Ordered	220 SX 60/40 4% Gel 4# Flo-seal						

EQUIPMENT

Pumptrk	1	No.	Cementer	Cisco	Common	132
			Helper			
Bulktrk	3	No.	Driver	Doug	Poz. Mix	88
			Driver			
Bulktrk	pru	No.	Driver	Rick	Gel.	8
			Driver			

JOB SERVICES & REMARKS

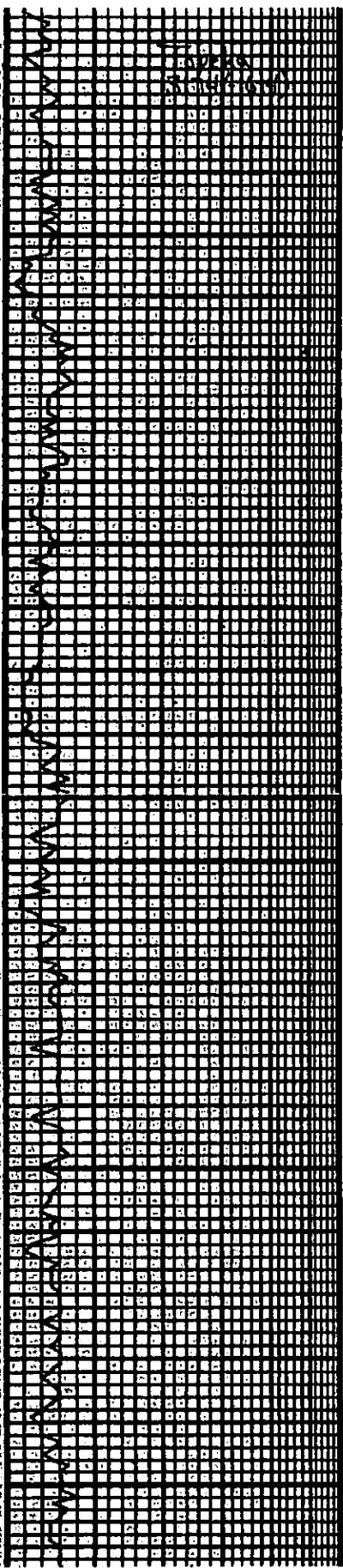
Remarks:	Cement did Circulate.	Calcium
Rat Hole	30sx	Hulls
Mouse Hole	15sx	Salt
Centralizers		Flowseal
Baskets		55 #
DV or Port Collar		Kol-Seal
1450' - 25 sx		Mud CLR 48
720' - 100 sx		CFL-117 or CD110 CAF 38
275' - 40 sx		Sand
40' - 10sx	20' plug	Handling
Rathole - 30sx		228
Mousehole - 15sx		Mileage

FLOAT EQUIPMENT

220 sx 60/40 4% Gel 4# Flo-seal	Guide Shoe
	Centralizer
	Baskets
	AFU: inserts
	Float Shoe
	Latch Down
	1 - Dry hole plug
	Pumptrk Charge plug
	Mileage 6

X Signature *[Handwritten Signature]*

Tax
Discount
Total Charge



3200

50

3300

50

3400

LS: tan, fu-xln, subxl in pt.

Sh: gy

LS: tan, gy, v fu-mic xln, mostly chis, ns

Sh: gy

LS: wht - lt tan, fu-suc xln
sd int xln, scat v smt
occ. Tot barren, no od.

Sh: gy

LS: wht, fu-xln, subxl, ns
Sh: gy

LS: tan, wht, fu-wd xln, subxl, chky, fmg

mtld. Fr int xln, ns.

LS: wht, tan, fu-xln, fu
Fr int xln, sub xl, scat
gy chis, ns.

LS: tan, wht, suc, scat
fss, sub xl, sltly mtld.

Sh: Black Carb

Sh: gy

LS: wht, fu-mic xln, many v chis oc. Scat chky
Pss. All ns.

LS: wht, v fu xln, mostly
prx + chis. Few pss.

Sh: chnta

Sh: gy

LS: wht, tan, prx, fu-wd
xln, chnta, gy fss
Sh: Black Carb

Sh: gy

LS: wht - lt tan, md-fu
xln, fss, Ting fss

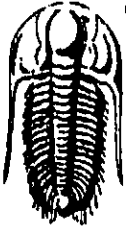
subxl - chky w/
depth. All ns.

Sh: gy - dk gy

LS: wht, fu-wd xln, scat
fss, Fr int xln + pss, f e

cc w/pe, mid blk sty
dnd, ns fss, no od, gy
chnta

LS: wht, tan, fu-wd
xln, sltly mtld, scat



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

DOWNING & NELSON OIL CO INC

13-14S-19W ELLIS

PO BOX 1019
HAYS KS 67601

JOHNSON # 2-13

Job Ticket: 44372

DST#: 1

ATTN: MARC DOWNING

Test Start: 2011.10.03 @ 07:30:00

GENERAL INFORMATION:

Formation: **LKC "C&D"**

Deviated: **No** Whipstock: **ft (KB)**

Time Tool Opened: 09:10:40

Time Test Ended: 13:35:20

Test Type: **Conventional Bottom Hole (Initial)**

Tester: **RANDY WILLIAMS**

Unit No: **37**

Interval: **3477.00 ft (KB) To 3524.00 ft (KB) (TVD)**

Total Depth: **3524.00 ft (KB) (TVD)**

Hole Diameter: **6.78 inches** Hole Condition: **Fair**

Reference Elevations: **2159.00 ft (KB)**

2151.00 ft (CF)

KB to GR/CF: **8.00 ft**

Serial #: **6751**

Outside

Press@RunDepth: **67.88 psig @ 3478.00 ft (KB)**

Start Date: **2011.10.03**

End Date:

2011.10.03

Start Time: **07:30:02**

End Time:

13:35:20

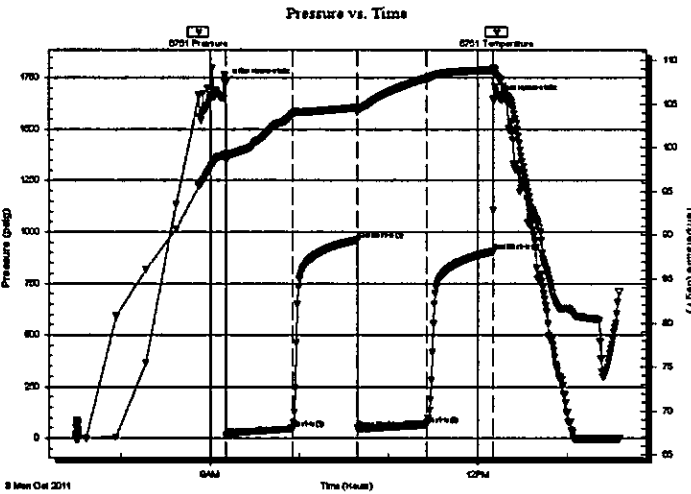
Capacity: **8000.00 psig**

Last Calib.: **2011.10.03**

Time On Btm: **2011.10.03 @ 09:10:30**

Time Off Btm: **2011.10.03 @ 12:10:20**

TEST COMMENT: IF=45, WBB BUILT TO 6 INCHS
IS=45, NBB
FF=45, WBB BUILT TO 5 INCHS
FSI=45, NBB



PRESSURE SUMMARY

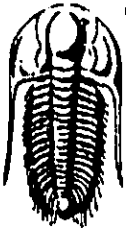
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1728.18	99.27	Initial Hydro-static
1	13.27	98.59	Open To Flow (1)
45	45.31	103.84	Shut-In(1)
89	961.02	104.61	End Shut-In(1)
89	48.83	104.11	Open To Flow (2)
136	67.88	107.93	Shut-In(2)
180	905.22	108.87	End Shut-In(2)
180	1649.75	109.15	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
150.00	MCW, 20% MUD, 80% WATER	1.82

Gas Rates

	Choke (Inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

DOWNING & NELSON OIL CO INC

13-14S-19W ELLIS

PO BOX 1019
HAYS KS 67601

JOHNSON # 2-13

Job Ticket: 44372

DST#: 1

ATTN: MARC DOWNING

Test Start: 2011.10.03 @ 07:30:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

39000 ppm

Viscosity: 54.00 sec/qt

Cushion Volume:

bbl

Water Loss: 9.18 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4000.00 ppm

Filter Cake: 2.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
150.00	MCW, 20% MUD, 80% WATER	1.822

Total Length: 150.00 ft Total Volume: 1.822 bbl

Num Fluid Samples: 0

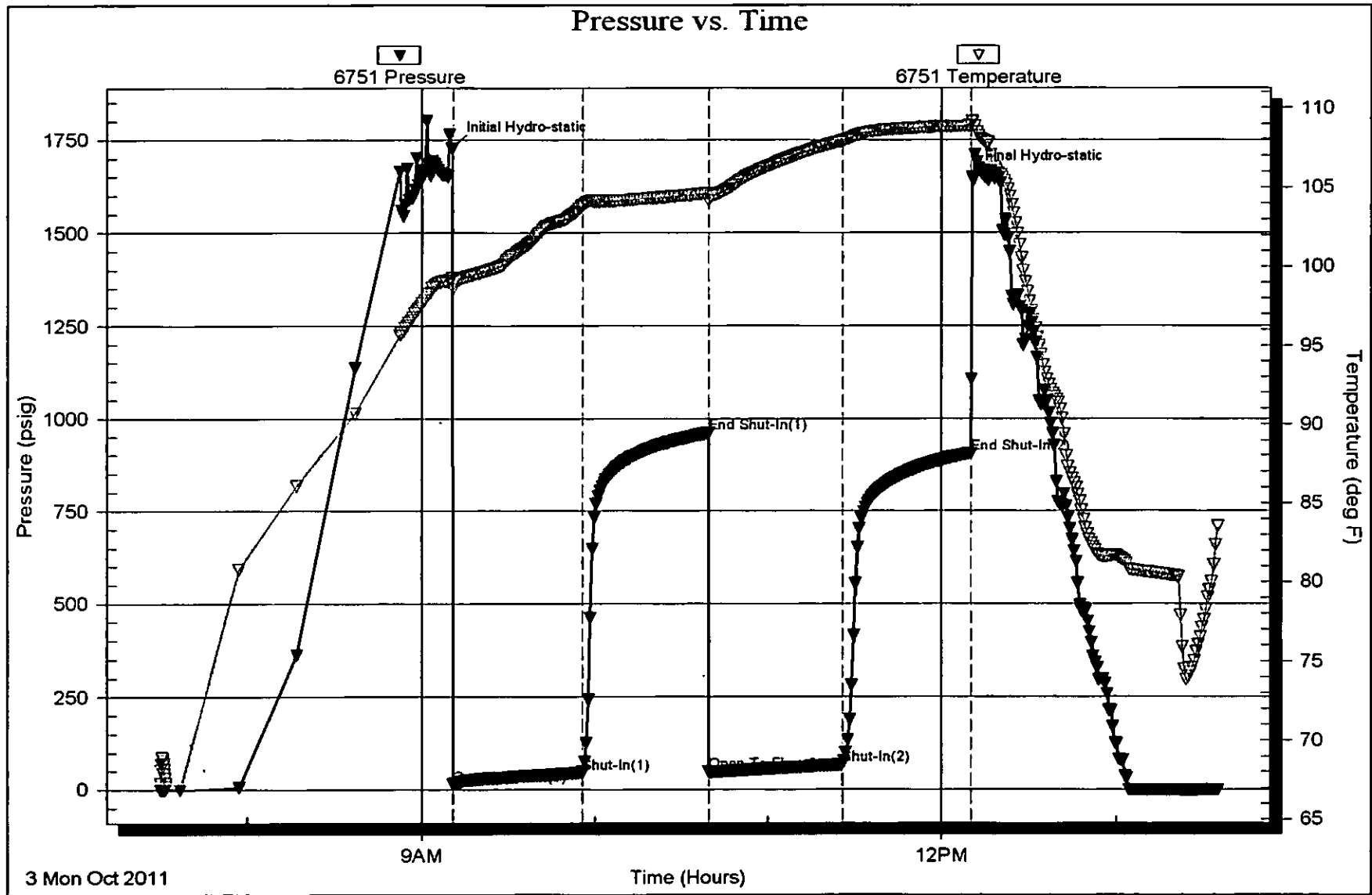
Num Gas Bombs: 0

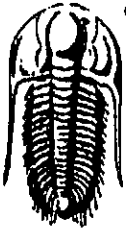
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: CHLORIDES= .077 @ 87F= 39,000





TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

DOWNING & NELSON OIL CO INC

13-14S-19W ELLIS

PO BOX 1019
HAYS KS 67601

JOHNSON # 2-13

Job Ticket: 44373

DST#: 2

ATTN: MARC DOWNING

Test Start: 2011.10.04 @ 09:30:00

GENERAL INFORMATION:

Formation: **COMGLOMERATE**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 11:16:20

Time Test Ended: 14:47:20

Test Type: Conventional Bottom Hole (Initial)

Tester: RANDY WILLIAMS

Unit No: 37

Interval: 3742.00 ft (KB) To 3778.00 ft (KB) (TVD)

Total Depth: 3778.00 ft (KB) (TVD)

Hole Diameter: 6.78 inches Hole Condition: Fair

Reference Elevations: 2159.00 ft (KB)

2151.00 ft (CF)

KB to GR/CF: 8.00 ft

Serial #: 6751

Outside

Press@RunDepth: 32.23 psig @ 3744.00 ft (KB)

Start Date: 2011.10.04

End Date:

2011.10.04

Start Time: 09:30:02

End Time:

14:47:20

Capacity: 8000.00 psig

Last Calib.: 2011.10.04

Time On Btmr 2011.10.04 @ 11:16:10

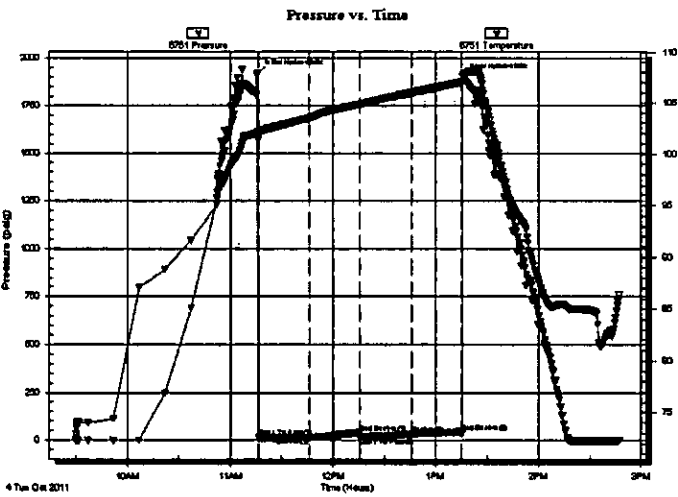
Time Off Btmr 2011.10.04 @ 13:15:50

TEST COMMENT: IF=30, WSB, DIED 15 MINS INTO FLOW

ISI=30, NBB

FF=30, NB

FSI=30, NBB



PRESSURE SUMMARY

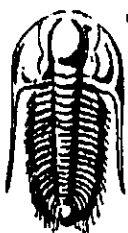
Time (Mn.)	Pressure (psig)	Temp (deg F)	Annotation
0	1922.92	102.23	Initial Hydro-static
1	13.80	101.34	Open To Flow (1)
30	14.16	103.49	Shut-In(1)
60	37.71	104.87	End Shut-In(1)
60	15.31	104.86	Open To Flow (2)
90	32.23	106.03	Shut-In(2)
120	43.90	107.02	End Shut-In(2)
120	1900.18	107.56	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
1.00	MUD	0.00

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

DOWNING & NELSON OIL CO INC

13-14S-19W ELLIS

PO BOX 1019
HAYS KS 67601

JOHNSON # 2-13

Job Ticket: 44373

DST#: 2

ATTN: MARC DOWNING

Test Start: 2011.10.04 @ 09:30:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length: ft

Water Salinity:

ppm

Viscosity: 62.00 sec/qt

Cushion Volume: bbl

Water Loss: 10.37 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure: psig

Salinity: 12000.00 ppm

Filter Cake: 1.50 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
1.00	MUD	0.005

Total Length: 1.00 ft Total Volume: 0.005 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:

