

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 - 003-24932-00-00
Spot Description: _____
NE NE NE SW Sec. 32 Twp. 22 S. R. 21 East West
2,580 Feet from North / South Line of Section
2,390 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Anderson
Lease Name: Cooper-Richard-Frost (CRF) Well #: 112-VRI
Field Name: Kincaid
Producing Formation: N/A
Elevation: Ground: 1034 Kelly Bushing: 0
Total Depth: 820 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 820
feet depth to: 0 w/ _____ sx cmt.

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JUL 28 2011
KCC WICHITA

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 #: _____
12/14/2010 12/17/2010 1/06/2010
Spud Date or Recompletion Date 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 #: _____

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: [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: DJG Date: 8/1/11

Operator Name: Veenker Resources, Inc. Lease Name: Cooper-Richard-Frost (CRF) 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 |
|--|---|

| 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" | | 20' | POZ | 8 sx | 50/50 |
| casing | 6.125" | 2.8750" | | 801.85' | | | |
| | | | | | | | |

| 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 |
| 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 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 (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4348
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
820/431-9210 • 1-800/487-8876
FAX 820/431-0012

INVOICE

Invoice # 240108

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

COOPER RICHARD 112VRI
44876
32-22-21
3-21-11

| Part Number | Description | Qty | Unit Price | Total |
|-------------|--------------------------|---------|------------|--------|
| 1275 | 15% HCL | 75.00 | 1.7000 | 127.50 |
| 1202 | ACID INHIBITOR | .25 | 46.0000 | 11.50 |
| 1219B | STIMOIL FBA | .25 | 40.0000 | 10.00 |
| 1268 | CITY WATER | 3750.00 | .0156 | 58.50 |
| 1215 | KCL SUB MB6875 CC3107 | 4.00 | 36.5000 | 146.00 |
| 1231 | FRAC GEL | 75.00 | 5.2000 | 390.00 |
| 1200 | BREAKER LEB4-ESA 14-GB10 | .25 | 187.0000 | 46.75 |
| 1205A | BIOCIDE (AMA-35-D-P) (DR | 2.00 | 30.0000 | 60.00 |
| 4326 | 7/8" RUBBER BALL SEALERS | 20.00 | 3.0000 | 60.00 |
| 2101 | 20/40 BROWN SAND | 200.00 | .2500 | 50.00 |
| 2102 | 12/20 BROWN SAND | 1800.00 | .2700 | 486.00 |

| Description | Hours | Unit Price | Total |
|---------------------------------------|-------|------------|---------|
| VALVE FRAC VALVES (2" OR 3") | 1.00 | 100.00 | 100.00 |
| BALL BALL INJECTOR | 1.00 | .00 | .00 |
| 478 BULK SAND DELIVERY | 1.00 | 326.56 | 326.56 |
| T-102 WATER TRANSPORT (FRAC) | 2.00 | 112.00 | 224.00 |
| T-103 WATER TRANSPORT (FRAC) | 2.00 | 112.00 | 224.00 |
| 524 MINIMUM COMBO CHARGE 1000 HP UNIT | 1.00 | 1250.00 | 1250.00 |
| 524 MILEAGE CHARGE (ONE WAY) | 52.00 | 4.00 | 208.00 |
| 582 MINIMUM ACID SPOTTING CHARGE | 1.00 | 375.00 | 375.00 |
| 582 MILEAGE CHARGE (ONE WAY) | 52.00 | 4.00 | 208.00 |

Parts: 1446.25 Freight: .00 Tax: 9.24 AR 4371.05
 Labor: .00 Misc: .00 Total: 4371.05
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



PO BOX 884 STREET, CHANUTE, KS 66720
620-431-8210 OR 800-457-8676

TICKET NUMBER 44876

LOCATION Thayer

FIELD TICKET

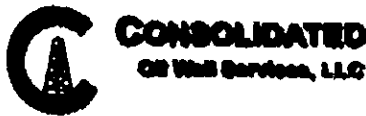
| | | | | | | | | |
|-------------------------------------|-------------------------|-------------------------------------|---------------|---------------|-----------|-----------|------------------|-----------|
| DATE 3-21-11 | CUSTOMER ACCT # 8579 | WELL NAME Copper Richard #12 UKI | QTR/OTR 32 | SECTION 22 | TWP 21 | RGE AN | COUNTY Blaine | FORMATION |
| CHARGE TO Veecker Resources Inc. | | | | 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 1000HP Combo 1 st well | Spec. | 7.50 |
| 5302 | 1 | Acid Sparker | | 375 |
| 1275 | 75 | 15% HCl Acid | | 127.50 |
| 1202 | .25 | Acid Inhibitor | | 11.50 |
| 1219B | .25 | Stim Oil | | 10.00 |
| 1268 | 3,750 | City Water | | 58.50 |
| 1215 | 4 | KCl Substitute | | 146.00 |
| 1231 | 75 | Frac Gel | | 390 |
| 1208 | .25 | Breaker | | 46.75 |
| 1205A | 2 | Biocide | | 60.00 |
| 5104 | 1 | Frac Valve | | 100 |
| 5115 | 1 | Ball Separator | | 60 |
| 4326 | 20 | 8" Ballsealers | | 60 |
| BLENDING & HANDLING | | | | |
| 5109 | 52 | TON-MILES Bulk Delivery | | 326.56 |
| STAND BY TIME | | | | |
| 5108 | 52 | MILEAGE Mobilization + 2 P.S | | 416.00 |
| 5501F | 4 | WATER TRANSPORTS | | 448.00 |
| VACUUM TRUCKS | | | | |
| 2101 | 200 | FRAC SAND 20/40 | | 50 |
| 2102 | 1800 | 12/20 | | 486.00 |
| | | | 240108 7.8% SALES TAX | 9.24 |
| ESTIMATED TOTAL | | | | 4321.01 |

CUSTOMER or AGENTS SIGNATURE Dale Miley COWS FOREMAN Gary Wikel

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 66720
820-431-8210 or 800-467-8876

1st well

TICKET NUMBER 51436
FIELD TICKET REF # 44876
LOCATION Thayer
FOREMAN Geoff Wikel

TREATMENT REPORT
FRAC & ACID

| DATE | CUSTOMER # | WELL NAME & NUMBER | SECTION | TOWNSHIP | RANGE | COUNTY |
|------------------------|------------|------------------------------|----------|----------|---------|--------|
| 3-21-11 | 8599 | Cooper-Richard (CRF) 112010E | 32 | 22 | 21 | AN |
| CUSTOMER | | | TRUCK # | DRIVER | TRUCK # | DRIVER |
| Veenker Resources Inc. | | | 524 | Trampas | | |
| MAILING ADDRESS | | | 478 | Morris | | |
| CITY | | | 582 | ERM | | |
| STATE | | | 488/1102 | Steve | | |
| ZIP CODE | | | 489/1103 | George | | |

WELL DATA

| | |
|-------------------|--------------|
| CASING SIZE | TOTAL DEPTH |
| CASING WEIGHT | PLUG DEPTH |
| TUBING SIZE | PACKER DEPTH |
| TUBING WEIGHT | OPEN HOLE |
| PERFS & FORMATION | |
| 765-78 (41) | 13'ville |

TYPE OF TREATMENT

Acid Spot Sand Fracture

CHEMICALS

| | |
|------------------|-----------------|
| Crly Water | 75 15% HCl Acid |
| 20% Gel, Breaker | Subs |
| 3% Oxide | Subs |
| KCl Sub. | |

| STAGE | BBL'S PUMPED | INJ RATE | PROPPANT PPG | SAND / STAGE | PSI |
|-----------------|--------------|----------|--------------|--------------|------------------|
| Pad | 15 | -16 | | | BREAKDOWN 1300 |
| 20/40 | | | | 200 | START PRESSURE |
| 12/20 | | | | 800 | END PRESSURE |
| clean 5+5 balls | | | | | BALL OFF PRESS |
| 12/20 10 balls | | | | 200 | ROCK SALT PRESS |
| 12/20 | | | | 800 | ISIP 600 |
| Push | | | | | 5 MIN |
| Release balls | | | | | 10 MIN |
| Overhead | 5 | | | | 15 MIN |
| | | | | | MIN RATE |
| | | | | | MAX RATE |
| Totals | 88 | | | 2000 | DISPLACEMENT 4.5 |

REMARKS: Spot acid to parts - breakdown and stage.

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.

le **C** ~~XXXXXXXXXX~~ **FRACTURING WORK ORDER** ~~XXXXXXXXXX~~ **10/10**
Date ~~10/10/11~~ **9:30** Month Day Time

Name of Customer Veener
Contact Person/Number Nale 1 620 490-0596

Well Data

Lease Name/Number _____ Casing Size 2 1/2
Perforations: Est 12 (3) spt 37 Tubing/Packer _____
Depth 750

Zone(s) Butte

Job Procedure: 3 - SPOT + FRAC. 1000 HP
Injection Wells. 1300 HP
20 SICs Run. Acid Pump
 Acid Trailer

S.F.P.S. FTDP

EACH TOTALS Materials PRAG VAN

Hydrochloric Acid: Spot 75-15% Balloff _____ Bullhead _____
 spotter dump tubing

Acid Chemicals: 1 white _____
Stim _____

Frac Sand: 2-3 20/40 17-18 12/20 8/12

Ballsealers: Acid Frac ? SST 15 Balls Rock Salt _____

Frac Fluid: 90 Bbls City 100 70 80 80
Transports 2
Frac Tanks _____
80 vac. _____

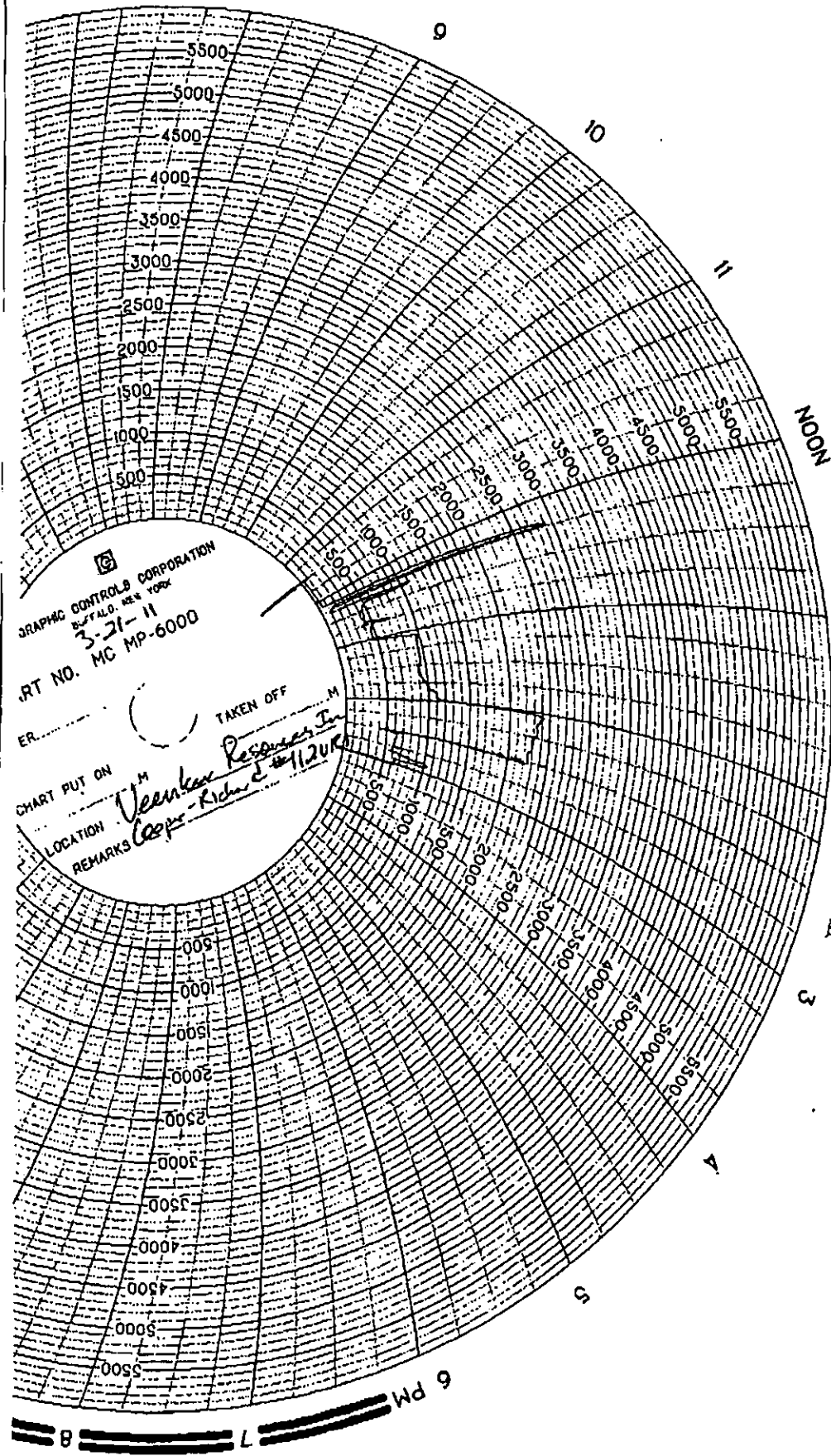
Fluid Loading: 20# gel 1 ppt - 4 gal.
2# KCL 1/2 ppt - 2#
Biocide

Other Information: 100 bbls for water connection for 3rd frac.

Job Location: Lincoln - 2 E Ave 31 Hwy - rd side

Order Taken by: Beel

Invoice # _____
Entered by _____



6 PM 9
 8
 7