

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

10/20/11

OPERATOR: License # 5144  
 Name: Mull Drilling Company, Inc.  
 Address 1: 1700 Waterfront Parkway, Bldg #1200  
 Address 2: \_\_\_\_\_  
 City: Wichita State: KS Zip: 67206 + 6637  
 Contact Person: Mark Shreve  
 Phone: ( 316 ) 264-6366  
 CONTRACTOR: License # 5929  
 Name: Duke Drilling Company, Inc.  
 Wellsite Geologist: Kevin Kessler  
 Purchaser: Plains Marketing  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  ENHR  SIGW  
 Gas  CM (Coal Bed Methane)  Temp. Abd. OCT 20 2009  
 Dry  Other \_\_\_\_\_  
 (Core, WSW, Expl., Cathodic, etc.)

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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  
 Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled Docket No.: \_\_\_\_\_  
 Dual Completion Docket No.: \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No.: \_\_\_\_\_  

<u>6/26/09</u>	<u>7/8/09</u>	<u>8/4/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

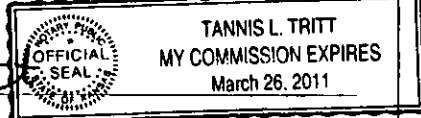
API No. 15 - 063-21779-00-00  
 Spot Description: \_\_\_\_\_  
NE SE NE SE Sec. 13 Twp. 15 S. R. 27  East  West  
1811 Feet from  North /  South Line of Section  
231 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: Gove  
 Lease Name: Garvey Unit Well #: 1-13  
 Field Name: Garvey Ranch  
 Producing Formation: Mississippian  
 Elevation: Ground: 2458' Kelly Bushing: 2467'  
 Total Depth: 4425' Plug Back Total Depth: 4375'  
 Amount of Surface Pipe Set and Cemented at: 210' Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: 1906' Feet  
 If Alternate II completion, cement circulated from: 1906'  
 feet depth to: surface w/ 150 sx cmt.

Drilling Fluid Management Plan AM II NS 11-6-09  
 (Data must be collected from the Reserve Well)  
 Chloride content: 26,000 ppm Fluid volume: 1,000 bbls  
 Dewatering method used: Evaporation  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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.

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: \_\_\_\_\_  
 Title: President/COO Date: 10/20/09  
 Subscribed and sworn to before me this 20th day of October  
09  
 Notary Public: Dannis Redick  
 Date Commission Expires: 3-26-2011



**KCC Office Use ONLY**

Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

**RECEIVED**  
**OCT 21 2009**  
**KCC WICHITA**

Operator Name: Mull Drilling Company, Inc. Lease Name: Garvey Unit Well #: 1-13  
 Sec. 13 Twp. 15 S. R. 27  East  West County: Gove

**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 copy of all Electric Wireline 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 <i>(Submit Copy)</i>  List All E. Logs Run: <b>Superior: CDL/CNL; DIL; Sonic &amp; Micro</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1883</td> <td>+ 584</td> </tr> <tr> <td>B/Anhydrite</td> <td>1920</td> <td>+ 547</td> </tr> <tr> <td>Heebner Shale</td> <td>3669</td> <td>- 1202</td> </tr> <tr> <td>Lansing</td> <td>3708</td> <td>- 1241</td> </tr> <tr> <td>B/KC</td> <td>4008</td> <td>- 1541</td> </tr> <tr> <td>Cherokee Shale</td> <td>4232</td> <td>- 1765</td> </tr> <tr> <td>Mississippian</td> <td>4301</td> <td>- 1834</td> </tr> </table>	Name	Top	Datum	Anhydrite	1883	+ 584	B/Anhydrite	1920	+ 547	Heebner Shale	3669	- 1202	Lansing	3708	- 1241	B/KC	4008	- 1541	Cherokee Shale	4232	- 1765	Mississippian	4301	- 1834
Name	Top	Datum																							
Anhydrite	1883	+ 584																							
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Cherokee Shale	4232	- 1765																							
Mississippian	4301	- 1834																							

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"	20#	210'	Common	160	2% gel, 3% cc
Production	7 7/8"	5 1/2"	15.5#	4423'	50/50 Poz	110	
<b>CONFIDENTIAL</b>							

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
	1906'-Surface	SMD	150	<b>KCC</b>

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	4332' - 4333'		
<b>RECEIVED</b>			
<b>OCT 21 2009</b>			
<b>KCC WICHITA</b>			

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>4346'</u> Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>8/4/09</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. <u>35</u>	Gas Mcf <u>0</u>	Water Bbls. <u>31</u> Gas-Oil Ratio <u>N/A</u> Gravity <u>37.1</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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	---	--



CHARGE TO:  
**MULL DRUG. Co. Inc**  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

TICKET  
 No. **16333**  
 PAGE 1 OF 2

SERVICE LOCATIONS 1. <b>NESS CITY, KS</b>	WELL PROJECT NO. <b>1-13</b>	LEASE <b>GARVEY UNIT</b>	COUNTY/PARISH <b>GOVE</b>	STATE <b>KS</b>	CITY	DATE <b>7-9-09</b>	OWNER <b>SAME</b>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>DUKE DRUG #4</b>	RIG NAME/NO.	SHIPPED VIA <b>CT</b>	DELIVERED TO <b>LOCATION</b>	ORDER NO.	
3.	WELL TYPE <b>OIL</b>	WELL CATEGORY <b>DEVELOPMENT</b>	JOB PURPOSE <b>5 1/2" LONGSTRENGTH</b>	WELL PERMIT NO.	WELL LOCATION <b>S/O QUINCY, KS - CO. 10, 2N, W</b>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	UOM	QTY.	UOM	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 114	50	ME			5.00	250.00
578		1			PUMP CHARGE	1	JOB	4423	FT	1400.00	1400.00
280		1			FLOCHECK 21	1000	GAL			2.50	2500.00
402		1			CENTRALIZERS	12	EA	5 1/2"		55.00	660.00
403		1			CEMENT BASKET	1	EA			180.00	180.00
404		1			PORT COLLAR TOP JOINT # 58	1	EA	1906	FT	1900.00	1900.00
406		1			CATCH DOWN PLUG - RAFFIE	1	EA			225.00	225.00
407		1			INSERT FLOAT SHADE W/ AUTO FILL	1	EA			275.00	275.00
419		1			ROTATING HEAD RENTAL	1	JOB			150.00	150.00

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 OCT 21 2009  
 KCC WICHITA

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: **7-9-09** TIME SIGNED: **0700** BY: **AM**

REMIT PAYMENT TO:

SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL #1	7540.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#2	2034.13
WE UNDERSTOOD AND MET YOUR NEEDS?				sub total	9574.13
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX	523.00
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Gove 7.05%	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	10,097.13
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this invoice.

SWIFT OPERATOR: **WAVE WIZSON** APPROVAL:

Thank You!



**JOB LOG**

**SWIFT Services, Inc.**

DATE 7-9-09 PAGE NO. 1

CUSTOMER  
MILL DRUG Co. ZAC

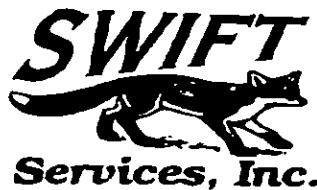
WELL NO.  
1-13

LEASE  
GADNEY WZT

JOB TYPE  
5 1/2" LONGSTRONG

TICKET NO.  
16333

CHART NO.	TIME	RATE (BPM)	VOLUME (BB) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0700							ON LOCATION
	0900							START 5 1/2" CASING IN WELL
								TD-4425 SET = 4423
								TP-4423 5 1/2" #/FT 14 - 15.5
								ST-39'
								CENTRALIZERS - 1,2,3,4,5,6,7,8,9,10,11,57
								CMT BSKT - 58
								PORT COVER = 1906' TOP JT # 58
	1135							DROP BALL - CIRCULATE ROTATE
	1300	6	5		✓		400	PUMP SPACER "
	1301	6	24		✓		400	PUMP 1000 GAL FLOCHECK-21 " CONFIDENTIAL
	1305	6	5		✓		400	PUMP SPACER OCT 20 2009 "
	1306		7					PLUG RH (3055) KCC
	1308	4	25.3		✓		150	MAX COMET (11055) 50/50 P02 = 14.38 MG "
	1318							WASH OUT PUMP - LINES
	1319							RELEASE CATCH DOWN PLUG RECEIVED
	1320	7	0		✓			DISPLACE PLUG OCT 21 2009 "
		7	95				625	SHUT OFF ROTATING KCC WICHITA
	1335	6 1/2	104.9				1500	PLUG DOWN - PSE UP CATCH IN PLUG
	1337						OK	RELEASE PSE - HELD WASH TRUCK
	1430							JOB COMPLETE
								THANK YOU WALJE, BRETT, DAVE



CHARGE TO: Mull Drly Co  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

TICKET  
 No 16090

PAGE 1 OF 1

SERVICE LOCATIONS  
 1. Hays Ks  
 2. Ness City, Ks  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_

WELL/PROJECT NO. # 1-23 LEASE Garvey Unit COUNTY/PARISH CG STATE Ks CITY \_\_\_\_\_ DATE 7-17-09 OWNER Same

TICKET TYPE  SERVICE  SALES CONTRACTOR Fritzlers Well Service RIG NAME/NO. \_\_\_\_\_ SHIPPED VIA ET DELIVERED TO Location ORDER NO. \_\_\_\_\_

WELL TYPE oil WELL CATEGORY Development JOB PURPOSE Port Collar WELL PERMIT NO. \_\_\_\_\_ WELL LOCATION \_\_\_\_\_

REFERRAL LOCATION \_\_\_\_\_ INVOICE INSTRUCTIONS \_\_\_\_\_

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LDC	ADCT	DF			UM		UM	
575		1			MILEAGE #111	50	mi	5	100	250.00
576D		1			Pump Charge (Port Collar)	1	cu	1908	1100	1100.00
100		2			Pickup Mileage	50	mi	2	100	100.00
105		2			Port Collar Tool Rental w/men	1	cu	300	1.00	300.00
290		1			D-Air	2	gal	35	1.00	70.00
330		2			SMD Cement	175	sks	14	1.40	2450.00
276		2			Floccle	50	#	1	1.50	75.00
581		2			Cement Service Charge	200	sks	1	1.50	300.00
583		2			Drayage	489	SHA	1	1.00	489.00

RECEIVED  
 OCT 21 2009  
 KCC WICHITA

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED 7-17-09 TIME SIGNED 1145  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	5134.00
Govt TAX 7.05%	204.10
<b>TOTAL</b>	<b>5338.10</b>

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES  
 SWIFT OPERATOR Nick Koche APPROVAL \_\_\_\_\_

Thank You!

07/27/2009 13:30 FAX 7197678994 MDC-CHEY\_WELLS.CO MDC WICHITA 001/002

**JOB LOG**

**SWIFT Services, Inc.**

DATE 7-17-09 PAGE NO. 1  
 TICKET NO. 16090

CUSTOMER Mull Drly Co. WELL NO. # 1-13 LEASE Garvey Unit JOB TYPE Port Collar

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0945							valve set up Trks
								2 7/8" x 5 1/2"
								P.C. 1906
								Locate P.C.
	1030						1000	Test Csg
								Open P.C.
	1045	3.5	5			0		Take injection rate / check for blow
	1040	4	0			200		Start Cement 175 sks SMD
		4	85			350		circ. Cement raise weight
		4	90/0			350		End Cement / start Displacement
	1115		10					Cement Displaced
								Clear P.C.
							1000	Test Csg.
								Run 5 ft
	1128	3	0				150	Reverse out
	1135		20					Hole Clean
								wash up Trk
								RECEIVED
								OCT 21 2009
								KCC WICHITA
								175 sks SMD
								circ 25 sks to pit
								Thank you
								Nick, Josh F., Dave K & New guy

CONFIDENTIAL  
 OCT 20 2009  
 KCC

# ALLIED CEMENTING CO., LLC. 043636

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

SERVICE POINT:  
Oakley

DATE <u>6-29-09</u>	SEC. <u>13</u>	TWP. <u>153</u>	RANGE <u>22W</u>	CALLED OUT	ON LOCATION <u>5:00p.m</u>	JOB START <u>7:00p.m</u>	JOB FINISH <u>7:30p.m</u>
LEASE <u>Garvey unit 4</u>	WELL # <u>1-13</u>	LOCATION <u>Quinter 205 Rd F 1W</u>			COUNTY <u>Gove</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>		<u>1/25 W + N INTO</u>					

CONTRACTOR <u>Duke Drilling Rig 4</u>	OWNER <u>same</u>
TYPE OF JOB <u>Surface</u>	
HOLE SIZE <u>12 1/4</u> T.D. <u>210'</u>	CEMENT
CASING SIZE <u>8 5/8</u> DEPTH <u>210.51</u>	AMOUNT ORDERED <u>160 sks com</u>
TUBING SIZE DEPTH	<u>300 2% gel</u>
DRILL PIPE DEPTH	
TOOL DEPTH	
PRES. MAX MINIMUM	COMMON <u>160 sks @ 13.65 2184.00</u>
MEAS. LINE SHOE JOINT	POZMIX @

CEMENT LEFT IN CSG. <u>15'</u>	CONFIDENTIAL	GEL <u>3 sks @ 20.80 62.40</u>
PERFS.		CHLORIDE <u>6 sks @ 57.15 342.90</u>
DISPLACEMENT <u>12.45</u>	OCT 20 2008	@

EQUIPMENT <u>KCC</u>	@
PUMP TRUCK CEMENTER <u>Andrew</u>	@
# <u>423-281</u> HELPER <u>Larene</u>	@
BULK TRUCK	@
# <u>347</u> DRIVER <u>Walt</u>	@
BULK TRUCK	@
# DRIVER	@
HANDLING <u>169 sks @ 2.10 354.90</u>	
MILEAGE <u>108 sk/mile 574.60</u>	

REMARKS: TOTAL 3518.80

Cement did circulate

Thank you

SERVICE

DEPTH OF JOB <u>210.51</u>	
PUMP TRUCK CHARGE <u>999.00</u>	
EXTRA FOOTAGE @	
MILEAGE <u>34 miles @ 7.00 238.00</u>	
MANIFOLD @	
@	
@	

CHARGE TO: Mull Drilling CO

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL 1237.00

PLUG & FLOAT EQUIPMENT

<u>8 5/8</u>	
<u>1 surface plug @ 62.00</u>	
@	
@	
@	
@	

TOTAL 62.00

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.

SALES TAX (If Any) \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME Rich Wheeler

SIGNATURE Rich Wheeler