



KANSAS CORPORATION COMMISSION 1066865
OIL & GAS CONSERVATION DIVISION

Form AGO-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 # 34239
Name: Thornberry Family Partnership Ltd.
Address 1: PO Box 469
Address 2: _____
City: New Waverly State: TX Zip: 77358 + _____
Contact Person: Jonathon Thornberry
Phone: (936) 344-7000
CONTRACTOR: License # 31519
Name: Jackson, Leland dba Lone Jack Oil Co.
Wellsite Geologist: N/A
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 #: _____

<u>06/02/2011</u>	<u>06/04/2011</u>	<u>06/08/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-107-24349-00-00

Spot Description: _____
NE SE SW NW Sec. 10 Twp. 23 S. R. 22 East West

3030 Feet from North / South Line of Section

4145 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Linn

Lease Name: Wier-Hagman Well #: 2-T

Field Name: _____

Producing Formation: Bartlesville

Elevation: Ground: 1018 Kelly Bushing: 0

Total Depth: 647 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: 631
feet depth to: 0 w/ 90 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 160 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 Garrisor Date: 11/21/2011



1066865

Operator Name: Thornberry Family Partnership Ltd. Lease Name: Wier-Hagman Well #: 2-T
 Sec. 10 Twp. 23 S. R. 22 East West County: Linn

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Name</td> <td style="width:25%;">Top</td> <td style="width:25%;">Datum</td> </tr> <tr> <td>Bartlesville</td> <td>588</td> <td>609</td> </tr> </table>	Name	Top	Datum	Bartlesville	588	609
Name	Top	Datum					
Bartlesville	588	609					

CASING RECORD <input type="checkbox"/> New <input checked="" 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	9.875	6.25	18	20	Type II	5	N/A
Long String	5.625	2.875	6.5	587	Type II	90	N/A

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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DIEBOLT LUMBER AND SUPPLY INC.
 2661 Nebraska Road
 La Harpe, Kansas 66751
 FAX: (620) 496-2226
 PHONE: (620) 496-2222



CUST NO: 5 JOB NO: 000 PURCHASE ORDER: REFERENCE: 66010 TERMS: CASH/CHECK/BANKCARD CLERK: RS DATE/TIME: 6/2/11 10:05

TERMINAL: 554

SOLD TO:
CASH

SHIP TO:
LELAND JACKSON

SALESPERSON: RS ROLAND SUTTERBY
 TAX: 001 KANSAS TAX

INVOICE: 162090

LINE	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	LOCATION	UNITS	PRICE / PER	EXTENSION
1		5	BG	94PC	94# TYPE I PORTLAND CEMENT	2	5	9.65 /BG	48.25 *
					<i>Wen # 2-T</i>				

** PAID IN FULL **

51.89	TAXABLE	48.25
	NON-TAXABLE	0.00
	SUBTOTAL	48.25

CHECK PAYMENT
 CK# 3837

51.89	TAX AMOUNT	3.64
TOTAL		51.89

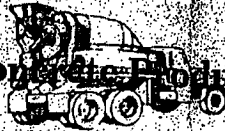


TOT WT: 470.00

X _____
 Received By

502 N. Industrial Rd
 P.O. Box 664
 Iola, Kansas 66749
 Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
 Concrete to be delivered to the nearest accessible point over passing road under truck's own power. Due to delivery of owner's or intermediary's direction, seller assumes no responsibility for damages to any margin to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength of mix indicated. We do not assume responsibility for strength test when water is added at customer's request.

NOTICE TO OWNER
 Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

SOLD TO:

ORDER NO. 06-08-11
 CASH/INVOICE

SHIP TO:

SHIP TO: [Redacted]

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	% CAL	DRIVER/TRUCK	% AIR	PLAN/TRANSACTION
12:11:40p	WELL	9.00 yd	9.00 yd	0.00	ZR 35	0.00	LINCO
DATE	LOAD	YARDS DEL	BATCH#	WATER/TRIM	SLUMP	TICKET NUMBER	
06-08-11	o Date today	1 9.00 yd	16973	0/yd -70.0	4.00 in	29256	

WARNING
 IRRITATING TO THE SKIN AND EYES.
 CONCRETE IS A PERISHABLE COMMODITY AND REMAINS THE PROPERTY OF THE PURCHASER UPON LEAVING THE PLANT. ANY CHANGES OR CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.
 The undersigned promises to pay all costs, including reasonable attorney's fees, incurred in collecting any sums owed.
 All accounts not paid within 30 days of delivery will bear interest at the rate of 24% per annum.
 No Responsibility for Retention of Color Quality. No Claim Allowed Unless Made at Time Material is Delivered.
 A 12% Service Charge and Loss of the Cash Discount will be collected on all Returned Checks.
 Excess Delay Time Charge @ 350/Hr.

PROPERTY DAMAGE RELEASE
 (TO BE SIGNED IF DELIVERY TO BE MADE (INSIDE CURB LINE)
 Dear Customer-The driver of this truck in presenting this RELEASE to you for your signature is of the opinion that the size and weight of the truck may possibly cause damage to the premises and/or adjacent property if it places the material in the load where you desire it. It is our wish to help you in every way that we can, but in order to do this the driver is requesting that you sign this RELEASE retaining him and the supplier from any responsibility for any damage that may occur to the premises and/or adjacent property: buildings, driveways, sidewalks, etc., by the delivery of this material; and that you also agree to help him remove mud from the wheels of his vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and his supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.
 SIGNED: X _____

Excessive Water is Detrimental to Concrete Performance
 H₂O Added By Request/Authorized By
 GAL X
 WEICHMASTER
 NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.
 LOAD RECEIVED BY: X *[Signature]*

QUANTITY	CODE	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
9.00	WELL	WELL (10 SACKS PER UNIT)	9.00	76.00
3.00	TRUCKING	TRUCKING CHARGE	3.00	50.00
				684.00
				150.00

well - Hogman
well - 2-T

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION/CYLINDER TEST TAKEN	TIME ALLOWED
		1:34	1. JOB NOT READY 2. SLOW POUR OR PUMP 3. TRUCK AHEAD ON JOB 4. CONTRACTOR BROKE DOWN 5. ADDED WATER 6. TRUCK BROKE DOWN 7. ACCIDENT 8. CITATION 9. OTHER	
LEFT PLANT	ARRIVED JOB	START UNLOADING		
7:25	1:12	1:20		
TOTAL ROUND TRIP	TOTAL AT JOB	UNLOADING TIME		

Subtotal \$ 834.00
 Tax % 6.300 52.54
 Total \$ 886.54
 Order \$ 886.54
 ADDITIONAL CHARGE 1 _____
 ADDITIONAL CHARGE 2 _____
GRAND TOTAL ▶

PAYLESS CONCRETE PRODUCTS, INC.

P.O. BOX 664
802 N. INDUSTRIAL RD.
IOLA, KS 66749

Voice: 620-365-5588
Fax:

INVOICE

Invoice Number: 29256
Invoice Date: Jun 8, 2011
Page: 1
Duplicate

Bill To:
CASH FOR C.O.D.'S 802 N. INDUSTRIAL RD. IOLA, KS 66749

Ship to:
LONEJACK OIL CO. 509 E WALNUT BLUEMOUND, KS 66010

Customer ID	Customer PO	Payment Terms	
CASH/C.O.D.	LONJACK/WEIRHAGMAN2T	C.O.D.	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	TRUCK		6/8/11

Quantity	Item	Description	Unit Price	Amount
90.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX	7.60	684.00
2.00	TRUCKING	TRUCKING CHARGE	50.00	100.00

pd

Subtotal	784.00
Sales Tax	49.39
Total Invoice Amount	833.39
Payment/Credit Applied	
TOTAL	833.39

Check/Credit Memo No:

Lone Jack Oil Company
509 East Walnut
Blue Mound, KS 66010

Invoice

Date	Invoice #
6/10/2011	1261

Bill To
Jonathan Thornberry P.O. Box 469 New Waverly, TX 77358

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	Weir Hagman Lease T-2		
1	6/8/11, Well #2-T, circulated 90 sacks of cement to surface, pumped plug and shut in.	600.00	600.00T
1	water truck	100.00	100.00T
	Sales Tax	6.30%	44.10
Thank you for your business.		Total	\$744.10