

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACD-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

ORIGINAL

OPERATOR: License # 31847
Name: Bradley Oil Company
Address 1: POBox 21614
Address 2: _____
City: Oklahoma City State: OK Zip: 73156 + 1614
Contact Person: Bradd Schwartz
Phone: (405) 823-8136
CONTRACTOR: License # 33734
Name: Hat Drilling Company
Wellsite Geologist: none
Purchaser: Pacer Energy

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 #: _____

GSW Permit #: _____

<u>08/10/2011</u>	<u>08/10/2011</u>	<u>08/11/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15091234920000

Spot Description: see below

nw nw/nw/nw Sec. 28 Twp. 14 S. R. 22 East West

5075 Feet from North / South Line of Section

5142 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Johnson

Lease Name: Phegley Well #: 7-2

Field Name: Gardner South

Producing Formation: Bartlesville

Elevation: Ground: n/a Kelly Bushing: n/a

Total Depth: 928 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: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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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: Bradd Schif

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Att 2 - Dlg - 11/22/11

Operator Name: Bradley Oil Company Lease Name: Phegley Well #: 7-2
 Sec. 28 Twp. 14 S. R. 22 East West County: Johnson

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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Bartlesville 874 880 Total Depth 928
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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 casing	7 5/8	7"	n/a	20ft	portland	5	
Production	5 5/8	2 7/8	n/a	928	50/50 poz	121	

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
3	874-880	spot acid on perforations and fraced	
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TUBING RECORD: Size: <u>1"</u> Set At: <u>920</u> 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 checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbts. <u>1</u>	Gas Mcf _____	Water Bbts. _____ Gas-Oil Ratio _____ Gravity <u>23</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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>872-882</u>
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HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Phegley 7-2
API # 15-091-23492-00-00
SPUD DATE 8-10-11

Footage	Formation	Thickness	Set 20' of 8 5/8" TD 928' Ran 918' of 2 7/8
2	Topsoil	2	
16	clay	14	
54	shale	38	
80	lime	26	
88	shale	8	
97	lime	9	
104	shale	7	
122	lime	18	
139	shale	17	
159	lime	20	
166	shale	7	
222	lime	56	
244	shale	22	
252	lime	8	
272	shale	20	
278	lime	6	
283	shale	5	
292	lime	9	
336	shale	44	
358	lime	22	
370	shale	12	
400	lime	30	
404	shale	4	
411	lime	7	
584	shale	173	
590	lime	6	
592	shale	2	
608	lime	16	
623	shale	15	
626	lime	3	
632	shale	6	
642	lime	10	
875	shale	233	
880	sand	5	good bleed
928	shale	48	

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CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 32777
LOCATION Chanute KS
FOREMAN Fred Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8/12/11	1601	Pogley # 7A	NW 28	14	32	JO
CUSTOMER Bradley Oil Co.			TRUCK# DRIVER TRUCK# DRIVER			
MAILING ADDRESS P.O. Box 21614			506 FREMAD Safety Kelly			
CITY STATE ZIP CODE Oklahoma City OK 73156			368 KENHAM			
			370 ARLMCD			
			510 GARMOO			

JOB TYPE Log String HOLE SIZE 5 7/8 HOLE DEPTH 92.8 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 91.80 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Plug
 DISPLACEMENT 5.34 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4.3 PM

REMARKS: Establish Circulation. Mix + Pump 100# Premium Gel Flush. Mix + Pump 121 SKS 50/50 for Mix Cement. 2% Gel. Cement to surface. Flush pump + lines clean. Displace 2 1/2" Rubber Plug to casing TD w/ 5.34 BBL fresh water. Pressure to 800# PSI. Release pressure to Set Float Value. Shut in casing.

Hot Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	925.00
5406	30mi	MILEAGE		120.00
5402	918	Casing Footage		416
5407	Minimum	Ton Miles	510	330.00
5502C	2hrs	80 BBL Voe Truck	370	180.00
1124	121	50/50 Por Mix Cement		1264.40
118B	304#	Premium Gel		60.00
4402	1	2 1/2" Rubber Plug		28.00
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				# 243442

SALES TAX 2.5852 ESTIMATED TOTAL 3060.09
 AUTHORIZATION [Signature] TITLE _____ DATE _____

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 service on the back of this form are in effect for services identified on this form.