

ORIGINAL

KANSAS CORPORATION COMMISSION
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 # 5983
Name: Victor J. Leis
Address 1: P.O. Box 223
Address 2: _____
City: Yates Center State: KS Zip: 66783
Contact Person: Ryan M. Leis
Phone: (785) 313-2567
CONTRACTOR: License # 33900
Name: Steven A. Leis
Wellsite Geologist: n/a
Purchaser: Pacer

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.): _____

RECEIVED

NOV 14 2011

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 #: _____

12/2/2010	12/3/2010	12/17/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-27651 • 00 • 00

Spot Description: W
NE NE NE NE Sec. 20 Twp. 24 S. R. 16 East West
220 Feet from North / South Line of Section
2475 1475 Feet from East / West Line of Section
~~COR. #1 - KCC~~

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Woodson

Lease Name: Holloway Well #: 4

Field Name: Vernon

Producing Formation: Squirrel

Elevation: Ground: 1082 Kelly Bushing: n/a

Total Depth: 1081 Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at: 43 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: n/a Feet

If Alternate II completion, cement circulated from: 1081

feet depth to: surface w/ 143 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: n/a

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: _____

Title: _____ Date: 2/3/11

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: D/S Date: 11/23/11

Operator Name: Victor J. Leis Lease Name: Holloway Well #: 4
 Sec. 20 Twp. 24 S. R. 16 East West County: Woodson

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 see attached
---	--

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	10"	7"	23.5	43'	portland	10	n/a
Casing	5 7/8"	2 7/8"	6.5	1076'	50/50 pos	143	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
2	15 shots 1010-1017'	Frac. with 5000# gelled water and sand	1010'

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. 12/22/2010		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. 10	Gas Mcf 0	Water Bbls. 0
			Gas-Oil Ratio n/a
			Gravity 26.0

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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 AND GAS SERVICES, LLC

TICKET NUMBER 27288
LOCATION Ottawa K.S.
FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/6/10	5353	Holloway # 4	NW 20	24	16	WD
CUSTOMER			TRUCK #			
Midway Oil Co			506	Fred	Safety Mtg	DRIVER
MAILING ADDRESS			368	Ken	NH	
P.O. Box 1000			370	Arden	ADT	
CITY			510	Tom	ADT 503	Derek DM
STATE			OTHER			
OK						
ZIP CODE						

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1061' CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 1076' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" Plug
 DISPLACEMENT 6.25 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation - Mix Pump 100' Premium Gel Flush
Mix Pump 9 BBL Tall tale dye. Mix Pump 108 SKS
50/50 For Mix Cement 690 gal Follow w/ 35 SKS OWC
Cement Flush pump + lines clean. Displace 2 1/2"
rubber plug to casing TD w/ 6.25 BBL Fresh water.
Pressure to 700# PSI. Release pressure to set float valve.
Shut in casing.

Steve's Drilling Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		925 ⁰⁰
5406	65 mi	MILEAGE		237 ²⁵
5402	1076'	Casing Footage		NK
54071	294.84	Ton Miles 510		653 ⁸⁴
5407	Maximum	Ton Miles 503		315 ⁰⁰
5502C	2 1/2 hrs	80 Vac		250 ⁰⁰
1124	102 SKS	50/50 For Mix Cement		1003 ⁶⁸
1126	35 SKS	OWC Cement RECEIVED	595 ⁰⁰	2088 ⁰⁰
1118B	644 ⁰⁰	Premium Gel. NOV 14 2011		128 ⁰⁰
4402	1	2 1/2" Rubber Plug		23 ⁰⁰
KCC WICHITA				
WD # 238445				
			7.3%	SALES TAX 127 ²⁹
				ESTIMATED TOTAL 3959 ³³

Rev'n 8787

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.

Footage taken	Sample type	
0_5	soil	
5_13	clay	
13_16	lime	
16_40	lime	
40_45	broken lime	
45_203	shale	
203_254	lime	
254_267	shale	
267_300	lime	
300_302	shale	
302_415	lime	
415_452	white shale	
452_491	broken lime	
491_533	shale	
533_599	KC lime	
599_603	shale	
603_647	broken	
647_665	lime	
665_824	shale	
824_829	lime	
829_848	shale	
848_850	lime	
850_860	shale	
860_879	shale	
879_884	sandy, faint odor	
884_918	shale	
918_921	lime	
921_936	shale	
936_939	lime	
939_949	shale	
949_952	lime	
952_964	shale	
964_970	lime	
970_974	shale	
974_984	lime	
984_991	hard lime	
991_993	shale	
993_1003	mucky shale	
1003_1006	broken oil sand	
1006_1009	oil sand	
1009_1012	good oil sand	
1012_1015	broken	
1015_1047	lime	
1047_1052	shale	
1052_1054	lime	
1054_1057	sandy, faint odor	
1057-1081	shale	
	1081 T.D.	

RECEIVED
NOV 14 2011
KCC WICHITA