

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 # 31847
Name: Bradley Oil Company
Address 1: PO Box 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 #: _____

07/29/2011 07/29/2011 08/03/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 1509123496 . 00 . 00

Spot Description: see below
SW_nw_SW_nw Sec. 28 Twp. 14 S. R. 22 East West
3490 Feet from North / South Line of Section
5114 Feet from East / West Line of Section

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

County: Johnson

Lease Name: Phegley Well #: 29

Field Name: Gardner South

Producing Formation: Bartlesville

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

Total Depth: 945 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 #: _____

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.

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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 Schwartz

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- Letter of Confidentiality Received
 - Date: _____
 - Confidential Release Date: _____
 - Wireline Log Received
 - Geologist Report Received
 - UIC Distribution
- Att 2 - Dlg - 11/30/11

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Operator Name: Bradley Oil Company Lease Name: Phegley Well #: 29
 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 tasted, 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 881 890 Total Depth 945
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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	945	50/50 poz	126	

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	881-890	spot acid on perforations and fraced	

TUBING RECORD: Size: 1" Set At: 938 Packer At: Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>1</u>	Gas Mcf <u> </u>	Water Bbls. <u> </u>	Gas-Oil Ratio <u> </u>	Gravity <u>23</u>
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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> <input type="checkbox"/> Other (Specify) <u> </u>	PRODUCTION INTERVAL: <u>881-890</u>
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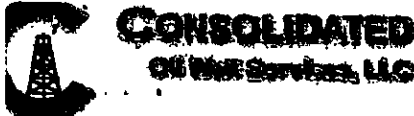
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HAT DRILLING
12371 KS HWY 7
MOUND CITY, KS 66056
LICENSE # 33734

Phegley 29
API # 15-091-23496-00-00
SPUD DATE 7-29-11

Footage	Formation	Thickness	Set 20' of 8 5/8" TD 945' Ran 935' of 2 7/8
2	Topsoil	2	
17	clay	15	
34	shale	17	
68	lime	34	
70	shale	2	
88	lime	18	
113	shale	25	
139	lime	26	
146	shale	7	
167	lime	21	
178	shale	11	
234	lime	56	
255	shale	21	
263	lime	8	
278	shale	15	
288	lime	10	
294	shale	6	
300	lime	6	
340	shale	40	
428	lime	88	
603	shalc	175	
628	lime	25	
634	shale	6	
668	lime	34	
685	shale	17	
700	sandy shale	15	
718	shale	18	
720	lime	2	
881	shale	161	
884	sand	3	little oil show
945	shale	61	

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TICKET NUMBER 32112
 LOCATION Ottawa KS
 FOREMAN Fred Mader

Box 884, Chanute, KS 66720
 0-431-9210 or 800-467-8678

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11/3/11	1601	Phegley # 29	NW 30	14	22	To
CUSTOMER: <u>Bradley Oil Co</u>						
MAILING ADDRESS: <u>P.O. Box 21614</u>						
CITY: <u>Oklahoma City</u>		STATE: <u>OK</u>	ZIP CODE: <u>73156-</u>			
JOB TYPE: <u>Logging</u>	HOLE SIZE: <u>5 7/8</u>	HOLE DEPTH: <u>975</u>	CASING SIZE & WEIGHT: <u>2 7/8 EUE</u>			
CASING DEPTH: <u>935</u>	DRILL PIPE: _____	TUBING: _____	OTHER: _____			
SLURRY WEIGHT: _____	SLURRY VOL: _____	WATER gal/sk: _____	CEMENT LEFT in CASING: <u>2 1/2" Plug</u>			
DISPLACEMENT: <u>5.44</u>	DISPLACEMENT PSI: _____	MIX PSI: _____	RATE: <u>4 BPM</u>			

REMARKS: Establish circulation. Mix + Pump 100# Premium Gel Flush.
Mix + Pump 126 SKS 50/50 Poz Mix Cement 2 1/2 Gal.
Cement to Surface. Flush pump & lines clean & Displace
2 1/2" Rubber plug w/ 5.44 BBLs Fresh water. Pressure to
700# PSI Release pressure to set float valve. Shut in
Casing.

HAT Drilling

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE #368		975.00
5406	30	MILEAGE		120.00
5402	935	Casing footage		N/C
5407	Minimum	Ten Miles #558		330.00
5502C	2 hrs	80 BBL Vac Truck #369		180.00
1124	126 SKS	50/50 Poz Mix Cement		1316.20
1118B	312#	Premium Gel		62.40
4402	1	2 1/2" Rubber Plug		28.00

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SALES TAX 7.5252 105.92
 ESTIMATED TOTAL 3117.92

AUTHORIZATION: *Joe Shyer* 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.