

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

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30253
Name: Cyclone Petroleum, Inc.
Address 1: 1030 W. Main
Address 2: _____
City: Jenks State: OK Zip: 74037 + _____
Contact Person: James Haver
Phone: (918) 291-3200
CONTRACTOR: License # Val Energy, Inc. 5822
Name: Val Energy, Inc.
Wellsite Geologist: _____
Purchaser: _____

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 #: _____
6/25/11 8/24/11 8/24/11
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 079206870000
Spot Description: _____
SW -NW -NE -SE Sec. 29 Twp. 22 S. R. 3 East West
2280 Feet from North / South Line of Section
1100 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Harvey
Lease Name: BB Well #: 29-1
Field Name: Wildcat
Producing Formation: Simpson
Elevation: Ground: 1431 Kelly Bushing: 1441
Total Depth: 3801 Plug Back Total Depth: 3255
Amount of Surface Pipe Set and Cemented at: 3807 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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DEC 01 2011
KCC WICHITA

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: President Date: 11.17.11

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: Dg Date: 12/13/11

Operator Name: Cyclone Petroleum, Inc. Lease Name: BB Well #: 29-1
 Sec. 29 Twp. 22 S. R. 3 East West County: Harvey

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 checked="" type="checkbox"/> Yes <input 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: <u>Sonic Cement Bond Log, Dual Induction Resistivity Log, Micro Log, Compensated Neutron PEL Density Log</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Hunton</td> <td>3598</td> <td></td> </tr> <tr> <td>Simpson</td> <td>3728</td> <td></td> </tr> </table>	Name	Top	Datum	Hunton	3598		Simpson	3728	
Name	Top	Datum								
Hunton	3598									
Simpson	3728									

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	17 1/2	13 3/8		262	Class A	200	
Longstring	7 7/8	4 1/2	11.6	3807	Class A	150	5 lb. Kol Seal

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	3257	500 gal 15% acid	
2	3250-52		
2	3246-47		
2	3242-44		
2	3232-34, 3226-28		

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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. 0	Gas Mcf 0	Water Bbls. 50/day	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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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

14318

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 242414

Invoice Date: 06/30/2011 Terms:

Page 1

CYCLONE PETROLEUM INC (2004)
7030C S. LEWIS ST. SUITE 541
TULSA OK 74136
(918)291-3200

BB #29-1
31080
29-22-3
06-26-11
KS

99700
Surface

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	250.00	14.2500	3562.50
1118B	PREMIUM GEL / BENTONITE	500.00	.2000	100.00
1102	CALCIUM CHLORIDE (50#)	600.00	.7000	420.00
1107	FLO-SEAL (25#)	75.00	2.2200	166.50

Description	Hours	Unit Price	Total
290 CEMENT PUMP (SURFACE)	1.00	775.00	775.00
290 EQUIPMENT MILEAGE (ONE WAY)	47.00	4.00	188.00
502 MIN. BULK DELIVERY	1.00	330.00	330.00

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Parts:	4249.00	Freight:	.00	Tax:	352.67	AR	5894.67
Labor:	.00	Misc:	.00	Total:	5894.67		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, Ok
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 31080 *W*

LOCATION #120 E 180 roads

FOREMAN Jacob Storm

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

FIELD TICKET & TREATMENT REPORT

CEMENT *Api # 15-079-20687-00-00*

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
6-26-11	2616	BB # 29-1	29	22	3	Harvey																
CUSTOMER <i>Cyclone Petro Inc</i>			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>290</td> <td>Jerid</td> <td></td> <td></td> </tr> <tr> <td>502</td> <td>Joc</td> <td></td> <td></td> </tr> <tr> <td>511</td> <td>Jacob</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	290	Jerid			502	Joc			511	Jacob		
TRUCK #	DRIVER	TRUCK #					DRIVER															
290	Jerid																					
502	Joc																					
511	Jacob																					
MAILING ADDRESS <i>7030 C S Lewis St Jct 541</i>																						
CITY STATE ZIP CODE <i>TJKA OK 74136</i>																						

JOB TYPE Surface B HOLE SIZE 17 3/4 HOLE DEPTH 267 CASING SIZE & WEIGHT 13 3/8 44lb
 CASING DEPTH 267 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 145 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 16ft
 DISPLACEMENT 40.61 DISPLACEMENT PSI 200 MIX PSI 100 RATE 46pm

REMARKS: *Safety meeting, pumped 10 bbl flush mixed 250 lbs class A 2 1/2 gal 3KCC 1/4 lb poly per sack, displaced 38 bbl circulating cement to surface. Shut in*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	775.00	775.00
5406	47	MILEAGE	4.00	188.00
5407	1	min bulk delivery	330.00	330.00
1104S	250 lbs	class A	14.25	3562.50
1108 B	500 lbs	gal	0.20	100.00
1102	600 lbs	calcium chloride	0.70	420.00
1107	75 lbs	Poly-Flake	2.22	166.50
RECEIVED				
DEC 01 2011				
KCC WICHITA				
Subtotal				5542.00
SALES TAX				352.61
ESTIMATED TOTAL				5894.61

Ravin 3737

AUTHORIZATION Rick Smith TITLE Toolpusher 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



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 242547

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Invoice Date: 07/15/2011 Terms: Page 1
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CYCLONE PETROLEUM INC (2004)
7030C S. LEWIS ST. SUITE 541
TULSA OK 74136
(918)291-3200

BB #29-1 API15-079-20687-00-00
31050
07/04/2011
S29 T22S R3W
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	150.00	18.3000	2745.00
1110A	KOL SEAL (50# BAG)	750.00	.4400	330.00
1144G	MUD FLUSH (SALE)	500.00	1.0500	525.00
1123	CITY WATER	3000.00	.0156	46.80
4252	TYPE A SHOE 7 3/8-8 4 1/	1.00	1552.0000	1552.00
4129	CENTRALIZER 4 1/2"	10.00	42.0000	420.00
4453	4 1/2" LATCH DOWN PLUG	1.00	232.0000	232.00
4310	4 1/2 X 5 1/2 SWEDGE	1.00	225.0000	225.00
4310	4 1/2 CALLAR	1.00	48.6300	48.63

Description	Hours	Unit Price	Total
434 80 BBL VACUUM TRUCK (CEMENT)	6.50	90.00	585.00
446 WEEK-END SURCHARGE	1.00	1711.36	1711.36
446 CEMENT PUMP	1.00	975.00	975.00
446 EQUIPMENT MILEAGE (ONE WAY)	47.00	4.00	188.00
446 CASING FOOTAGE	1003.00	.21	210.63
502 TON MILEAGE DELIVERY	376.00	1.26	473.76

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KCC WICHITA

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Parts: 6124.43 Freight: .00 Tax: 508.35 AR 10776.53
Labor: .00 Misc: .00 Total: 10776.53
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

242547

TICKET NUMBER 31050 WR
LOCATION 180
FOREMAN LARRY STAM

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

FIELD TICKET & TREATMENT REPORT

CEMENT API 15-079-20687-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-4-11	21616	BB #29-1	29	22S	3W	HARVEY
CUSTOMER <u>Cyclone Petro Inc</u>		SAFTY				
MAILING ADDRESS <u>7030C S Lewis St Ste 541</u>						
CITY <u>TULSA</u>	STATE <u>OK</u>	ZIP CODE <u>74136</u>				
TRUCK #	DRIVER	TRUCK #	DRIVER			
<u>446</u>	<u>Jeff</u>					
<u>502</u>	<u>Joe</u>					
<u>434</u>	<u>MARK</u>					
<u>539</u>	<u>LARRY</u>					

JOB TYPE Prod B HOLE SIZE 738 HOLE DEPTH 3801 CASING SIZE & WEIGHT 4 1/2 11.6
 CASING DEPTH 3503 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.0 SLURRY VOL 36.6 WATER gal/sk 6.85 CEMENT LEFT In CASING Left Shoe, IT
 DISPLACEMENT 23.75 DISPLACEMENT PSI 700 MIX PSI 150 RATE 54

REMARKS: Safety Meeting - Riggered up to 4 1/2 casing - broke circulation
handed 200 gal water 500 gals Mud Flush - 500 gal WATER - MIXED
150 sks thick jet + 5 lb Hol-Jeal - Mashed pump & Press
Displaced plug with 535 gal water - handed plug tubes
plug not hold - handed plug back down - shot pin at
800 lbs. To hold plug down

.0155

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	47	MILEAGE	4.00	188.00
5402	1803	Footage	.21	210.63
1126A	150	skt thick jet	18.30	2745.00
1110A	750	lbs Hol-Jeal	.44	330.00
1144B	500	gals Mud Flush	1.05	525.00
1123	3	City WATER	15.60	46.80
5502C	65	80 vac	90.00	585.00
5407A	47	Bulk Dep. evenly x 8 tons x	1.26	473.76
4252	1	4 1/2 x 7 1/2 PACKER SHOE	1552.00	1552.00
4129	10	4 1/2 Centerizers	42.00	420.00
4453	1	4 1/2 Latch down Plug	232.00	232.00
4310	1	4 1/2 x 5 1/2 Sledge	225.00	225.00
4310	1	4 1/2 Collar	48.63	48.63
5408	1	Weekend - Holiday Surcharge		1711.36
		Subtotal		10768.18
		SALES TAX		508.35
		ESTIMATED TOTAL		10,776.53

AUTHORIZATION Pammy Boyles TITLE _____

DATE 7/4/11

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