

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 # 34113  
Name: American Energy Resources, LLC  
Address 1: PO Box 711  
Address 2: \_\_\_\_\_  
City: Chanute State: KS Zip: 66720 + \_\_\_\_\_  
Contact Person: Andy Cockrell  
Phone: ( 620 ) 432-3303  
CONTRACTOR: License # \_\_\_\_\_  
Name: Don Thorton Mokat Drilling  
Wellsite Geologist: \_\_\_\_\_  
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 #: \_\_\_\_\_

4/22/11    4/27/11    4/27/11  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - <sup>-205-</sup>~~207-27205~~ 27933 ✓.00.00    KCC  
Spot Description: \_\_\_\_\_  
NW NE NW NW Sec. 25 Twp. 27 S. R. 16  East  West  
167 Feet from  North /  South Line of Section  
875 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Wilson  
Lease Name: Olson Well #: 2011-2  
Field Name: Buffalo-Villas  
Producing Formation: Squirrel  
Elevation: Ground: Est 1027 Kelly Bushing: \_\_\_\_\_  
Total Depth: 987 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 22 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 980  
feet depth to: Ø w/ 155 sx cmt.

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content: 0 ppm Fluid volume: NA bbls  
Dewatering method used: Evaporate  
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: [Signature]  
Title: Manager Date: Dec 18, 2011

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: 12/27/11

Operator Name: American Energy Resources, LLC Lease Name: Olson Well #: 2011-2  
 Sec. 25 Twp. 27 S. R. 16  East  West County: Wilson

**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:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border: none;"> <tr> <td style="border: none;">Name</td> <td style="border: none; text-align: center;">Top</td> <td style="border: none; text-align: center;">Datum</td> </tr> <tr> <td style="border: none;">Squirrel</td> <td style="border: none; text-align: center;">888</td> <td style="border: none; text-align: center;">903</td> </tr> </table>	Name	Top	Datum	Squirrel	888	903
Name	Top	Datum					
Squirrel	888	903					

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	11"	8 5/8"		22'	Portland	5	
Production Casing	6 1/4"	2 7/8"		980'	60/40	155	See ticket

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 <i>(Amount and Kind of Material Used)</i>	Depth
31	888-903	15% Acid - Hydraulic Frac	

TUBING RECORD: Size: <u>N/A</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR: <u>5-15-2011</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>-1/4</u>	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input checked="" 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) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER **30467**

LOCATION El. P...

FOREMAN 5780 Mac 1

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

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT** APL 15-2011 27933

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/27/11		Olsen # 2011-2	25	275	166	Lincoln
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
America Energy Resources LLC			485	Alan M		
MAILING ADDRESS			515	Alton B.		
311 N 8000th			436	J.P.		
CITY	STATE	ZIP CODE	78	Art (Mac)		
Chanute	KS	66720				

JOB TYPE Long string HOLE SIZE 6" HOLE DEPTH 990' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 980' DRILL PIPE \_\_\_\_\_ TUBING 2 1/2" OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13.4 SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING \_\_\_\_\_  
 DISPLACEMENT 5.67 bbl DISPLACEMENT PSI 1100 MIX PSI Bump to 500 RATE \_\_\_\_\_

REMARKS: Safety meeting. Rig up to 2 1/2" tubing with head & manifold. Break to circulation 600' to 700'. Fresh water pump. Use 2 gal flush & 5 bbl water special mix. 155 sks 60/40 Poz mix cement w/ 4% Gel, 1% Coco & 1/2" Phenoseal AT 12.4" w/ wash out pump & line shut down. Release 200' of Displace with 5.67 bbl Fresh water. Final pumping pressure 400' Bump Plus 500' shut down. Wait 2 min. Release pressure. Plughead. Good cement returns to surface. Take head & manifold off. Put Swedee & valve on. Run wire line check plug 990'. Pressure up to 1100'. To 500' shut well in. Table on file. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	50	MILEAGE	4.00	200.00
1121	155 sks	60/40 Poz mix cement	11.95	1852.25
1118B	530 <sup>+</sup>	Gel 4%	.20	106.00
1102	130 <sup>+</sup>	Coco 1%	.70	91.00
1107A	75 <sup>+</sup>	Pheno seal 1/2" driver	1.22	91.50
1118B	400 <sup>+</sup>	Gel Flact	.20	80.00
5502C	4 hrs	80 bbl Uac Truer 437	90.00	360.00
5502C	4 hrs	80 bbl Uac Truer 78	90.00	360.00
1123	3300 gals	CITY WATER	15.60	51.48
5407A	6.67 Tons	Ton mileage Bulk Truck	1.26	480.21
4402	2	2 1/2" Rubber Plug	28.00	56.00
		Paid CK# 1828		21.00
		5% Discount (4572.73)		
		7.3%		
		SUBTOTAL		46413.44
		SALES TAX		169.96
		ESTIMATED TOTAL		4813.40

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AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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

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

TICKET NUMBER 52298

FIELD TICKET REF # 15050

LOCATION Thayer

FOREMAN Brett Buckner

**TREATMENT REPORT**  
**FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-2-11		Olson 2011-2	25	27S	16E	1W
CUSTOMER						
American Energy Resources						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
TRUCK #						
DRIVER						
TRUCK #						
DRIVER						
476 TSS						
490 <del>Banner</del> London #112						
422 Genie EWH						
782 (W)						
452TK3 Jim M. JM						

**WELL DATA**

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE <u>2 1/2 2FUE</u>	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION <u>15'</u>	
<u>222'-903'</u>	<u>(31) Spirrel</u>

**TYPE OF TREATMENT**

Acid and Frac

**CHEMICALS**

Kesulb	Acid
Stimul	inhibitor
Pinole	Stimul
Breaker	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
PAD	20	20			1500	BREAKDOWN 1900
20-40		20	.5-1.0	200#	1350	START PRESSURE
12-20		20	1.0		1400	END PRESSURE
12-20		20	1.5			BALL OFF PRESS
12-20		20	2.0	1500#	1350	ROCK SALT PRESS
12-20 + (5) + (5) = (10)	20	20	.75		1400	ISIP 625
12-20	20	20	.75-1.5	1000#	1400	5 MIN
12-20 (5) + (1) = (6)	20	20	.75	500#	1500	10 MIN
12-20		12	1.0		1600	15 MIN
12-20		12-5	2.0	1000#		MIN RATE
FLUSH CASING	2	12				MAX RATE
Plc. b.l.b. 1.7 lb.						DISPLACEMENT 5.3
5-8 FLOW	10	12-21-12	7-12	4000#		<b>RECEIVED</b>
7-12 FLOW	143					<b>DEC 21 2011</b>

REMARKS: held back 1000# sand to reduce pressure

held back 1000# sand to reduce pressure

held 75 gal-10' HCl acid in well

\* note - After last ball down - down, lost 10-15' sand

tried to lower rate multiple times due to high in tank

limited water flow (1.5 & 2-3) bbls. may be sand ball it

location Thayer KS - 2-4-11

**KCC WICHITA**

AUTHORIZATION [Signature] TITLE \_\_\_\_\_ DATE 5-2-11

Terms and Conditions are printed on reverse side.