

**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 # 31120
Name: Pelican Hill Oil & Gas, Inc.
Address 1: 1401 N. El Camino Real Ste. 207
Address 2: _____
City: San Clemente State: CA. Zip: 92672 + _____
Contact Person: Jan Winfrey
Phone: (949) 498-2010
CONTRACTOR: License # 31120
Name: Pelican Hill Oil & Gas, Inc.
Wellsite Geologist: Chris Bean
Purchaser: Plains Marketing, LP.

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 #: _____

5-4-11 5-14-11 5-18-11
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 195-22704-00-00
Spot Description: _____
SE NE SW NW Sec. 9 Twp. 11 S. R. 21 East West
1,717 Feet from North / South Line of Section
1,077 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Trego
Lease Name: Nelson Well #: 2-9
Field Name: Unknown
Producing Formation: artuckle
Elevation: Ground: 2,090' Kelly Bushing: 2,082'
Total Depth: 3,730' Plug Back Total Depth: 3,728'
Amount of Surface Pipe Set and Cemented at: 269' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 1540
feet depth to Surface w/ 350 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____
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 15 2011
KCC WICHITA

RECEIVED

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: Jan Winfrey
Title: Office Manager Date: 11/01/11

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____
 Confidential Release Data: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dlg Date: 12/20/11

Operator Name: Pelican Hill Oil & Gas, Inc. Lease Name: Nelson Well #: 2-9
 Sec. 9 Twp. 11 S. R. 21 East West County: Trego

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 checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Induction Log, Borehole Compensated Sonic Log, Computer Processed Interpretation, Microresistivity Log, Dual Compensated Porosity Log	<input checked="" 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>Lansing</td> <td>3,380'</td> <td>-1,290'</td> </tr> <tr> <td>BKC</td> <td>3,614'</td> <td>-1,524'</td> </tr> <tr> <td>Marmaton</td> <td>3,620'</td> <td>-1,530'</td> </tr> <tr> <td>Cong.</td> <td>3,670'</td> <td>-1,580'</td> </tr> <tr> <td>Arbuckle</td> <td>3,704'</td> <td>-1,614'</td> </tr> </table>	Name	Top	Datum	Lansing	3,380'	-1,290'	BKC	3,614'	-1,524'	Marmaton	3,620'	-1,530'	Cong.	3,670'	-1,580'	Arbuckle	3,704'	-1,614'
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CASING RECORD <input checked="" 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	12 1/4"	8 5/8"	23	269'	Class A	170	3% Chl. 2% Gel
Production	7 7/8"	5 1/2"	15.50	3,730'	OWC, 60/40	150,380	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" 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 Squeezes Record (Amount and Kind of Material Used)	Depth
4	3,716' To 3,720' - 16 Holes		

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>3,703'</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR: <u>June 23 2011</u>	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. <u>8</u> Gas Mcf _____ Water Bbls. _____ 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 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: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 28012
LOCATION Oakley, KS
FOREMAN Walt Dunkel

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-17-11	6352	Nelson 2-9	9	119	21 ^W	Trigo
CUSTOMER Pelican Hill Oil & Gas			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
			DRIVER			

JOB TYPE Prod-DV-0 HOLE SIZE 7 7/8 HOLE DEPTH 3730' CASING SIZE & WEIGHT 5 1/2 - 14 #
 CASING DEPTH 3713' DRILL PIPE _____ TUBING _____ OTHER DV 0 1538'
 SLURRY WEIGHT 138-12.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 42.11
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 6 BPM

REMARKS: Safety Meeting, on Integrity Dils
Pump 500gal Mud Flush, 20 BBL Pot, mixed 150 SKS OWC, 5# Kalseal, clear Pump
+ lines, Displace 50 BBL H₂O + 38 BBL mud, 2.525" internal Plug, landed at 1200'
released Plug held, open DV Tool, cure 3 hrs, mixed 30 SKS in RHC
Mixed 750 SKS down 5 1/2" 2.525" release Plug + Displaced 37 1/4 BBL H₂O
2.525", Landed Plug 1170', released Pressure, Held
Contact Did Circ

Thank You
Walt + crew

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401C	1	PUMP CHARGE	2850.00	2850.00
5406	40	MILEAGE	5.00	200.00
1126	150 SKS	OWC	21.48	3222.00
1131	380 SKS	6 1/4 pot	14.35	5453.00
1118B	2616 #	Bentonite	.24	627.84
1110A	750 #	Kalseal	.53	397.50
1107	95 #	Flu-Seal	2.66	252.70
1144G	1000 gal	mud Flush	1.00	1,000.00
1142	4- gal	KCL	35.70	142.80
4253	1	Packer shoe	1760.00	1760.00
4130	8	Centralizers	58.00	464.00
4104	3	Baskets	276.00	828.00
4283	1	DV Tool w/ Latch down	3880.00	3880.00
5407A	23.39	Ten Mileage Delivery	158	1,478.46
				22,526.24
		Less 15% Disc		3,378.94
				19,147.30
		SALES TAX		1040.20
		ESTIMATED TOTAL		20,187.50

Rayh 3737 241450
 AUTHORIZATION [Signature] TITLE _____ DATE 5-17-11

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 for

