



KANSAS CORPORATION COMMISSION 1072353
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 # 6445
Name: Miller Bros Oil Company, Inc.
Address 1: 701 W 4TH
Address 2: _____
City: LEBO State: KS Zip: 66856 + _____
Contact Person: Daniel Horst
Phone: (620) 344-1518
CONTRACTOR: License # 30567
Name: Rig 6 Drilling Co., Inc.
Wellsite Geologist: none
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 #: _____

<u>12/21/2011</u>	<u>01/8/2012</u>	<u>01/14/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-28018-00-00

Spot Description: _____
NE SW NE SW Sec. 23 Twp. 23 S. R. 13 East West
1667 Feet from North / South Line of Section
1823 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Woodson

Lease Name: A. J. Hessler Well #: 31

Field Name: _____

Producing Formation: Arbuckle

Elevation: Ground: 1215 Kelly Bushing: 0

Total Depth: 2225 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 2223

feet depth to: 0 w/ 380 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1 ppm Fluid volume: 120 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

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.

Submitted Electronically

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: Deanna Garcia Date: 01/31/2012



1072353

Operator Name: Miller Bros Oil Company, Inc. Lease Name: A. J. Hessler Well #: 31
 Sec. 23 Twp. 23 S. R. 13 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Cement bond Gamma Ray Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>ARBUCKLE</td> <td>2148</td> <td></td> </tr> </table>	Name	Top	Datum	ARBUCKLE	2148	
Name	Top	Datum					
ARBUCKLE	2148						

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	12	8.625	20	40		20	
production	6.75	4.5	9.5	2223	Thick set&60-4C	380	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ 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
1	2201.5	100 GAL ACID	

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.	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-1B.)</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

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/487-8876
Fax 620/431-0012

INVOICE

Invoice # 246953

Invoice Date: 01/11/2012 Terms: 0/0/30,n/30

Page 1

MILLER BROTHERS OIL
701 WEST 4TH
LEBO KB 66856
(620)256-0108

A.J. HESSLER #31
33454
23-238-13E
01-08-12
KB

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	30.00	19.2000	576.00
1110A	KOL SEAL (50# BAG)	150.00	.4600	69.00
1107A	PHENOSEAL (M) 40# BAG)	30.00	1.2900	38.70
1123	CITY WATER	3000.00	.0165	49.50
4176	FLOAT COLLAR 4 1/2"	1.00	282.0000	282.00
4453	4 1/2" LATCH DOWN PLUG	1.00	232.0000	232.00

Description	Hours	Unit Price	Total
485 CEMENT PUMP	1.00	1030.00	1030.00
485 EQUIPMENT MILEAGE (ONE WAY)	35.00	4.00	140.00
515 MIN. BULK DELIVERY	1.00	350.00	350.00
637 80 BBL VACUUM TRUCK (CEMENT)	3.50	90.00	315.00

Parts: 1247.20 Freight: .00 Tax: 91.06 AR 3173.26
 Labor: .00 Misc: .00 Total: 3173.26
 Subt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7622 EUREKA, KS 620/583-7684 PONCA CITY, OK 580/782-2303 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/698-4914



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33454
LOCATION EuroK9
FOREMAN Steve Mead

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

FIELD TICKET & TREATMENT REPORT

CEMENT API# 15-207-28018

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-9-12	5197	AT Hessier # 31	23	235	13E	Woodson
CUSTOMER <u>Miller Brothers</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>701 West 47th</u>			<u>485</u>	<u>Alan</u>		
CITY <u>Lebo</u>	STATE <u>KS</u>	ZIP CODE <u>66856</u>	<u>515</u>	<u>Calin</u>		
			<u>637</u>	<u>J.P</u>		

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 2225' CASING SIZE & WEIGHT 4 1/2"
CASING DEPTH 2223' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING _____
DISPLACEMENT 36 bbl DISPLACEMENT PSI 200 MIX PSI Bump Plug 800 RATE _____

REMARKS: Safety Meeting. Rig up to 4 1/2 casing. Break circulation w/ fresh water. Mix 400# Gel Flush. Rig back up to 20' Rig Mud Pump let Rig Circulate Gel Ground. Rig up to 4 1/2 casing with cement head + manifold. Mix 70565 Thick set cement w/ 50 Gal Seal per/sk + 1" phased pack. Wash out pump + lines. Shutdown. Release plug. Displace with 36 bbl Fresh water. Final pumping Pressure 200# Bump Plug 800#. Shutdown in 300#. Job complete Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1070.00	1070.00
5406	35	MILEAGE	4.00	140.00
1126A	30 sbs	Thick Set Cement	1920	57600
1110A	80 #	Kal-Seal 5# per/sk	26	6900
1107A	90 #	Phased 1" pack	1.29	38.70
5407		300 miles Bulk Truck	m/c	350.00
5505C	3 1/2 hrs	80 bbl Vacuum Truck	90.00	315.00
1123	2000 gallons	CITY water	16.50	49.50
4176	1	4 1/2 Elast Collar	282.00	282.00
4452	1	4 1/2 Catch down Plug	232.00	232.00
			SubTotal	309220
			SALES TAX	91.00
			ESTIMATED TOTAL	31306

Revin 3737
AUTHORIZATION [Signature]

8416953
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.



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 684
Chanute, KS 66720
820/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 247147

Invoice Date: 01/18/2012 Terms: 0/0/30,n/30

Page 1

MILLER BROTHERS OIL
701 WEST 4TH
LEBO KS 66856
(620)256-0108

A.J. HESSLER #31
33553
23-238-13E
01-10-12
KS

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	175.00	12.5500	2196.25
1118B	PREMIUM GEL / BENTONITE	1200.00	.2100	252.00
1126A	THICK SET CEMENT	40.00	19.2000	768.00
1123	CITY WATER	6000.00	.0165	99.00
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
T-63 WATER TRANSPORT (CEMENT)	3.00	112.00	336.00
445 CEMENT PUMP	1.00	1030.00	1030.00
445 EQUIPMENT MILEAGE (ONE WAY)	35.00	4.00	140.00
479 TON MILEAGE DELIVERY	170.27	1.34	228.16
667 TON MILEAGE DELIVERY	170.28	1.34	228.18

Parts: 3360.25 Freight: .00 Tax: 245.31 AR 5567.90
 Labor: .00 Misc: .00 Total: 5567.90
 Subt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLEYSVILLE, OK
918/338-0908

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7864

PONCA CITY, OK
580/782-2383

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-6269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 33553
LOCATION EUREKA
FOREMAN Kevin McCoy

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

FIELD TICKET & TREATMENT REPORT

CEMENT *APZ #15-207-28018* **KS**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-10-12	5197	AJ HESSER # 31	23	235	13E	Woodson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Mailing Address			445	Dave G.		
CITY			479	Mark R.		
STATE			667	Allen B.		
ZIP CODE			452 T-63	Shannon		

JOB TYPE Longstring 9 HOLE SIZE 6 3/4 HOLE DEPTH 2225' CASING SIZE & WEIGHT 4 1/2 Cased
CASING DEPTH 2223' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 12.6 - 13.5 SLURRY VOL 65 BBL WATER gal/sk _____ CEMENT LEFT in CASING 30'
DISPLACEMENT 30.5 BBL DISPLACEMENT PSI 750 PER PSI 300 Shut in RATE _____

REMARKS: Safety Meeting: Longstring Stage #1 Cemented w/ 30 SKS on 1-8-12 Ticket #33454. Stage #2
1-10-12 Bond Log top of Cement @ 1885' G.L. Shot 4 Holes @ 1883' G.L. Rig 6 Day Circulated on well
for 1 1/2 Hrs. Rig up to Cement. Break Circulation w/ 5 BBL fresh water, mixed 175 SKS 60/40 Pozmix
Cement w/ 8% Gel @ 12.6 gal, Tail in w/ 40 SKS Thick Set Cement @ 13.5 gal, Total Slurry = 65
BBL. Shut down. Wash out Pump & Lines. Release Plug. Displace Plug to 1855' w/ 30.5 BBL fresh water.
Stop Plug @ 1855' By wire line measurement. Final Pumping Pressure 750 PSI. Shut in @ 300 PSI.
Note: Had Very Little to No Fluid Returns to Surface while Displacing Plug to 1855' No
Cement Returns to Surface. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	35	MILEAGE	4.00	140.00
1131	175 SKS	60/40 Pozmix Cement	12.55	2196.25
1118 B	1200 "	Gel 8%	.21	252.00
1126 A	40 SKS	Thick Set Cement (Tail Cement)	19.20	768.00
5407 A	9.73 Tons	35 Miles Bulk Delv.	1.34	456.34
5508 C	3 Hrs	Water Transport	112.00	336.00
1123	6000 gals	City Water	16.50/1000	99.00
4404	1	4 1/2 Top Rubber Plug	45.00	45.00
			Sub Total	5322.59
			SALES TAX 7.3%	245.31
			ESTIMATED TOTAL	5567.90

Form 3737

K. Miller
By Tom Miller

THANK YOU
DMKIN

AUTHORIZATION _____ 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



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 • 1-800/467-8876
Fax 620/431-0012

INVOICE

Invoice # 247157

Invoice Date: 01/18/2012 Terms: 0/0/30,n/30

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MILLER BROTHERS OIL
701 WEST 4TH
LEBO KS 66856
(620)256-0108

A.J. HESSLER #31
33583
23-238-13E
01-14-12
KS

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	135.00	12.5500	1694.25
1118B	PREMIUM GEL / BENTONITE	465.00	.2100	97.65
1123	CITY WATER	6000.00	.0165	99.00
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
T-63 WATER TRANSPORT (CEMENT)	3.00	112.00	336.00
445 CEMENT PUMP	1.00	1030.00	1030.00
445 EQUIPMENT MILEAGE (ONE WAY)	35.00	4.00	140.00
479 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1935.90 Freight: .00 Tax: 141.33 AR 3933.23
 Labor: .00 Misc: .00 Total: 3933.23
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-8808

EL DORADO, KS
318/322-7622

EUREKA, KS
620/583-7884

PONCA CITY, OK
580/783-2303

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-6269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33583
LOCATION Evieka
FOREMAN Rick Ledford

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT API # 15-207-28018

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-18-12	5197	A) Hessler #31	23	233	13E	Woods
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
Lebe			KS			
66856			445 Dave			
			479 Chris M.			
			452/TGS Russ M.			

JOB TYPE Top side HOLE SIZE 6 3/4" HOLE DEPTH 2225' CASING SIZE & WEIGHT 4 1/2"
CASING DEPTH 2223' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 12.8" SLURRY VOL _____ WATER gal/ft 7.0 CEMENT LEFT in CASING 22'
DISPLACEMENT 13.8 gals DISPLACEMENT PSI 400 ~~WATER~~ PSI 250 shut in RATE _____

REMARKS: Safety meeting - Shut bike in casing @ 222' Rig up to cement. Pumped 5 bbl water ahead, 5 bbl dye water. Dosed 135 sacs 60/40 Permox cement w/ 40% gel @ 12.8"/gal. Washout pump + lines shut down, release 4 1/2" rubber plug. Displace plug to 220' w/ 13.8 bbl fish water. Stop plug @ 220' by wireless measurement. Final pump pressure 400 PSI. Shut well in @ 250 PSI. Good cement returns to surface = 6 bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54018	1	PUMP CHARGE	1030.00	1030.00
5406	35	MILEAGE	4.00	140.00
1131	135 sacs	60/40 Permox cement	12.55	1694.25
1188	445 gal	40% gel	.21	97.65
5407	5.8'	tax mileage bulldoze	m/c	350.00
5501C	3 hrs	water transport	112.00	336.00
1123	6000 gals	city water	16.50/mile	99.00
4404	1	4 1/2" top rubber plug	45.00	45.00
			subtotal	3771.90
			7.3% SALES TAX	141.39
			ESTIMATED TOTAL	3933.29

Revin 3737

AUTHORIZATION [Signature] TITLE 241151 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