

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 30259
Name: Werth Exploration Trust
Address 1: 1308 Schwaller Avenue
Address 2: _____
City: Hays State: KS Zip: 67601 + _____
Contact Person: Andy Werth
Phone: (785) 625-4968
CONTRACTOR: License # 33905
Name: Royal Drilling, Inc.
Wellsite Geologist: Roger Moses
Purchaser: N/A

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 (Cora, 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>10/14/2011</u>	<u>10/18/2011</u>	<u>10/19/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-26200-00-00

Spot Description: _____
SW NW SE NE Sec. 14 Twp. 15 S. R. 18 East West
3,560 3530 Feet from North / South Line of Section
1,315 Feet from East / West Line of Section

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

County: Ellis

Lease Name: Werth Family Well #: 59

Field Name: Leiker East

Producing Formation: N/A

Elevation: Ground: 1998 Kelly Bushing: 2003

Total Depth: 3590 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 906 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: 42000 ppm Fluid volume: 900 bbls

Dewatering method used: Allow to air dry & back-fill.

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.

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: Roger L. Moses
Title: Geologist Date: December 20, 2011

KCC Office Use ONLY

Letter of Confidentiality Received

Date: _____ **RECEIVED**
JAN 10 2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Dlg Date: 1/13/12 **KCC WICHITA**

Operator Name: Werth Exploration Trust Lease Name: Werth Family Well #: 59
 Sec. 14 Twp. 15 S. R. 18 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input 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: DIL, Density Neutron	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1160</td> <td>+843</td> </tr> <tr> <td>Topeka</td> <td>2966</td> <td>-963</td> </tr> <tr> <td>Heebner</td> <td>3242</td> <td>-1239</td> </tr> <tr> <td>Toronto</td> <td>3267</td> <td>-1264</td> </tr> <tr> <td>Lansing</td> <td>3291</td> <td>-1288</td> </tr> <tr> <td>B/Kansas City</td> <td>3528</td> <td>-1525</td> </tr> <tr> <td>Arbuckle</td> <td>3552</td> <td>-1549</td> </tr> </table>	Name	Top	Datum	Anhydrite	1160	+843	Topeka	2966	-963	Heebner	3242	-1239	Toronto	3267	-1264	Lansing	3291	-1288	B/Kansas City	3528	-1525	Arbuckle	3552	-1549
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Arbuckle	3552	-1549																							

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	12 1/4"	8 5/8"	23	906	60/40Poz	400	
Production	7 7/8"	None					

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
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-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: <div style="text-align: right; border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED JAN 10 2011 </div>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JAN 10 2011
KCC WICHITA

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 5024

Date	10-19-11	Sec.	14	Twp.	15	Range	18	County	Ellis	State	Kansas	On Location		Finish	2:00pm
Lease	Worth Family			Well No.	59			Location	Munier 45 1W 1/2 S Winto						
Contractor	Royal Drilling Rig 1							Owner	To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.						
Type Job	Plug							Charge To	Worth Exploration & Trust						
Hole Size	7 7/8			T.D.	3497			Street							
Csg.								Depth							
Tbg. Size								Depth							
Tool								City	State						
Cement Left in Csg.								Shoe Joint	The above was done to satisfaction and supervision of owner agent or contractor.						
Meas Line								Displace	Cement Amount Ordered 210 sacks 4 1/2 bbl						

EQUIPMENT

Pumptrk	5	No.	Cementer	4		1/2 Flo Seal per sk
			Helper	Steve		Common 12 b
Bulktrk	7	No.	Driver	Chris		Poz. Mix 84
			Driver	Chris		Gel. 7
Bulktrk		No.	Driver	Brad		
			Driver	Brad		

JOB SERVICES & REMARKS

Remarks:	Calcium
Rat Hole	Hulls
Mouse Hole	Salt
Centralizers	Flowseal 50 #
Baskets	Kol-Seal
D/V or Port Collar	Mud CLR 48
1st Plug @ 1170 35x	CFL-117 or CD110 CAF 38
2nd " " 950 40x	Sand
3rd " " 500 90x	Handling 217
4th " " 40 10x	Mileage

FLOAT EQUIPMENT

1st Hole	30x
Mouse Hole	15x
	Guide Shoe
	Centralizer
	Baskets
	AFU Inserts
	Float Shoe
	Latch Down
	88 Wood Plug
	Pumptrk Charge
	Mileage 12

Thank You

Signature	Tax
	Discount
	Total Charge



TRILOBITE TESTING, INC

DRILL STEM TEST REPORT

Werth Explor. Trust
 1308 Schwaller ave
 Hays Ks. 67601+2242
 ATTN: Roger Moses

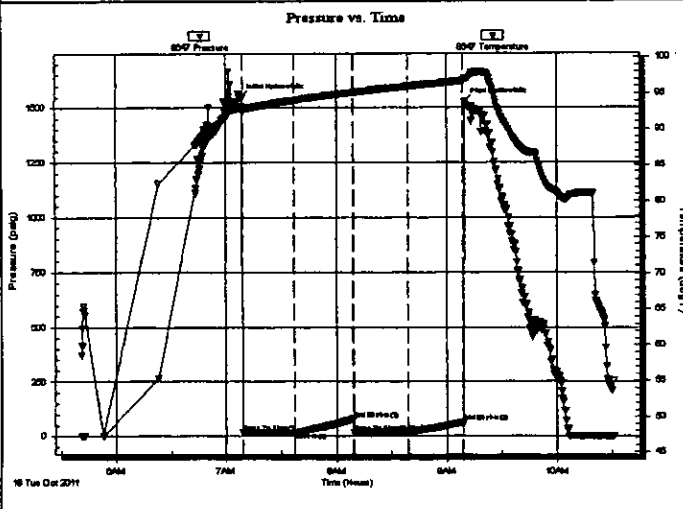
14-15s-18w Ellis
#59 Werth Family
 Job Ticket: 44261 **DST#: 1**
 Test Start: 2011.10.18 @ 05:41:05

GENERAL INFORMATION:

Formation: **LKC"A-C"**
 Deviated: **No Whipstock:** **ft (KB)**
 Time Tool Opened: 07:08:50
 Time Test Ended: 10:30:39
 Interval: **3258.00 ft (KB) To 3318.00 ft (KB) (TVD)**
 Total Depth: **3318.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Fair**
 Test Type: **Conventional Bottom Hole (Initial)**
 Tester: **Andy Carreira**
 Unit No: **39**
 Reference Elevations: **2003.00 ft (KB)**
 1998.00 ft (CF)
 KB to GR/CF: **5.00 ft**

Serial #: 8647 Outside
 Press@RunDepth: **20.90 psig @ 3263.00 ft (KB)** Capacity: **8000.00 psig**
 Start Date: **2011.10.18** End Date: **2011.10.18** Last Calib.: **2011.10.18**
 Start Time: **05:41:05** End Time: **10:30:39** Time On Btm: **2011.10.18 @ 07:08:10**
 Time Off Btm: **2011.10.18 @ 09:09:40**

TEST COMMENT: IF:(30min) 1 inch blow.
 IS:(30min) No Return
 FF:(30min) 1 inch blow
 FS:(30min) No Return



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	1546.11	93.06	Initial Hydro-static
1	17.48	92.35	Open To Flow (1)
29	18.97	94.07	Shut-In(1)
61	80.92	95.17	End Shut-In(1)
62	17.57	95.16	Open To Flow (2)
91	20.90	96.03	Shut-In(2)
121	65.09	96.78	End Shut-In(2)
122	1527.99	97.10	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
10.00	Mud, W/ oil specks in tool	0.13

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)

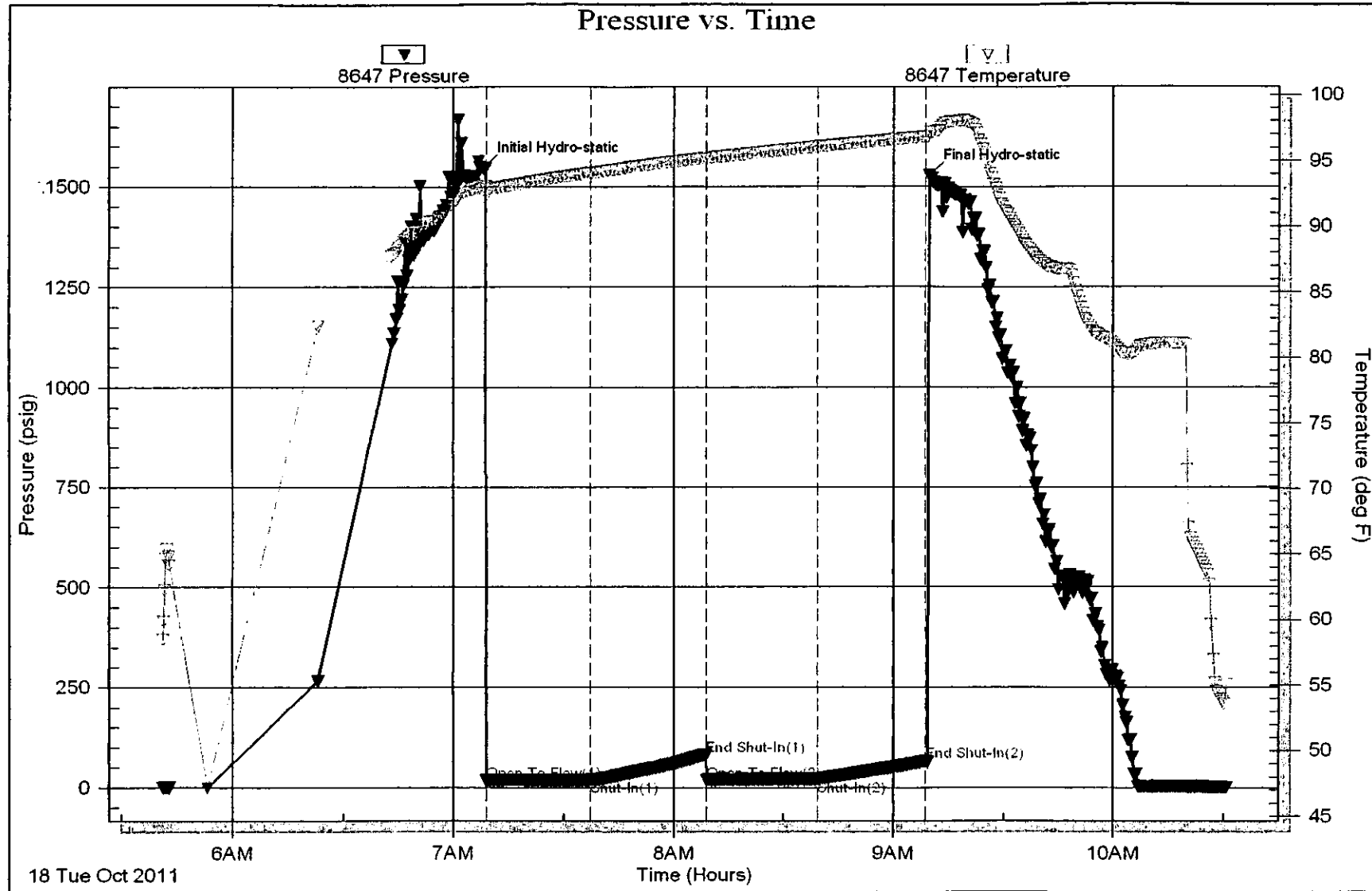
RECEIVED
JAN 12 2012
KCC WICHITA

Serial #: 8647

Outside Werth Explor. Trust

#59 Werth Family

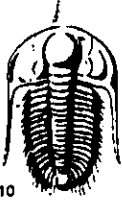
DST Test Number: 1



RECEIVED

JAN 12 2012

KCC WICHITA



TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 44261

Well Name & No. #59 Werth Family Test No. 1 Date 10-18-11
 Company Werth Explor. Trust Elevation 2003 KB 1998 GL
 Address 1308 Schwallier Ave
 Co. Rep / Geo. Roger Mays Rig Royal #1
 Location: Sec. 14 Twp. 15S Rge. 18W Co. Ellis State Ks

Interval Tested 3258-3318 Zone Tested LKC "A-C"
 Anchor Length 60' Drill Pipe Run 3624 Mud Wt. 8.5
 Top Packer Depth 3253 Drill Collars Run 0 Vis 65
 Bottom Packer Depth 3258 Wt. Pipe Run 0 WL 8.8
 Total Depth 3318 Chlorides 500 ppm System LCM 2#

Blow Description IF: 1" blow
IS: NO RETURN
FF: 1" blow
FS: NO RETURN

Rec	Feet of	%gas	%oil	%water	%mud
<u>10</u>	<u>Feet of Mud w/oil specks in fluid</u>				
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 10' BHT 96 Gravity _____ API RW _____ @ _____ °F Chlorides _____ ppm

(A) Initial Hydrostatic 1546 Test _____ T-On Location 0443
 (B) First Initial Flow 17 Jars _____ T-Started 0541
 (C) First Final Flow 18 Safety Joint _____ T-Open 07:10
 (D) Initial Shut-In 80 Circ Sub _____ T-Pulled 09:10
 (E) Second Initial Flow 17 Hourly Standby _____ T-Out 11:32
 (F) Second Final Flow 20 Mileage ← 21RT Comments _____
 (G) Final Shut-In 65 Sampler _____
 (H) Final Hydrostatic 1527 Straddle _____

Initial Open 30 Shale Packer _____
 Initial Shut-In 30 Shale Packer _____
 Final Flow 30 Extra Packer _____
 Final Shut-In 30 Extra Recorder _____
 Day Standby _____
 Accessibility _____
 Sub Total _____

Ruined Shale Packer _____
 Ruined Packer _____
 Extra Copies **RECEIVED**
 Sub Total _____
 Total **JAN 12 2012**
 MP/DST Disc't **KCC WICHITA**

Approved By _____ Our Representative [Signature]

TriLOBite Testing Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.