



KANSAS CORPORATION COMMISSION 1071732
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5030

Name: Vess Oil Corporation

Address 1: 1700 WATERFRONT PKWY BLDG 500

Address 2: _____

City: WICHITA State: KS Zip: 67206 + 6619

Contact Person: Patrick T. Canaday

Phone: (316) 682-1537

CONTRACTOR: License # 34233

Name: Maverick Drilling LLC

Wellsite Geologist: Roger Martin

Purchaser: MV Purchasing, LLC

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>10/04/2011</u>	<u>10/11/2011</u>	<u>10/31/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-163-23980-00-00

Spot Description: 60'N of NE SE SE N2NESESE

N2 NE SE SE Sec. 35 Twp. 10 S. R. 19 East West

1050 Feet from North / South Line of Section

330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Rooks

Lease Name: Casey Well #: 3

Field Name: _____

Producing Formation: LKC / Topeka

Elevation: Ground: 2132 Kelly Bushing: 2140

Total Depth: 3640 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 224 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1480 Feet

If Alternate II completion, cement circulated from: 1480

feet depth to: 0 w/ 190 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 2200 ppm Fluid volume: 1000 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: 01/12/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 01/17/2012