

**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
blanks must be Filled

OPERATOR: License # 32475
Name: Braden Petroleum & Well Plugging Company
Address 1: 10139 Southwest Haverhill Road
Address 2: _____
City: Augusta State: KS Zip: 67010 + _____
Contact Person: James Braden
Phone: (316) 775-6435
CONTRACTOR: License # 32701
Name: C & G Drilling, Inc.
Wellsite Geologist: William Stout
Purchaser: NA

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>12/4/2011</u>	<u>12/11/2011</u>	<u>1/6/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23931-00-00
Spot Description: _____
W/2 E/2 NW NE Sec. 26 Twp. 28 S. R. 5 East West
4,620 Feet from North / South Line of Section
1,815 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Butler
Lease Name: North Fox Bush Well #: 6
Field Name: Fox-Bush-Couch
Producing Formation: Disposal Formation - Arbuckle
Elevation: Ground: 1345 Kelly Bushing: 1354
Total Depth: 3500 Plug Back Total Depth: 3490
Amount of Surface Pipe Set and Cemented at: 213 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: 1500 ppm Fluid volume: 400 bbls
Dewatering method used: Evaporation
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: Bony Head
Title: Consulting Engineer as Agent Date: 1/10/12

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: Dlg Date: 1/27/12

RECEIVED
JAN 11 2012
KCC WICHITA

Operator Name: Braden Petroleum & Well Plugging Company Lease Name: North Fox Bush Well #: 6
 Sec. 26 Twp. 28 S. R. 5 East West County: Butler

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

Electric Log Submitted Electronically Yes No
 (If no, Submit Copy)

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Kansas City	2168	-814
Bartlesville Sd.	2708	-1354
Mississippi	2800	-1446
Arbuckle	3202	-1848

List All E. Logs Run:
Gamma Ray Neutron; Sonic Cement Bond Log

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	12.25	8.625	23	213	Class A	140	2% CaCl .25# FS
Production	7.875	5.5	14	3259	60/40 Poz	200	6% Gel, 5#KolSel 1.5% CaCl, 1%FL

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 (Amount and Kind of Material Used)	Depth
None	None. Completed Open Hole 3259' - 3490'	2000 gallons 20% HCL	3259'-3490'

TUBING RECORD: Size: 2.875" Set At: 3219' Packer At: 3219' Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. Pending SWD Application Approval Producing Method: Flowing Pumping Gas Lift Other (Explain) SWD

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	NA	NA	NA	NA

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	<u>SWD 3259'-3490'</u>



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 34155
LOCATION 180
FOREMAN Larry Storm

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

FIELD TICKET & TREATMENT REPORT

CEMENT APR 05-23931-00-00

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-1-11	1296	North Fox Bush #6 SWB	26	28S	5E	Butler
CUSTOMER <u>BRADEN Petros.</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>10139 SWDlawerhill RD</u>			<u>539</u>	<u>Larry</u>		
CITY <u>Augusta</u>			<u>603</u>	<u>Jeff</u>		
STATE <u>KS</u>			<u>442</u>	<u>Mark</u>		
ZIP CODE <u>67010</u>						

JOB TYPE Petro 8 HOLE SIZE 7 7/8 HOLE DEPTH 3500 CASING SIZE & WEIGHT 5 1/2 19 lb
 CASING DEPTH 3254 DRILL PIPE _____ TUBING _____ OTHER 7 1/2 shoe 5'
 SLURRY WEIGHT 13 SLURRY VOL 43 WATER gal/sk 7.65 CEMENT LEFT IN CASING 68 lb
 DISPLACEMENT 79.23 DISPLACEMENT PSI 900 MIX PSI 0 RATE 8.4 bbls

REMARKS: Placed up to 5 1/2 Csg - 10 pressure shoe at 900 lbs - Pumped 5 bbls
Prepacked
Mixed 200 lbs 60/40 Poz-MPV - 6% Gel 5 lbs Kol-Seal 1 1/2% CACL2
3% of 1% CFL-115 - Mixed Pump & Lower Displacement Plug 90 lb bbls -
Plug banded 1375 lbs - Released float head.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	19	MILEAGE	4.00	76.00
5402	754	Footage	.22	165.88
1131	200	lbs 60/40	12.55	2510.00
1103	240	lbs CACL2	.74	177.60
1118 B	1200	lbs Gel	.21	252.00
1110 A	1800	lbs Kol-Seal	.46	460.00
1135 A	50	lbs CFL-115	10.55	527.50
5407	1	Bulk Delivery		350.00
4353	1	5 1/2 Type A Packer Shoe	1584.00	1584.00
4454	1	5 1/2 Latch down Plug	254.00	254.00
4104	3	5 1/2 Cement Baskets	229.00	687.00
4130	8	5 1/2 Centerizers	48.00	384.00

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KCC WICHITA Subtotal 8457.98
SALES TAX 441.11
ESTIMATED TOTAL 8905.15

AUTHORIZATION James Bruch TITLE owner 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



ENTERED

TICKET NUMBER 34024

LOCATION 180

FOREMAN Larry Storm

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-4-11	1296	North Fox Bush #6510	26	289	5E	Butler
CUSTOMER <u>Bradley Petero</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>10139 SW Haven Hill RD</u>			<u>290</u>	<u>Beralo</u>		
CITY <u>Augusta</u>			<u>442</u>	<u>Mark</u>		
STATE <u>KS</u>			<u>539</u>	<u>Larry</u>		
ZIP CODE <u>67010</u>						

JOB TYPE SURFACE HOLE SIZE 12 1/4 HOLE DEPTH 213 CASING SIZE & WEIGHT 828
 CASING DEPTH 211 + 2-213 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.0 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 254
 DISPLACEMENT 13.31 DISPLACEMENT PSI 300 MIX PSI 0 RATE 1/2

REMARKS: Back (circulation) - mixed 140 sks A + 3% CACR2 + 2% H₂O
14 1/2 poly - displaced 11 1/2 bbls - 184 ft. - Circulation Cement
to surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	19	MILEAGE	4.00	76.00
11045	140	sks A	14.95	2093.00
1102	360	lbs CACR2	.74	266.40
1118 B	300	lbs B ₂ O ₃	.21	63.00
1107	50	lbs Poly-Flake	2.35	117.50
5407	1	Bulk Delivery	350.00	350.00
RECEIVED				
JAN 11 2012				
KCC WICHITA				
<u>Subtotal</u>				<u>3790.90</u>
SALES TAX				<u>1166.81</u>
ESTIMATED TOTAL				<u>3907.71</u>

RAVIN 3737 AUTHORIZATION Duke Coulter TITLE 246488 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