



KANSAS CORPORATION COMMISSION 1052762
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 # 3830

Name: A X & P, Inc.

Address 1: 20147 200 Rd

Address 2:

City: Neodesha State: KS Zip: 66757

Contact Person: JJ Hanke

Phone: (620) 325-5212

CONTRACTOR: License # 33079

Name: Tubbs, Patrick

Wellsite Geologist: JJ Hanke

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 #:

10/13/2011 10/26/2011 10/31/2011

Spud Date or Date Reached TD Completion Date or
Recompletion Date Completion Date

API No. 15 - 15-205-27984-00-00

Spot Description:

NE NE NE SW Sec. 29 Twp. 30 S. R. 16 East West

2600 Feet from North / South Line of Section

2690 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Wilson

Lease Name: Unit 1 - Wolfe West Well #: WW#281

Field Name:

Producing Formation: Neodesha Sand

Elevation: Ground: 801 Kelly Bushing: 803

Total Depth: 841 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 35 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 838

feet depth to: 0 w/ 90 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 40 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 Gamoi Date: 02/22/2012



1052762

Operator Name: A X & P, Inc.

Lease Name: Unit 1 - Wolfe West

Well #: WW#281

Sec. 29 Twp. 30 S. R. 16 East West

County: Wilson

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Osewgo	600	
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Neodesha Sd.	790	
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No			

List All E. Logs Run:

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	11	6.625	15	35	Portl.	8	none
Production	5.125	2.875	6.5	841	Portl.	90	2% gel

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 <i>(Amount and Kind of Material Used)</i>	Depth
1	Neodesha Sand	Acid/gel Frac	807-17

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. 11/06/2011	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. 5	Gas Mcf	Water Bbls. 20	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 <input type="checkbox"/> Other (Specify) <i>(Submit ACO-5) (Submit ACO-4)</i>	PRODUCTION INTERVAL: 807-817
--	--	---------------------------------



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33328
LOCATION Eureka, KS
FOREMAN Shannon Feck

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

FIELD TICKET & TREATMENT REPORT

CEMENT API # 15-205-27984

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-25-11	1124	unit 1 - Wolfe west # WW#281	29	30S	16 E	Wilson
CUSTOMER <u>Ax & P</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 1176</u>			DRIVER			
CITY <u>Independence</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>67301</u>			TRUCK #			
			DRIVER			

JOB TYPE Longstring HOLE SIZE 5 7/8" HOLE DEPTH 831 CASING SIZE & WEIGHT _____
 CASING DEPTH 827.7 DRILL PIPE _____ TUBING 2 3/8" OTHER _____
 SLURRY WEIGHT 14.5-14.8 SLURRY VOL 22 Bbl WATER gal/sk 6.5 CEMENT LEFT in CASING none
 DISPLACEMENT 4.7 Bbl DISPLACEMENT PSI 500 dumped plug to 900 psi RATE 3/4 to 1 BPM

REMARKS: Rig up to 2 3/8 Tubing break circulation with 10 Bbl water, Ran 3 Bbl Dye Water, mixed 90 SKS Class A Cement with 2% gel & 1% calcium @ 14.5-14.8 #/gal. Shut down wash out pump & lines. Drop 2 Plugs & displace with 4.7 Bbl water. Final pumping pressure of 500 psi bumped plug to 1000, & leave shut in with 500 psi. Good circulation @ all times 4 Bbl slurry to pit Job Complete.

"Thanks Shannon & Crew"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	60	MILEAGE	4.00	240.00
11045	90 SKS	Class "A" Cement	14.25	1282.50
1118 B	200 #	Gel @ 2%	.20	40.00
1102	100 #	Calcium @ 1%	.70	70.00
5407	4.23 Tons	Ton mileage bulk truck	m/c	330.00
5502 C	3 HRS	80 Bbl Vac truck	90.00	270.00
1123	3000 gals	City Water	15.60/1000	46.80
4402	2	2 3/8 Top Rubber Plugs	29.00	56.00
			Sub total	3310.30
			6.3% SALES TAX	94.21
			ESTIMATED TOTAL	3404.51

Flavin 3737

AUTHORIZATION [Signature] 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.