



KANSAS CORPORATION COMMISSION 1067181  
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 # 31337  
Name: Wildcat Oil & Gas LLC  
Address 1: PO BOX 40  
Address 2: \_\_\_\_\_  
City: SPIVEY State: KS Zip: 67142 + 0040  
Contact Person: Gary Adelhardt  
Phone: ( 620 ) 243-4401  
CONTRACTOR: License # 33902  
Name: Hardt Drilling LLC  
Wellsite Geologist: Timothy G. Pierce  
Purchaser: MV Purchasing, LLC & OneoK

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: Mack Oil Company  
Well Name: Hoath #1  
Original Comp. Date: 10/08/1966 Original Total Depth: 4781  
 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 #: \_\_\_\_\_  
09/23/2011 09/25/2011 10/18/2011  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-077-30166-00-01  
Spot Description: \_\_\_\_\_  
SW SW Sec. 6 Twp. 33 S. R. 9  East  West  
660 Feet from  North /  South Line of Section  
660 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Harper  
Lease Name: Hoath Well #: #2 OWWO  
Field Name: Little Sandy Creek  
Producing Formation: Mississippi  
Elevation: Ground: 1374 Kelly Bushing: 1384  
Total Depth: 4688 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 262 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: 32000 ppm Fluid volume: 1200 bbls  
Dewatering method used: Hauled to Disposal  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Wildcat Oil & Gas, LLC  
Lease Name: Adelhardt SWD 1-7 License #: 31337  
Quarter SW Sec. 7 Twp. 30 S. R. 8  East  West  
County: Kingman Permit #: D30389

**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 Gantso Date: 03/05/2012



1067181

Operator Name: Wildcat Oil & Gas LLC Lease Name: Hoath Well #: #2 OWWO  
 Sec. 6 Twp. 33 S. R. 9  East  West County: Harper

**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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum Heebner Sh.
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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
Production	7.875	4.5	10.5	4636	60:40	40	4% gel + .4% SMS

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
2	4388' - 4396'	2000 10% HCL ACID, 500 MIRA	
		1500 FE & NE EACH, 3 CIA-1 EP	
		24 CLAYMAX KCL	

TUBING RECORD: Size: <u>2-3/8"</u> Set At: <u>4437'</u> Packer At: <u> </u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>01/09/2012</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u> </u>
Estimated Production Per 24 Hours	Oil Bbls. <u>2</u> Gas Mcf <u>45</u> Water Bbls. <u>60</u> Gas-Oil Ratio <u> </u> Gravity <u>24</u>

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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) <u> </u>	PRODUCTION INTERVAL: <u> </u> <u> </u>
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# ALLIED

OIL & GAS SERVICES, LLC

24 S. Lincoln Street  
P.O. Box 31  
Russell, KS 67665-2906  
Voice: (817) 546-7282  
Fax: (817) 246-3361

## INVOICE

Invoice Number: 128749  
Invoice Date: Sep 26, 2011  
Page: 1

<b>Bill To:</b>
Wildcat Oil & Gas P O Box 40 Spivey, KS 67142

RECEIVED OCT 11 2011

Customer ID	Well Name # or Customer P.O.	Payment Terms	
Wild	Hoath #2 OWWO	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Sep 26, 2011	10/26/11

Quantity	Item	Description	Unit Price	Amount
24.00	MAT	Class A Common	16.25	390.00
16.00	MAT	Pozmix	8.50	136.00
2.00	MAT	Gel	21.25	42.50
14.00	MAT	SMS	3.00	42.00
125.00	MAT	Class H Premium	19.25	2,406.25
625.00	MAT	Kol Seal	0.89	556.25
12.00	MAT	Salt	12.00	144.00
10.00	MAT	Cla Pro	31.25	312.50
500.00	MAT	ASF	1.27	635.00
194.00	SER	Handling	2.25	436.50
15.00	SER	Mileage 194 sx @.11 per sk per mi	21.34	320.10
1.00	SER	Production Casing	2,405.00	2,405.00
30.00	SER	Pump Truck Mileage	7.00	210.00
1.00	SER	Manifold Head Rental	200.00	200.00
30.00	SER	Light Vehicle Mileage	4.00	120.00
1.00	EQP	4.5 Guide Shoe	192.00	192.00
1.00	EQP	4.5 AFU Insert	249.00	249.00
1.00	EQP	4.5 Basket	270.00	270.00
10.00	EQP	4.5 Reciprocating Scratchers	118.00	1,180.00
8.00	EQP	4.5 Centralizer	48.00	384.00
1.00	EQP	4.5 Top Rubber Plug	71.00	71.00

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$                     

ONLY IF PAID ON OR BEFORE

Oct 21, 2011

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

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Wild	Hoath #2 OWWO	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	Sep 26, 2011	10/26/11

Quantity	Item	Description	Unit Price	Amount
1.00	CEMENTER	David Felio		
1.00	EQUIP OPER	Ron Gilley		
1.00	OPER ASSIST	Dustin Elam		

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

**\$ 8140.42**

ONLY IF PAID ON OR BEFORE

**Oct 21, 2011**

Subtotal	10,702.10
Sales Tax	441.66
Total Invoice Amount	11,143.76
Payment/Credit Applied	
<b>TOTAL</b>	<b>11,143.76</b>

# ALLIED CEMENTING CO., LLC. 037801

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: Medicine Lodge, KS

DATE <u>09-26-11</u>	SEC. <u>06</u>	TWP. <u>33s</u>	RANGE <u>09w</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>5:30 AM</u>
LEASE <u>Hooth</u>		WELL # <u>2 owwo</u>		LOCATION <u>160 at Barber-Harper Co. line,</u>		COUNTY <u>Hopper</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)			<u>3 3/4s, E/16</u>				

CONTRACTOR Hardt  
 TYPE OF JOB Production casing  
 HOLE SIZE 7 7/8 T.D. 4608  
 CASING SIZE 4 1/2 10.5" DEPTH 4636  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX 1400 MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 40.51  
 CEMENT LEFT IN CSG. 41'  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 73 Bbls 2% KCL Water

OWNER Wildcat  
 CEMENT  
 AMOUNT ORDERED 40s x 60: 40: 4% gel + 4% sms  
7 1/2s x class H + 10% salt + 5" Kolscal 7 gals  
Clapro, 500 gals ASF

EQUIPMENT  
 PUMP TRUCK CEMENTER D. Felio  
 # 414-302 HELPER R. Gilley  
 BULK TRUCK  
 # 421-252 DRIVER D. Elam  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON	<u>24</u> sx	@ <u>16.25</u>	<u>390.00</u>
POZMIX	<u>16</u> sx	@ <u>8.50</u>	<u>136.00</u>
GEL	<u>2</u> sx	@ <u>21.25</u>	<u>42.50</u>
CHLORIDE		@ _____	_____
ASC		@ _____	_____
SMS	<u>14</u> <sup>##</sup>	@ <u>3.00</u>	<u>42.00</u>
H	<u>125</u> sx	@ <u>19.25</u>	<u>2406.25</u>
Kolscal	<u>625</u> <sup>##</sup>	@ <u>.89</u>	<u>556.25</u>
salt	<u>12</u> sx	@ <u>12.00</u>	<u>144.00</u>
Clapro	<u>10</u> Gals	@ <u>31.25</u>	<u>312.50</u>
ASF	<u>500</u> Gals	@ <u>1.27</u>	<u>635.00</u>
		@ _____	_____
		@ _____	_____
HANDLING	<u>194</u>	@ <u>2.25</u>	<u>436.50</u>
MILEAGE	<u>194/11/15</u>		<u>320.10</u>
			TOTAL <u>5421.10</u>

REMARKS:  
Pipe on Bttm, Break Circ, Pump Pre flush  
(Pierce Special), Plug Rathlow/15, 60' Cement,  
Pump 25s x Scumgee Cement, Mix 12s x tail Cement Stop  
Pump Wash Pump & lines, Release Plug, Start Disp./  
2% KCL Water, Recip. Pipes, See Steady increase in  
PSI, Stop Recip. Pipe, Show Rate, Pump Plug at  
73 Bbls total Disp., Release PSI, Plug Did Hold

SERVICE

DEPTH OF JOB	<u>4636</u>		
PUMP TRUCK CHARGE		<u>2405.00</u>	
EXTRA FOOTAGE		@ _____	_____
MILEAGE	<u>30</u>	@ <u>7.00</u>	<u>210.00</u>
MANIFOLD / Head rental		@ _____	<u>200.00</u>
Light Vehicle	<u>30</u>	@ <u>4.00</u>	<u>120.00</u>
		@ _____	_____
			TOTAL <u>2935.00</u>

CHARGE TO: Wildcat oil & gas  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

1- Guide Shoe	@ _____	<u>192.00</u>
1- AFU insert	@ _____	<u>249.00</u>
1- Cement Basket	@ _____	<u>270.00</u>
10- Recip. Scrubbers	@ <u>118.00</u>	<u>1180.00</u>
8- Centralizers	@ <u>48.00</u>	<u>384.00</u>
1- TRP		<u>71.00</u>
		TOTAL <u>2346.00</u>

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES 10,702.10  
 DISCOUNT 20% IF PAID IN 30 DAYS  
NET 8561.68

PRINTED NAME TIM PIERCE  
 SIGNATURE Tim Pierce