

**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 # 3830  
 Name: AX&P, Inc.  
 Address 1: P.O. Box 1176  
 Address 2: \_\_\_\_\_  
 City: Independence State: KS 67301 Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: J.J. Hanke  
 Phone: (620) 325-5212  
 CONTRACTOR: License # 33079  
 Name: Patrick Tubbs  
 Wellsite Geologist: J.J. Hanke  
 Purchaser: Pacer Energy Mktg.

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW
- 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 #: \_\_\_\_\_

06/14/2011	06/24/2011	06/30/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-27948-00-00

Spot Description: \_\_\_\_\_

NW\_SE\_NW\_SW Sec. 29 Twp. 30 S. R. 16  East  West

1,780 Feet from  North /  South Line of Section

4,170 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#DE31

Field Name: Neodesha Field

Producing Formation: Neodesha Sand

Elevation: Ground: 798 Kelly Bushing: 799

Total Depth: 875 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: 870

feet depth to: 0 w/ 90 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 20 ppm Fluid volume: 2 bbls

Dewatering method used: Hauled to Disposal Well

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: AX&P, Inc.

Lease Name: Unit 1 - Ellis License #: 3830

Quarter W/2 Sec. 29 Twp. 30 S. R. 16  East  West

County: Wilson Permit #: D-15,378

**RECEIVED  
FEB 28 2012**

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market Street, Room 2100, 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: [Signature]  
 Title: PR Date: 2/24/2012

**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: Dg Date: 3/7/12

Operator Name: AX&P, Inc. Lease Name: Unit 1 - Wolfe West Well #: WW#DE31  
 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 Wireline 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 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: <b>Gamma Ray Neutron ( attached)</b>	<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:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Oswego</td> <td>630</td> <td></td> </tr> <tr> <td>Neodesha Sand</td> <td>790</td> <td></td> </tr> </table>	Name	Top	Datum	Oswego	630		Neodesha Sand	790	
Name	Top	Datum								
Oswego	630									
Neodesha Sand	790									

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	11.0	6.625	15	35	Portl	8	none
Productionj	5.125	2.875	6.5	875	Portl	90	2% gel

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
1	Neodesha Sand 836-846	acid / gel / water frac	836

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. 06/30/2011	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 Bbbs. 1	Gas Mcf 10	Water Bbbs. 20	Gas-Oil Ratio	Gravity 38

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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: 836-46
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Box 884, Chanute, KS 66720  
40-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**

CEMENT API 15-205-27948

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-24-11	1134	WW DE 31	29	305	16E	Wilson
CUSTOMER <u>AXIP, INC</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>P.O. Box 1176</u>			445	Dave		
CITY <u>Independence</u>			479	Jory		
STATE <u>Ks</u>			437	Jim		
ZIP CODE <u>67301</u>						

JOB TYPE Longstring  HOLE SIZE \_\_\_\_\_ HOLE DEPTH 878' CASING SIZE & WEIGHT \_\_\_\_\_  
 CASING DEPTH 875' DRILL PIPE \_\_\_\_\_ TUBING 2 3/4 OTHER \_\_\_\_\_  
 SLURRY WEIGHT 141# SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
 DISPLACEMENT 5 bbls DISPLACEMENT PSI 400\* MIX PSI Bump Plug 1000\* RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 2 3/4 Tubing. Break Circulation w/ Fresh Water. Mix 90 sks Class A Cement w/ 2% Gel, 1% Cactz At 141# per gal Shutdown Wash out pumps & lines. STUFF 2 plugs. Displace w/ 5 bbls Fresh water. Final pumping Pressure 400\* Bump Plug to 1000\* Shut well in with 1000\*. Good cement Returns to surface.  
Job Complete Rig down

*Thank you!*

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
1104r	90 sks	Class A Cement	14.25	1282.50
1128B	200 #	Gel 2%	.20	40.00
1102	100 #	Cactz 1%	.70	70.00
5407	4.23 Tons	Ten mileage Bulk Truck	M/C	330.00
5502c	2 hrs	80 bbl Vacuum Truck	90.00	180.00
1123	2000 gallons	CITY WATER	15.60 <sup>per 1000</sup>	46.80
4402	2	2 3/4 Rubber Plug	28.00	56.00
			RECEIVED	
			FEB 28 2012	
			KCC WICHITA	
			Sub Total	3220.30
			SALES TAX	94.21
			ESTIMATED TOTAL	3314.01

Ravin 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.