

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 31900
Name: Nor-West Kansas Oil, L.L.C.
Address 1: 20014 283 Hwy.
Address 2: _____
City: WaKeeney State: KS. Zip: 67672 + 2722
Contact Person: Patrick G. Wanker, Sec.-Treas.,
Phone: (785) 743-2769
CONTRACTOR: License # 33575
Name: W W Drilling, L.L.C.
Wellsite Geologist: Kevin Davis
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 #: _____

8/4/2011	8/10/2011	8/11/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 109-21020-00-00
Spot Description: _____
SE NE SW SE Sec. 23 Twp. 13 S. R. 32 East West
900 Feet from North / South Line of Section
1,390 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Logan
Lease Name: Clark Trust Well #: 1
Field Name: Unknown
Producing Formation: _____
Elevation: Ground: 3008 Kelly Bushing: 3013
Total Depth: 4690 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 217 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 cm.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 2400 ppm Fluid volume: 1200 bbls
Dewatering method used: Air Dry - Backfilled
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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FEB 28 2012

KCC WICHITA

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: [Signature]
Title: Sec. Treasurer Date: 2-20-2012

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: [Signature] Date: 3/7/12

Operator Name: Nor-West Kansas Oil, L.L.C. Lease Name: Clark Trust Well #: 1
 Sec. 23 Twp. 13 S. R. 32 East West County: Logan

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Density Neutron; Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>2523</td> <td>+490</td> </tr> <tr> <td>Lansing, K.C.</td> <td>4024</td> <td>-1011</td> </tr> <tr> <td>Base K.C.</td> <td>4338</td> <td>-1325</td> </tr> <tr> <td>Fort Scott</td> <td>4511</td> <td>-1498</td> </tr> <tr> <td>Cherokee</td> <td>4540</td> <td>-1527</td> </tr> <tr> <td>Johnson</td> <td>4580</td> <td>-1567</td> </tr> <tr> <td>T.D.</td> <td>4688</td> <td></td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	2523	+490	Lansing, K.C.	4024	-1011	Base K.C.	4338	-1325	Fort Scott	4511	-1498	Cherokee	4540	-1527	Johnson	4580	-1567	T.D.	4688	
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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
Surface	12 1/4"	8 7/8's"	20#	218'	Common	158	3% Gel; 5% Chloride

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 <i>(Amount and Kind of Material Used)</i>	Depth

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. _____		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 040008

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

SERVICE POINT: Oakley, KS

DATE: <u>2/11/12</u>	SEC. <u>23</u>	TWP. <u>13</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION	JOB START <u>4:00 PM</u>	JOB FINISH <u>5:00 PM</u>
LEASE <u>1/4 Sec</u>		WELL # <u>1</u>	LOCATION <u>Oakley 15 S 1 E 11 E</u>		COUNTY <u>Logan</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR W.W. 41

TYPE OF JOB PTA

HOLE SIZE <u>7 1/2"</u>	T.D.
CASING SIZE <u>8 1/2"</u>	DEPTH <u>212'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

OWNER James

CEMENT AMOUNT ORDERED 205 SK, 60/40
400 gal 1/4 Flo Seal

COMMON	<u>123</u>	@ <u>16.25</u>	<u>1998.75</u>
POZMIX	<u>22</u>	@ <u>3.15</u>	<u>69.30</u>
GEL	<u>7</u>	@ <u>21.00</u>	<u>147.00</u>
CHLORIDE		@	
ASC		@	
<u>Flo Seal 5/16</u>		@ <u>2.20</u>	<u>137.20</u>

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KCC WICHITA

HANDLING <u>2.14 SK</u>	@ <u>2.25</u>	<u>481.50</u>
MILEAGE <u>110 SK</u>		<u>420.00</u>
TOTAL		<u>3263.80</u>

SERVICE

DEPTH OF JOB <u>2510</u>		
PUMP TRUCK CHARGE		<u>1250.00</u>
EXTRA FOOTAGE	@	
MILEAGE <u>17x2</u>	@ <u>7.00</u>	<u>238.00</u>
MANIFOLD	@	
<u>1 to Vehicle 17x2</u>	@ <u>4.00</u>	<u>136.00</u>

TOTAL 1624.00

PLUG & FLOAT EQUIPMENT

<u>2 1/2" Wooden Plug</u>	@	<u>92.00</u>
	@	
	@	
	@	
	@	
TOTAL		<u>92.00</u>

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

EQUIPMENT

PUMP TRUCK # <u>142</u>	CEMENTER <u>Tom</u>	HELPER <u>Tom</u>
BULK TRUCK # <u>1101</u>	DRIVER <u>Chris</u>	
BULK TRUCK # _____	DRIVER _____	

REMARKS:

25 SK @ 2.50 = 625.00
100 SK @ 14.00 = 1400.00
47 SK @ 2.67 = 125.49
17 SK @ 2.12 = 36.04
20 SK @ 6.70 = 134.00

CHARGE TO: Newest Highway P.I.

STREET _____

CITY _____ STATE _____ ZIP _____

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.

PRINTED NAME _____

SIGNATURE [Signature]

ALLIED CEMENTING CO., LLC. 043377

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

SERVICE POINT:
Dokley, ks

DATE <u>9-21-11</u>	SEC. <u>23</u>	TWP. <u>13</u>	RANGE <u>32</u>	CALLED OUT	ON LOCATION	JOB START <u>11:22 am</u>	JOB FINISH <u>11:00 pm</u>
LEASE <u>Clark Truss</u>		WELL # <u>1-</u>	LOCATION <u>Dokley, ks 155 380th</u>			COUNTY <u>Logan</u>	STATE <u>ks</u>
OLD OR NEW (Circle one)			<u>Pasturegate, Ed Niato</u>				

CONTRACTOR WJH #4 OWNER same

TYPE OF JOB Surface

HOLE SIZE <u>12 1/4</u>	T.D. <u>218'</u>
CASING SIZE <u>8 7/8</u>	DEPTH <u>218'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG. <u>15'</u>	
PERFS.	
DISPLACEMENT <u>13.19661</u>	

CEMENT AMOUNT ORDERED 1505/ks com 39.00

2.90 gal

COMMON <u>1505/ks</u>	@ <u>16.25</u>	<u>24375</u>
POZMIX	@	
GEL <u>350</u>	@ <u>2.125</u>	<u>6375</u>
CHLORIDE <u>550</u>	@ <u>58.20</u>	<u>29100</u>
ASC	@	

EQUIPMENT

PUMP TRUCK # <u>431</u>	CEMENTER <u>Lakene</u>
	HELPER <u>Noiren</u>
BULK TRUCK # <u>373/308</u>	DRIVER <u>Ethan</u>
BULK TRUCK #	DRIVER

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KCC WICHITA

HANDLING <u>1585/ks</u>	@ <u>2.25</u>	<u>35550</u>
MILEAGE <u>114.5k/mile</u>		<u>29546</u>
		TOTAL <u>34432</u>

REMARKS:

Mix 1505/ks down 8 7/8 casing

Displace with water

Cement did circulate

1 hour k you

CHARGE TO: No. West Kansas Oil

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <u>218'</u>		
PUMP TRUCK CHARGE		<u>112500</u>
EXTRA FOOTAGE	@	
MILEAGE <u>17x2</u>	@ <u>700</u>	<u>23800</u>
MANIFOLD <u>Light Vehicle mileage</u>	@ <u>4.00</u>	<u>13600</u>
		TOTAL <u>14990</u>

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
		TOTAL _____

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PRINTED NAME Robert D. ...

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAY