

CORRECTION #1

KANSAS CORPORATION COMMISSION 1075814
OIL & GAS CONSERVATION DIVISIONForm ACO-1
June 2009Form Must Be Typed
Form must be Signed
All blanks must be FilledWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5056
 Name: F. G. Holl Company L.L.C.
 Address 1: 9431 E CENTRAL STE 100
 Address 2: _____
 City: WICHITA State: KS Zip: 67206 + 2563
 Contact Person: Franklin R. Greenbaum
 Phone: (316) 684-8481
 CONTRACTOR: License # 5929
 Name: Duke Drilling Co., Inc.
 Wellsite Geologist: Rene Hustead
 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 #: _____

<u>06/21/2011</u>	<u>08/09/2011</u>	<u>10/20/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-033-21586-00-00
 Spot Description: 60' W. & 60' N. OF SESWNW
SE SW NW Sec. 12 Twp. 35 S. R. 20 East West
2250 Feet from North / South Line of Section
920 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Comanche
 Lease Name: BOX RANCH 'A' Well #: 1-12
 Field Name: Wildcat
 Producing Formation: Viola
 Elevation: Ground: 1699 Kelly Bushing: 1712
 Total Depth: 6750 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 859 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: 11000 ppm Fluid volume: 1200 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: 11/10/2011
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: Deanna Garris Date: 03/07/2012



Operator Name: F. G. Holl Company L.L.C. Lease Name: BOX RANCH 'A' Well #: 1-12
 Sec. 12 Twp. 35 S. R. 20 East West County: Comanche

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)

List All E. Logs Run:
Attached

Log Formation (Top), Depth and Datum Sample

Name Top Datum
 Attached Attached Attached

CASING RECORD New 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	8.6250	24	859	A-CON & Commor	450	3%cc, 2% gel
Production	7.8750	4.50	10.5	6751	AA-2 & Scavenger	175	10% Salt, 1/4# cell

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 (Amount and Kind of Material Used)	Depth
4	6337' - 6341' Viola	Spotted Viola w/ 500 gal 10% MSA acid	
4	6282' - 6286' Viola	Treated w/ 500 gal 15% MIRA acid	
4	6282' - 6288' Viola	Respotted 500 gal 15% nefe acif	

TUBING RECORD: Size: <u>2.3750</u>		Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>02/20/2012</u>		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.	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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>6282' - 6288'</u> <u>Viola</u>
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Form	ACO1 - Well Completion
Operator	F. G. Holl Company L.L.C.
Well Name	BOX RANCH 'A' 1-12
Doc ID	1075814

All Electric Logs Run

CDL/CNL
DIL
BHCS
Resistivity
CPI
Fracfinder

Form	ACO1 - Well Completion
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Tops

Herrington	2254	-542
Winfield	2294	-582
Towanda	2333	-621
Ft Riley	2397	-685
Wrefold	2623	-911
Council Grove	2674	-962
Neva	2894	-1182
Red Eagle	2965	-1253
Heebner	4178	-2466
LKC	4377	-2665
BKC	4893	-3181
Marmaton	4962	-3250
Altamont	5020	-3308
Pawnee	5067	-3355
Ft. Scott	5107	-3395
Cherokee Sh.	5118	-3406
Mississippi	5240	-3528
Arbuckle	6607	-4895
RTD	6750	-5038

Summary of Changes

Lease Name and Number: BOX RANCH 'A' 1-12

API/Permit #: 15-033-21586-00-00

Doc ID: 1075814

Correction Number: 1

Approved By: Deanna Garrison

Field Name	Previous Value	New Value
Approved Date	11/15/2011	03/07/2012
Date of First or Resumed Production or SWD or Enhr Producing Method Pumping	No	02/20/2012 Yes
Save Link	../kcc/detail/operatorE ditDetail.cfm?docID=1062755	../kcc/detail/operatorE ditDetail.cfm?docID=1075814