

KANSAS CORPORATION COMMISSION
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

ORIGINAL

OPERATOR: License # 8653
Name: Petroleum Technologies, Inc.
Address 1: 801 W 47th Street
Address 2: Suite 412
City: Kansas City State: MO Zip: 64112 + 1253
Contact Person: Alan J. Seaton
Phone: (816) 531-6904
CONTRACTOR: License # 8509
Name: Evans Energy Development Inc.
Wellsite Geologist: Alan J. Seaton
Purchaser: Sequoyah Trading & Transportation

API No. 15 - 091-23698-00-00

Spot Description: _____
NW SE SE NE Sec. 32 Twp. 14 S. R. 22 East West
3,020 Feet from North / South Line of Section
595 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Johnson

Lease Name: Reitz Well #: 31

Field Name: Edgerton Northeast

Producing Formation: Bartlesville Sand

Elevation: Ground: 983' Kelly Bushing: _____

Total Depth: 890' Plug Back Total Depth: 879'

Amount of Surface Pipe Set and Cemented at: 22' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 879'

feet depth to: surface w/ 118 sx cmt.

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>11-11-2011</u>	<u>11-14-2011</u>	<u>1-20-2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____

County: _____ Permit #: _____

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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: _____

Title: President Date: March 15, 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: Dlg Date: 4/27/12

Operator Name: Petroleum Technologies, Inc. Lease Name: Reitz Well #: 31
 Sec. 32 Twp. 14 S. R. 22 East West County: Johnson

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Gamma Ray / Neutron / CCL	<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>Bartlesville Sand</td> <td>827</td> <td>156</td> </tr> </table>	Name	Top	Datum	Bartlesville Sand	827	156
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Bartlesville Sand	827	156					

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	9 7/8"	7"	20	22'	common	6 sx	none
Production	5 5/8"	2 7/8"	6.5	879'	50/50 poz	118	2% gel, 1/4# Flo Seal

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
3	827 - 837	Acid: 75 gal 15% NeHCL	827 - 837
		Frac: 3sx 20/40 - 37sx 12/20 w/132 bbls gelled wtr	827 - 837

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TUBING RECORD:	Size: 1"	Set At: 840'	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR. 2-15-2012	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		
	2	0	7		22		

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>827 - 837</u>
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TICKET NUMBER 33087

LOCATION Ottawa

FOREMAN Alan Mader

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

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																				
11-14-11	6370	Reitz # 31	NE 32	141	22	Jes																				
CUSTOMER <u>Petroleum Technologies Inc</u>																										
MAILING ADDRESS <u>801 W 47th STE 412</u>																										
CITY <u>Kansas City</u>		STATE <u>Mo</u>	ZIP CODE <u>64112</u>																							
<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>516</td> <td>Alan M</td> <td>Safety Meet</td> <td></td> </tr> <tr> <td>368</td> <td>Arland</td> <td>AKA</td> <td></td> </tr> <tr> <td>505/1106</td> <td>Keith D</td> <td>KD</td> <td></td> </tr> <tr> <td>503</td> <td>Derek M</td> <td>DM</td> <td></td> </tr> </tbody> </table>							TRUCK #	DRIVER	TRUCK #	DRIVER	516	Alan M	Safety Meet		368	Arland	AKA		505/1106	Keith D	KD		503	Derek M	DM	
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JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 890 CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 878 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
 DISPLACEMENT 5.1 DISPLACEMENT PSI 800 MIX PSI 200 RATE 4.6 bpm

REMARKS: Held crew meet. Established rate. Mixed & pumped 100# gel followed by 118 gal 50/50 po2 plus 29# gel & 1/4# flo-seal. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.

Evans Energy, Ken

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5421	1	PUMP CHARGE		975.00
5406	30	MILEAGE		(20.00)
6402	878'	casing footage		
5407	n/a	ten miles		330.00
5501C	1 1/2	transport		168.00
1124	118	50/50 po2		1233.10
1118B	298	gel		59.60
1107	30#	flseal		66.60
4402	1	2 1/2 plug		28.00

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SALES TAX ESTIMATED TOTAL 103.39
3084.69

NO COMPANY REP
AUTHORIZATION Jim Ok'd 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.