

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

3/29/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5254
Name: MIDCO Exploration, Inc.
Address 1: 414 Plaza Drive, Suite 204
Address 2: _____
City: Westmont State: IL Zip: 60559 + 1265
Contact Person: Earl J. Joyce, Jr.
Phone: (630) 655-2198
CONTRACTOR: License # 33630
Name: Titan Drilling LLC
Wellsite Geologist: N/A
Purchaser: _____
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:
Operator: Sterling Drilling
Well Name: McCarty #1
Original Comp. Date: 5/18/1973 Original Total Depth: 5877
 Deepening Re-perf. Conv. to Enhr. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____

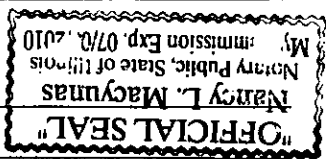
<u>12/16/09</u>	<u>12/19/09</u>	<u>1/27/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 025-20037-00-02
Spot Description: NW SE
_____ NW SE Sec. 19 Twp. 33 S. R. 24 East West
1980 Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Clark
Lease Name: McCarty OWWO Well #: 1
Field Name: Wildcat
Producing Formation: waiting on completion unit
Elevation: Ground: 2041 Kelly Bushing: _____
Total Depth: 7250 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 1015 existing 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 WONS 4-9-10
(Data must be collected from the Reserve)
Chloride content: 49,000 ppm Fluid volume: 600 bbls
Dewatering method used: vacuum all available free fluids
Location of fluid disposal if hauled offsite: _____
Operator Name: Bulldog Disposal, Inc.
Lease Name: _____ License No.: OK # 225070
Quarter _____ Sec. 28 Twp. 25N S. R. 25 East West
County: Harper Co., OK Docket No.: _____

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.

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: Vice-President Date: 3/29/2010
Subscribed and sworn to before me this 29th day of March
20 10
Notary Public: Nancy L. Macynas
Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Operator Name: MIDCO Exploration, Inc. Lease Name: McCarty OWWO Well #: 1
 Sec. 19 Twp. 33 S. R. 24 East West County: Clark

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 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 <i>collected, not yet filed</i> Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Borehole Compensated Sonic, Micro Resistivity, Dual Compensated Porosity, Dual Induction, Cement Bond Log, Tracer Survey - before & after squeeze	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>New Information</td> <td></td> <td></td> </tr> <tr> <td>GL</td> <td>2041</td> <td>2053</td> </tr> <tr> <td>St. Gen</td> <td>5676</td> <td>-3623</td> </tr> <tr> <td>Viola</td> <td>6989</td> <td>-4936</td> </tr> <tr> <td>Arbuckle</td> <td>7150</td> <td>-5097</td> </tr> </table>	Name	Top	Datum	New Information			GL	2041	2053	St. Gen	5676	-3623	Viola	6989	-4936	Arbuckle	7150	-5097
Name	Top	Datum																	
New Information																			
GL	2041	2053																	
St. Gen	5676	-3623																	
Viola	6989	-4936																	
Arbuckle	7150	-5097																	

CASING RECORD <input 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	existing	8 5/8"		1015'			
Production	7 7/8"	5 1/2"	17#	7250'	Halcem	360	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate	7033	Common A	115	1 sack chloride, FloSeal
<input checked="" type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD	7046	Common A	75	
<input type="checkbox"/> Plug Off Zone				

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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)
2	7194' - 7197' cemented	750 gallons 15% INS
2	7176' - 7180' over	
2	7068' - 7071' in	1000 gallons 15% INS
2	7033' - 7036' squeeze	250 gallons 20% INS; 750 gallons 15% INS

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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. waiting on completion unit	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 type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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The Road to Excellence Starts with Safety

Sold To #: 317869	Ship To #: 2759541	Quote #:	Sales Order #: 7076292
Customer: MIDCO EXPLORATION INC.		Customer Rep: Mayfield, David	
Well Name: McCarty	Well #: 1	API/UWI #:	
Field:	City (SAP): ENGLEWOOD	County/Parish: Clark	State: Kansas
Legal Description: Section 19 Township 33S Range 25W			
Contractor: Titan Drilling		Rig/Platform Name/Num: 3	
Job Purpose: Cement Production Casing			
Well Type: Development Well		Job Type: Cement Production Casing	
Sales Person: CRAWFORD, ROBERT		Srvc Supervisor: UNDERWOOD, BILLY MBU ID Emp #: 159068	

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Job Personnel								
HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #
HILL, RICKEY Lester	6	457261	TIRRELL, MICHAEL Edward	11	429195	UNDERWOOD, BILLY	12	159088

Equipment							
HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way
10242380	70 mile	10261039	70 mile	10949719	70 mile	10951586	70 mile

Job Hours								
Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours
12-20-09	6	1.3						
TOTAL			Total is the sum of each column separately					

Job				Job Times		
Formation Name	Formation Depth (MD)	Form Type	Job depth MD	Date	Time	Time Zone
	Top Bottom	BHST	7250. ft	19 - Dec - 2009	23:59	CST
				20 - Dec - 2009	04:00	CST
				20 - Dec - 2009	11:50	CST
				20 - Dec - 2009	13:10	CST
				20 - Dec - 2009	14:00	CST

Well Data											
Description	New / Used	Max pressure psig	Size in	ID in	Weight lbm/ft	Thread	Grade	Top MD ft	Bottom MD ft	Top TVD ft	Bottom TVD ft
Production Casing Open Hole				7.875					7250.		
5.5" Casing	Unknown		5.5	4.892	17.				7250.		

Sales/Rental/3 rd Party (HES)				
Description	Qty	Qty uom	Depth	Supplier
SHOE,GID,5-1/2 8RD	1	EA		
PLUG ASSY,3 WIPR LTH-DWN,5 1/2 CSG	1	EA		
BAFFLE ASSY - 5-1/2 BRD - LATCH-DOWN	1	EA		
CTRZR ASSY,5 1/2 CSG X 7 7/8 HOLE,HINGED	15	EA		
CLAMP - LIMIT - 5-1/2 - HINGED -	1	EA		
KIT,HALL WELD-A	1	EA		
CENTRALIZER ASSY - TURBO - API -	10	EA		

Tools and Accessories													
Type	Size	Qty	Make	Depth	Type	Size	Qty	Make	Depth	Type	Size	Qty	Make
Guide Shoe					Packer					Top Plug			
Float Shoe					Bridge Plug					Bottom Plug			
Float Collar					Retainer					SSR plug set			
Insert Float										Plug Container			
Stage Tool										Centralizers			

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Miscellaneous Materials

Gelling Agt	Conc	Surfactant	Conc	Acid Type	Qty	Conc %
Treatment Fld	Conc	Inhibitor	Conc	Sand Type	Size	Qty

Fluid Data

Stage/Plug #: 1		Fluid Name	Qty	Qty uom	Mixing Density lbm/gal	Yield ft ³ /sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk
1	MUD FLUSH III	MUD FLUSH III - SBM (528788)	10.00	bbl	8.4	.0	.0	.0	6.86
2	Premium Cement	HALCEM (TM) SYSTEM (452986)	330.0	sacks	14.8	1.55	6.86		
	6.864 Gal	FRESH WATER							
	10 %	SALT 10% (100003652)							
	10 %	CAL-SEAL 60, 50 LB BAG (101217146)							
	0.6 %	HALAD(R)-322, 50 LB (100003646)							
	5 lbm	KOL-SEAL, BULK (100064233)							
3	KCL Displacement		173	bbl	8.43	.0	.0	.0	
	167 lbm/Mgal	POTASSIUM CHLORIDE - KCL, 50 LB BAG (100001585)							
4	Premium (Rat and Mouse holes)	HALCEM (TM) SYSTEM (452986)	30.0	sacks	14.8	1.55	6.86		6.86
	6.864 Gal	FRESH WATER							
	10 %	SALT 10% (100003652)							
	10 %	CAL-SEAL 60, 50 LB BAG (101217146)							
	0.6 %	HALAD(R)-322, 50 LB (100003646)							
	5 lbm	KOL-SEAL, BULK (100064233)							

Volumes

Calculated Values		Pressures		Lost Returns		Cement Slurry		99	Pad
Displacement	173	Shut In: Instant		Cement Returns		Actual Displacement	173	Treatment	
Top Of Cement		5 Min		Spacers	10	Load and Breakdown		Total Job	282
Frac Gradient		15 Min							

Rates

Circulating	5	Mixing	9	Displacement	9	Avg. Job	8
Cement Left In Pipe	Amount	40 ft	Reason	Shoe Joint			
Frac Ring # 1 @	ID	Frac ring # 2 @	ID	Frac Ring # 3 @	ID	Frac Ring # 4 @	ID

Customer Representative Signature

David A. Mayfield

The Information Stated Herein Is Correct

ALLIED CEMENTING CO., LLC. 042694

PO. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge, KS

DATE <i>1-19-10</i>	SEC. <i>19</i>	TWP. <i>33S</i>	RANGE <i>24W</i>	CALLED OUT <i>5:00 AM.</i>	ON LOCATION <i>8:00 AM.</i>	JOB START <i>11:00 AM.</i>	JOB FINISH <i>12:00 PM.</i>
LEASE <i>McCarty</i>		WELL # <i>1-18</i>		LOCATION <i>West of Ashland to 1600</i>		COUNTY <i>Clark</i>	STATE <i>KS</i>
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<i>2830ct 3S, 1/2 E N/10</i>				

CONTRACTOR *Superior W/S*
 TYPE OF JOB *Squeeze*
 HOLE SIZE _____ T.D. _____
 CASING SIZE *5 1/2* DEPTH *7033 FT*
 TUBING SIZE *2 7/8* DEPTH *6875 FT*
 DRILL PIPE _____ DEPTH _____
 TOOL *Packer* DEPTH *6875 FT*
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT *Fresh water 40 BBLs*
 EQUIPMENT _____

OWNER *Midco*
 CEMENT
 AMOUNT ORDERED *115 sx class "A"*
 COMMON *A 15 sx @ 15.45 1776.75*
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
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PUMP TRUCK CEMENTER *David W.*
 # *372* HELPER *Darin F.*
 BULK TRUCK
 # *363/314* DRIVER *Ron B.*
 BULK TRUCK
 # _____ DRIVER _____

HANDLING *115 @ 2.40 276.00*
 MILEAGE *115/-10/30 345.00*
 TOTAL *2397.75*

REMARKS:

*Load back side with 3 BBLs, water load Tubing
 2 BBLs, Take INT Rate at 3 BBLs, Min at 1500 PSI
 Mix 115 sx class A Next Shut Down Wash
 Pump and lines, Displace 40 BBLs, Fresh water
 at 3 BBLs, Min 2200 PSI Shut in For 15 min
 PSI at 1300 Pump 1/4 BBLs, water shut in For 25 min
 PSI to 2000 Hold Reverse out with 45 BBLs, Pull
 8 stands Tubing PSI to*

SERVICE

DEPTH OF JOB *7033 FT*
 PUMP TRUCK CHARGE *2011.00*
 EXTRA FOOTAGE _____ @ _____
 MILEAGE *30 @ 7.00 210.00*
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: *Midco*
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL *2221.00*

PLUG & FLOAT EQUIPMENT

 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES ~~_____~~
 DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

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 *David H Mayfield*
 SIGNATURE *David H Mayfield*

Thank You!

ALLIED CEMENTING CO., LLC. 042700

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

SERVICE POINT:
Medicine Lodge, KS

DATE <i>1-26-16</i>	SEC. <i>19</i>	TWP. <i>33S</i>	RANGE <i>24 W</i>	CALLED OUT <i>6:30 A.M.</i>	ON LOCATION <i>7:00 A.M.</i>	JOB START <i>2:30 P.M.</i>	JOB FINISH <i>3:30 P.M.</i>	
LEASE <i>McClarty</i>	WELL # <i>1-19</i>	LOCATION <i>160 d 283 Jct 3S,</i>			COUNTY <i>Clark</i>	STATE <i>KS</i>		
OLD OR <u>NEW</u> (Circle one)			<i>1/2 E, Minto</i>					

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CONTRACTOR *Superior Well*

TYPE OF JOB *Squeeze Job*

HOLE SIZE _____ T.D. _____

CASING SIZE *5 1/2* DEPTH *7046 FT*

TUBING SIZE *2 7/8* DEPTH *6910 FT*

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX *3000 PST* MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. *1800 FT in Tubing*

PERFS. _____

DISPLACEMENT *Fresh Water 29 BBLs*

OWNER *Midco Exploration*

CEMENT

AMOUNT ORDERED *755x Class "A" + 1/4 #Flo Seal 15x cc*

COMMON <i>75 A</i>	@ <i>15 45</i>	<i>1158 25</i>
POZMIX _____	@ _____	_____
GEL _____	@ _____	_____
CHLORIDE <i>1 1/2 x</i>	@ <i>58 20</i>	<i>58 20</i>
ASC _____	@ _____	_____
<i>Flo seal 19</i>	@ <i>2.50</i>	<i>47 50</i>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <i>75</i>	@ <i>2.40</i>	<i>180 00</i>
MILEAGE <i>75.10/30</i>	<i>Min</i>	<i>312 00</i>
		TOTAL <i>1756 25</i>

EQUIPMENT

PUMP TRUCK CEMENTER *David W.*

471/303 HELPER *Scot P.*

BULK TRUCK

364 DRIVER *Matt T.*

BULK TRUCK

_____ DRIVER _____

REMARKS:

Load Backside with 1 BBL Fresh water PST to 750 Take Inj Rate at 1/4 BBLs/Min at 1700 PST Mix 405x Class "A" + 2% cc + 1/4 #Flo seal Tail with 35.5x Class "A" + 1/4 #Flo seal shot down Wash pump & lines Displace with 29 BBLs Fresh Water lock up at 2900 PST could NOT Recover out up wet Tubing out PST casing to 750 PST Wash up Rig Down.

SERVICE

DEPTH OF JOB *6910 FT*

PUMP TRUCK CHARGE *2011 00*

EXTRA FOOTAGE _____ @ _____

MILEAGE *30* @ *7 00* *210 00*

MANIFOLD *N/C* @ _____

_____ @ _____

_____ @ _____

TOTAL *2221 00*

CHARGE TO: *Midco Exploration*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
		TOTAL _____

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 *x David H Mayfield*

SIGNATURE *x David H Mayfield*

SALES TAX (If Any) _____

TOTAL CHARGES *2221 00*

DISCOUNT *_____* IF PAID IN 30 DAYS

Thank you