

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

3/15/12

OPERATOR: License # 5046
Name: Raymond Oil Company, Inc.
Address 1: PO BOX 48788
Address 2: _____
City: Wichita State: KS Zip: 67201 + _____
Contact Person: Ted McHenry
Phone: (316) 267-4214
CONTRACTOR: License # 34127
Name: Tomcat
Wellsite Geologist: Max Lovely
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: **RECEIVED MAR 18 2010**
Operator: _____
Well Name: **KCC WICHITA**
Original Comp. Date: _____ Original Total Depth: _____
_____ 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.: _____
12/29/2009 1/15/2010
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 203-20150-0000
Spot Description: _____
_____ SE NW Sec. 15 Twp. 20 S. R. 35 East West
1968 Feet from North / South Line of Section
1870 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wichita
Lease Name: D Trust Well #: 1
Field Name: WC
Producing Formation: _____
Elevation: Ground: 3112 Kelly Bushing: 3123
Total Depth: 5090 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 253 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.

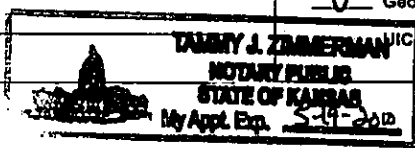
Drilling Fluid Management Plan **PANJ 4-5-10**
(Data must be collected from the Reserve Pit)
Chloride content: 25,000 ppm Fluid volume: 1800 bbls
Dewatering method used: Hauled
Location of fluid disposal if hauled offsite: _____
Operator Name: K & L Tank Service
Lease Name: Morris B-1 SWD License No.: 8757
Quarter _____ Sec. 19 Twp. 24 S. R. 31 East West
County: Finney Docket No.: D 16812

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: Ted McHenry
Title: Geologist Date: 3/15/12
Subscribed and sworn to before me this 15 day of March,
20 10.
Notary Public: Tammy J Zimmerman
Date Commission Expires: 5/19/2010

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received



Operator Name: Raymond Oil Company, Inc. Lease Name: D Trust Well #: 1
 Sec. 15 Twp. 20 S. R. 35 East West County: Wichita

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 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 <i>(Submit Copy)</i> List All E. Logs Run: Sonic Dual Ind N/D Log	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>B/ANH</td> <td>2248</td> <td>+875</td> </tr> <tr> <td>Tark</td> <td>3540</td> <td>-417</td> </tr> <tr> <td>HEEB</td> <td>3924</td> <td>-801</td> </tr> <tr> <td>LANS</td> <td>3971</td> <td>-848</td> </tr> <tr> <td>Ft Scott</td> <td>4600</td> <td>-1489</td> </tr> <tr> <td>Miss</td> <td>4882</td> <td>-1759</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	B/ANH	2248	+875	Tark	3540	-417	HEEB	3924	-801	LANS	3971	-848	Ft Scott	4600	-1489	Miss	4882	-1759
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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 5/8"	24#	253	Common	175	3% cc, 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 <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 Bbbs. _____ Gas Mcf _____ Water Bbbs. _____	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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ALLIED CEMENTING CO., LLC. 039078

REMIT PO BOX 11111
RUSSELL, KANSAS 67665

SERVICE POINT: Cathey

DATE <u>10/29/09</u>	SEC. <u>3</u>	TWP. <u>20</u>	RANGE <u>35</u>	CALLED OUT	ON LOCATION <u>11:00 AM</u>	JOB START <u>12:00 PM</u>	JOB FINISH <u>12:30 PM</u>
LEASE <u>LD Trust</u>	WELL # <u>#1</u>	LOCATION <u>Scott City S To Scott-Burg</u>			COUNTY <u>Wichita</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one) <u>NEW</u>		Line w to Rd 224 N E into					

CONTRACTOR Tom cat Drilling

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 253'

CASING SIZE 8 5/8 DEPTH 253'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 15.05

OWNER Same

CEMENT AMOUNT ORDERED 175 Com 370CC
2090 gal

EQUIPMENT

PUMP TRUCK # 421 CEMENTER Alex HELPER Rolly

BULK TRUCK # 397 DRIVER Jerry

BULK TRUCK # DRIVER

COMMON	<u>175</u>	@	<u>15.45</u>	<u>2703.75</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.00</u>	<u>60.00</u>
CHLORIDE	<u>6</u>	@	<u>58.00</u>	<u>348.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>184 SK</u>	@	<u>2.40</u>	<u>441.60</u>
MILEAGE	<u>100 SK/mile</u>	@		<u>1472.00</u>
				TOTAL <u>5228.95</u>

REMARKS:

Cement did Circulate

SERVICE

DEPTH OF JOB	<u>253'</u>	
PUMP TRUCK CHARGE	<u>1048.00</u>	
EXTRA FOOTAGE	@	
MILEAGE	<u>80</u>	@ <u>7.00</u> <u>560.00</u>
MANIFOLD	@	
	@	
	@	
		TOTAL <u>1578.00</u>

CHARGE TO: Raymond Oil Co

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>wooden Plug</u>	@	<u>68.00</u>
	@	
	@	
	@	
	@	
		TOTAL <u>68.00</u>

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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE Jesus Martinez

RECEIVED
 KANSAS CORPORATION COMMISSION

MAR 25 2010

CONSERVATION DIVISION
 WICKITA, KS

