



KANSAS CORPORATION COMMISSION 1075493
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

OPERATOR: License # 5602
Name: N & B Enterprises, Inc.
Address 1: PO BOX 812
Address 2: _____
City: CHANUTE State: KS Zip: 66720 + 0812
Contact Person: Richard Burris
Phone: (620) 431-6424
CONTRACTOR: License # 33783
Name: Michael Drilling LLC
Wellsite Geologist: Richard Burris
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 #: _____
03/30/2011 04/01/2011 04/01/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-001-30167-00-00
Spot Description: _____
NE NE NW NW Sec. 12 Twp. 24 S. R. 18 East West
5110 Feet from North / South Line of Section
4130 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Allen
Lease Name: Dean Kettle Well #: WD-1
Field Name: _____
Producing Formation: Tucker
Elevation: Ground: 985 Kelly Bushing: 5
Total Depth: 940 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 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: 0 ppm Fluid volume: 0 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: _____

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Deanna Garcia Date: 03/01/2012



1075493

Operator Name: N & B Enterprises, Inc. Lease Name: Dean Kettle Well #: WD-1
 Sec. 12 Twp. 24 S. R. 18 East West County: Allen

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
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CASING RECORD <input type="checkbox"/> New <input checked="" 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 Casing	12.2500	8.6250	21	20	50/50	4	

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	N & B Enterprises, Inc.
Well Name	Dean Kettle WD-1
Doc ID	1075493

Tops

Overburden	0	20
Lime	101	190
Red Bed	426	429
Sand and Shale	485	518
Coal Mulky	608	609
Oil sand	619	626
sand	856	940
TD	940	

Michael Drilling, LLC
P.O. Box 402
Iola, KS 66749
620-496-7795

040111

Company: N & B Enterprises, Inc.
Address: PO Box 812
Chanute Kansas 66720
Ordered By: Richard

Date: 04/01/11
Lease: Dean Kettle
County: Allen
Well#: WD-1
API#: 15-001-30167-00-00

Drilling Log

FEET	DESCRIPTION	FEET	DESCRIPTION
0-20	Overburden	815-856	Sand and Shale
20-50	Lime	856- 900 940	Sand
50-101	Lime with Shale Streaks	900 940	TD
101-190	Lime		
190-201	Shale		Surface 20'
201-241	Lime		
241-418	Shale		
418-421	Lime		
421-426	Shale		
426-429	Red Bed		
429-447	Shale		
447-450	Lime		
450-485	Shale		
485-518	Sand and Shale		
518-521	Coal		
521-552	Shale		
552-576	Lime		
576-594	Shale With lime		
594-602	Black Shale		
602-608	Lime		
608-609	Coal <i>mulky</i>		
609-619	Shale		
619-626	Oil Sand		
626-815	Shale		

802 N. Industrial Rd.
P.O. Box 664
Iola, Kansas 66749
Phone: (620) 365-5588

Payless Concrete Products, Inc.



CONDITIONS
Concrete to be delivered to the nearest accessible point over passable road, under truck's own power. Due to delivery of owner's or intermediary's direction, seller assumes no responsibility for damages in any manner to sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at customer's risk. The maximum allotted time for unloading trucks is 5 minutes per yard. A charge will be made for holding trucks longer. This concrete contains correct water contents for strength or mix indicated. We do not assume responsibility for strength loss when water is added at customer's request.

NOTICE TO DRIVER
Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract.

SOLD TO:
CASH CUSTOMER

*Plugging Cement
Well
Kettle Deep hole*

BUS/4
N&P ENTERPRISES
PO BOX 812
CHANDLER, KS 66720
155 1/2 SOUTH DAKOTA W 1/4 MI
ARTER COUNTY WELL# W041

TIME	FORMULA	LOAD SIZE	YARDS ORDERED	YARDS DEL.	DRIVER/TRUCK	PLANT/TRANSACTION #
12:43:27P	WELL	11.50 yd	11.50 yd	11.50 yd	SB 34	A HIR 0.00
TIME	FORMULA	LOAD SIZE	YARDS ORDERED	YARDS DEL.	DRIVER/TRUCK	PLANT/TRANSACTION #
07:01			11.50 yd	11.50 yd		

WARNING
IRI-TA-1010 THE SKIN AND EYES
This material is highly caustic and should be handled with care. Avoid contact with skin and eyes. If contact occurs, flush immediately with large amounts of water. If contact with eyes occurs, flush immediately with large amounts of water. If contact with skin occurs, flush immediately with large amounts of water. If contact with clothing occurs, remove clothing immediately. If contact with eyes occurs, flush immediately with large amounts of water. If contact with skin occurs, flush immediately with large amounts of water. If contact with clothing occurs, remove clothing immediately.

PROPERTY DAMAGE RELEASE
(TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)
Due Customer-The driver of this truck is presenting this RELEASE for your signature if delivery is to be made inside your curb line. If you do not sign this RELEASE, you are responsible for any damage to your property, including but not limited to, but not restricted to, sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at your risk. This RELEASE is not valid unless signed by you or your authorized representative. If you do not sign this RELEASE, you are responsible for any damage to your property, including but not limited to, but not restricted to, sidewalks, roadways, driveways, buildings, trees, shrubbery, etc., which are at your risk. This RELEASE is not valid unless signed by you or your authorized representative.

EXCESSIVE WATER IS DETRIMENTAL TO CONCRETE PERFORMANCE
H₂O Added By Request/Authorized By
GAL X
Weighmaster: *[Signature]*

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE.

LONG RECEIVED BY: _____

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
11.50	WELL (10 BAGS PER UNIT)	11.50	76.00
1.00	TRUCKING CHARGE	50.00	50.00
			874.00

RETURNED TO PLANT	LEFT JOB	FINISH UNLOADING	DELAY EXPLANATION (LIMITED TO 100 CHARACTERS)	TIME ALLOWED	Subtotal \$	924.00
					Tax % 7.550	69.76
					Total \$	993.76
					Order \$	993.76
					ADDITIONAL CHARGE 1	
					ADDITIONAL CHARGE 2	
					GRAND TOTAL	

Iola, Kansas, MARCH 27, 2011

Received of

THE NEW KLEIN LUMBER CO., INC.
BUILDING MATERIALS
369-2201

Surface
Cement

4 Sacks Cement	37 ⁰⁰
Sale Tax	3 ²⁵

41⁰³

PAID