

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

2/19/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address 1: 125 N. Market
Address 2: Suite 1000
City: Wichita State: KS Zip: 67202 +
Contact Person: Dean Pattisson
Phone: (316) 267-4379 (ext. 107) **KCC**
CONTRACTOR: License # 34233 **FEB 19 2010**
Name: Maverick Drilling LLC **CONFIDENTIAL**
Wellsite Geologist: NONE

Purchaser: PLAINS MARKETING / BLUESTEM GAS MARKETING

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: n/a

Well Name: _____

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.: _____

10/26/2009 11/04/2009 12/01/2009

Spud Date or ~~Recompletion Date~~ Date Reached TD Completion Date or ~~Recompletion Date~~

API No. 15 - 007-23462-00-00

Spot Description: _____

NW SW SE NW Sec. 19 Twp. 34 S. R. 11 East West

2000 Feet from North / South Line of Section

1340 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Barber

Lease Name: LOGAN X Well #: 9

Field Name: Stranathan

Producing Formation: Mississippian

Elevation: Ground: 1440 Kelly Bushing: 1451

Total Depth: 5272 Plug Back Total Depth: 5095

Amount of Surface Pipe Set and Cemented at: 219 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 **AHINS 2-26-10**
(Data must be collected from the Reserve Pit)

Chloride content: 28,000 ppm Fluid volume: 1800 bbls

Dewatering method used: Haul free fluids and allow to dry

Location of fluid disposal if hauled offsite:

Operator Name: WOOLSEY OPERATING COMPANY, LLC

Lease Name: Harbaugh 2 SWD License No.: 33168

Quarter NW Sec. 20 Twp. 34 S. R. 11 East West

County: Barber Docket No.: D - 30,333

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: Dean Pattisson Date: February 19, 2010
Exploration and Production Manager

Subscribed and sworn to before me this 19th day of February

20 10

Notary Public: Debra K. Clingan
Debra K. Clingan

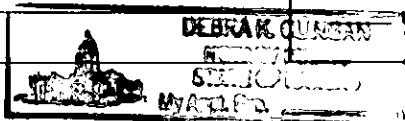
Date Commission Expires: March 27, 2010

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes No Date: KANSAS CORPORATION COMMISSION
 Wireline Log Received
 Geologist Report Received **FEB 22 2010**

WIC Distribution

CONSERVATION DIVISION
WICHITA, KS



Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: LOGAN X Well #: 9
 Sec. 19 Twp. 34 S. R. 11 East West County: Barber

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chase	1876 - 425
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Douglas	3801 - 2350
List All E. Logs Run: Neutron Density Dual Induction Cement Bond	KCC FEB 19 2010 CONFIDENTIAL	Hertha	4479 - 3028
		Mississippian	4702 - 3231
		Viola	5044 - 3593
		Simpson	5166 - 3715
		Arbuckle	DNP

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	14 3/4"	10 3/4"	32# / ft	219	Class A	225	2% gel, 3% cc
Production	7 7/8"	4 1/2"	10.5# / ft	5130	60/40 poz	50	4% gel, 1/4# Floseal
					Class H	225	10% salt, 10% Gypseal, 1/4# Floseal, 6# Kolseal, ClaPro & .8% FL160

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				

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FEB 22 2010

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>	
		WICHITA, KS Depth	
4	Perf Miss zone 4682'-4688', 4692'-4694' & 4704'-4726'	ACID: 4800 GAL 10% MIRA	4682' -
2	Perf Miss zone 4734'-4754', 4790'-4816' & 4862'-4878'	FRAC: 459,800 gal treated 2% KCI wtr,	4878' OA
		168,600# 30/70 sd, 30,000# 16/30 sd	
		& 18,000# 16/30 resin coated sd	

TUBING RECORD: Size: 2 3/8" Set At: 4758' Packer At: n/a Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. 01/04/2010 Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>30</u>	Gas Mcf <u>300</u>	Water Bbls. <u>150</u>	Gas-Oil Ratio <u>10,000 : 1</u>	Gravity <u>23.6</u>
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4682' - 4878' OA</u>
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ALLIED CEMENTING CO., LLC. 043003

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

SERVICE POINT:
Medicine Lodge, KS

DATE <i>11 05 09</i>	SEC. <i>19</i>	TWP. <i>34N</i>	RANGE <i>11W</i>	CALLED OUT <i>2:00pm</i>	ON LOCATION	JOB START <i>2:15pm</i>	JOB FINISH <i>8:15pm</i>
LEASE <i>Logan X</i>		WELL # <i>9</i>		LOCATION <i>Medicine Lodge, KS 1/4 S, E/4 NW</i>		COUNTY <i>Barber</i>	STATE <i>KS</i>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <i>Maverick</i>	OWNER <i>Woolsey</i>
TYPE OF JOB <i>Production Casing</i>	
HOLE SIZE <i>7 7/8</i>	T.D. <i>5272</i>
CASING SIZE <i>4 1/2</i>	DEPTH <i>5138</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <i>1600</i>	MINIMUM <i>-</i>
MEAS. LINE	SHOE JOINT <i>34</i>
CEMENT LEFT IN CSG. <i>34</i>	
PERFS.	
DISPLACEMENT <i>8 1/2 Bbls 2% KCl Water</i>	

CEMENT	AMOUNT ORDERED <i>75sx 60:40:4% ggt + 1/4#</i>
	<i>Floresal & 2.25sx H + 10% ggt + 10% ggt + 6#</i>
	<i>Kalscal + 1/4# Floresal + 8% FE 760 & 9gal Clapro</i>
COMMON	<i>45 A sx @ 15.45 695.25</i>
POZMIX	<i>.30 sx @ 8.00 240.00</i>
GEL	<i>2 sx @ 20.00 40.00</i>
CHLORIDE	@
ASC	@
<i>Class H</i>	<i>225 sx @ 16.75 3768.75</i>
<i>Byrseal</i>	<i>21 @ 29.00 613.00</i>
<i>Salt</i>	<i>24 @ 12.00 288.00</i>
<i>Fl-160</i>	<i>169 @ 13.00 2247.00</i>
<i>Kalscal</i>	<i>#1350 @ .89 1201.50</i>
<i>Clapro</i>	<i>9 gal @ 31.25 281.25</i>
<i>Floresal</i>	<i>75 @ 2.50 187.50</i>
HANDLING	<i>300 @ 2.40 720.00</i>
MILEAGE <i>15 / .10 / 30 sx</i>	<i>450.00</i>
TOTAL <i>10,734.50</i>	

EQUIPMENT

PUMP TRUCK # <i>372</i>	CEMENTER <i>D. Felia</i>
	HELPER <i>D. Franklin</i>
BULK TRUCK # <i>421-251</i>	DRIVER <i>S. Priddy</i>
BULK TRUCK #	DRIVER WELL FILL

Regulatory Correspondence
Drilling Comp Workovers
REMARKS: / Meters Operations

*Pipe on Bttm, Break Circ, Plug Root Hole
& Move hole w/ 2.25sx 60:40 Cement Blend,
Pump 50sx Scavenger Cement Mix 2.25sx
tail Cement, Stop Pump, Wash Pump & Lines,
Release Plug, Start Disp. w/ 2% KCl
Water, See Standby Increase in PST, Slow Rate
Bump Plug at 8 1/2 Bbls
total Disp., Release PST, Float Did Hold*

SERVICE

DEPTH OF JOB <i>5138</i>	
PUMP TRUCK CHARGE	<i>2185.00</i>
EXTRA FOOTAGE	@
MILEAGE <i>15</i>	<i>@ 7.00 105.00</i>
MANIFOLD	@
<i>Head Rental</i>	<i>@ n/c</i>
	@
TOTAL <i>2290.00</i>	

CHARGE TO: *Woolsey Oper.*
STREET _____
CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<i>1- AFU Float Shoe</i>	@	<i>205.00</i>
<i>1- Latch down Plug 1754</i>	@	<i>145.00</i>
<i>14- turbolizers</i>	@	<i>37.00 529.00</i>
<i>30- Scratchers</i>	@	<i>55.00 1669.00</i>
	@	
TOTAL <i>2548.00</i>		

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 *MIKE THARP*
SIGNATURE *Mike Tharp*

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____
RECEIVED
KANSAS CORPORATION COMMISSION
PAID

FEB 22 2010

CONSERVATION DIVISION
WICHITA, KS

KCC
FEB 19 2010
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