



KANSAS CORPORATION COMMISSION 1075908
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 # 33019
Name: Rosewood Resources, Inc.
Address 1: 2101 CEDAR SPRINGS RD, STE 1500
Address 2: _____
City: DALLAS State: TX Zip: 75201 + _____
Contact Person: Tom Roelfs
Phone: (970) 324-1686
CONTRACTOR: License # 33532
Name: Advanced Drilling Technologies LLC
Wellsite Geologist: Steven VonFeldt
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 #: _____

<u>02/28/2011</u>	<u>03/13/2011</u>	<u>03/14/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-023-21306-00-00

Spot Description: _____

NW SE NE SW Sec. 9 Twp. 3 S. R. 41 East West

1800 Feet from North / South Line of Section

2300 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Cheyenne

Lease Name: Walters Well #: 1-9

Field Name: _____

Producing Formation: Niobrara

Elevation: Ground: 3595 Kelly Bushing: 3600

Total Depth: 5382 Plug Back Total Depth: 5333

Amount of Surface Pipe Set and Cemented at: 305 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: 5000 ppm Fluid volume: 220 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 Gantzer Date: 03/12/2012



1075908

Operator Name: Rosewood Resources, Inc. Lease Name: Walters Well #: 1-9
 Sec. 9 Twp. 3 S. R. 41 East West County: Cheyenne

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 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 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 Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Compensated Porosity Log Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Niobrara KB
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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	12.25	8.63	24	304	3% gel 2% cc	185	
Production	6.25	4.5	11.6	5380	B3-LITE	741	

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
4	4517' to 4531'	2500 GALS 7 1/2% HCL ACID	

TUBING RECORD: Size: <u>2 3/8</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" 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 Bbls. <u>0</u>	Gas Mcf <u>0</u>	Water Bbls. <u>0</u> 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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input checked="" type="checkbox"/> Other (Specify) <u>Temp. Abd.</u>	PRODUCTION INTERVAL: _____ _____
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BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
Denver, Colorado 80202
Phone: 303-298-3010
Fax: 303-298-8143
E-mail: bisonoil@qwestoffice.net

REF. INVOICE # 4891

LOCATION St. Francis

FOREMAN Randy Newton

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	REE	COUNTY	FORMATION
3-17-11	Walter 1-9	9	35	41W	Chryseas	St
CHARGE TO <u>Rosewood oil</u>			OWNER <u>Rosewood oil</u>			
MAILING ADDRESS			OPERATOR			
CITY			CONTRACTOR <u>NW Drilling R32</u>			
STATE ZIP CODE			DISTRICT TO LOCATION <u>79mi</u>			
TIME ARRIVED ON LOCATION <u>9:00 p.m.</u>			TIME LEFT LOCATION <u>6:00am</u>			

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>7 7/8</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>5782</u>	TUBING DEPTH	SHOULDER	SURFACE PIPE ANNULLUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>4 1/2"</u>	TUBING CONDITION		TUBING		
CASING DEPTH <u>5782</u>	<u>PROD 5782</u>	TREATMENT VA	TYPES OF TREATMENT		TREATMENT RATE
CASING WEIGHT <u>116#</u>	PACKER DEPTH		<input type="checkbox"/> SURFACE PIP	BREAKDOWN BPM	
CASING CONDITION <u>Good</u>	<u>Drill 1722-</u>		<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
PRESSURE SUMMARY			<input type="checkbox"/> ROZZE CEMENT	FINAL BPM	
BREAKDOWN or CIRCULATING psi	AVERAGE psi		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM	
FINAL DISPLACEMENT psi	ISP psi		<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM	
ANNULLUS psi	9 INCH SIP psi		<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM	
MAXIMUM psi	15 INCH SIP psi		<input type="checkbox"/> MISC PUMP		
MINIMUM psi			<input type="checkbox"/> OTHER	HYD MAP = RATE X PRESSURE X 40.1	

INSTRUCTIONS PRIOR TO JOB MTRU 5m circ 10 bbls water mtp, 741.4 shs of 22/12 @ 13.8/10 gal
Water cap at 9.7 gal/sh 171.2 bbl mtr water yield of 1.35 cu ft/sh covering from 1722-
1722' = 3660' Displace w/ 12.6 bbls mud 2nd cement circ 10 bbl mtr 348.8 shs w
80.5 bbls mtr water covering 1722- surface Displace w/ 26.7 bbl water
20% excess as per Tom Ruth company man

JOB SUMMARY						
DESCRIPTION OF JOB EVENTS	MTRU	5m	circ	mtp	Displace	2nd circ
	11:30 a.m.	12:45 a.m.	1:25 a.m.	1:30 a.m.	2:50 a.m.	3:45
					25210	700
MTP	Displace	land plug	circ down		20	20500
407	5:20	5:20	5:40		37	30550
	5:25	10			20	40000
	5:28	20	300		3:08	50000
	5:30	267	900		3:58	40000
					3:49	70000
					3:50	80000
					3:57	82600

Log moved casing on last cement 3'
circulated cement after 1st cement to pit
Weathered hot plug would not pass thru head
waited 1 1/2 mins between cement
and Displace on 2nd cement

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____
Customer hereby authorizes the undersigned to perform the services of the work group, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.