



KANSAS CORPORATION COMMISSION 1078297
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 # 5399
Name: American Energies Corporation
Address 1: 155 N MARKET STE 710
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 1821
Contact Person: Mindy Wooten
Phone: (316) 201-1134
CONTRACTOR: License # 31528
Name: Mike Kelso Oil, Inc.
Wellsite Geologist: None
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: South Bay Oil Corp.
Well Name: Willard Stucky #1
Original Comp. Date: 06/04/1990 Original Total Depth: 3688
 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 #: _____
12/01/2011 12/04/2011 12/07/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-113-21227-00-01
Spot Description: _____
SW NE SE Sec. 35 Twp. 21 S. R. 3 East West
1650 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: McPherson
Lease Name: Willard Stucky Well #: 1
Field Name: Harmac
Producing Formation: Hunton
Elevation: Ground: 1452 Kelly Bushing: 1459
Total Depth: 3668 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 262 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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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 Garbar Date: 04/12/2012



1078297

Operator Name: American Energies Corporation Lease Name: Willard Stucky Well #: 1
 Sec. 35 Twp. 21 S. R. 3 East West County: McPherson

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 None None None
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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	12.50	8.6250	23	256	Common	175	
Production	7.8750	5.5	15.5	3634	60/40 Poz	125	18% Salt, 2% Gel

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	Hunton		3524-3526
	Hunton	500 gallons MCA Mud Acid	3524-3526

TUBING RECORD:	Size: <u>2.8750</u>	Set At: <u>3493</u>	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>01/25/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>Rotor Screw Pump</u>		
Estimated Production Per 24 Hours	Oil Bbbs. <u>5</u>	Gas Mcf	Water Bbbs. <u>400</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 checked="" 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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COPELAND

Acid & Cement

BURRTON, KS (620) 463-5181
GREAT BEND, KS (620) 793-3366
FAX (620) 463-2104 FAX (620) 793-3536

POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

Invoice

DEC 19 2011

INVOICE NUMBER:
C37841-IN

BILL TO:
AMERICAN ENERGIES CORP.
P.O. BOX 516
CANTON, KS 67428

LEASE: WILLARD STUCKEY #1--193008

10572128.001

ENTERED 12-21-11 ET

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
12/16/2011	C37841		12/12/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
1.00	EA	CENTRIFUCAL PUMP CHARGE		0.00	325.00	325.00
500.00	GAL	15% MUD ACID		0.00	2.05	1,025.00
1.00	GAL	CORROSION INHIBITOR		0.00	35.00	35.00
18.00	MI	MILEAGE PUMP TRUCK		0.00	4.00	72.00
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP-B		Net Invoice:		1,457.00
RECEIVED BY _____		FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.		MCPCO Sales Tax:		23.73
				Invoice Total:		<u>1,480.73</u>
		NET 30 DAYS				

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



FIELD ORDER N° C 37841

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE Dec 12 20 11

IS AUTHORIZED BY: American Energy Corp
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Willard Stucky Well No. 2 Customer Order No. _____

Sec. Twp. Range _____ County McPherson State Ks

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	1	Delivery Charge w/ centrifugal pump		325 ⁰⁰
	500 gal	15% NREA 207 gal		1025 ⁰⁰
	5 gal	Retractor supplied by American Energy		—
	1 gal	Copeland White 350 gal		35 ⁰⁰
	18 milk	lucy milk 40 milk		72 ⁰⁰
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on _____ Gallons		
		TOTAL BILLING		<u>1457⁰⁰</u>

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station Buck

Well Owner, Operator or Agent

Remarks Return over truck with cancelled pump @ 160⁰⁰

NET 30 DAYS

COPELAND

Acid & Cement

POST OFFICE BOX 438
HAYSVILLE, KS 67060
(316) 524-1225
(316) 524-1027 FAX

Invoice

Page: 1

DEC 16 2011

BURRTON, KS (820) 483-5161
GREAT BEND, KS (620) 793-3366
FAX (620) 483-2104 FAX (620) 793-3538

INVOICE NUMBER:
C39459-IN

BILL TO:
AMERICAN ENERGIES CORP.
P.O. BOX 516
CANTON, KS 67428

LEASE: WILLARD STUCKY 1 - 193014

#10572128.001

ENTERED 12-21-11 ET

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
12/14/2011	C39459		12/03/2011		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
40.00	MI	CEMENT MILEAGE PUMP TRUCK		0.00	4.00	160.00
40.00	MI	CEMENT MILEAGE PU TRUCK		0.00	2.00	80.00
1.00	EA	CEMENT PUMP CHARGE		0.00	1,600.00	1,600.00
125.00	SAX	60-40 POZ MIX 2% GEL		0.00	9.25	1,156.25
1,050.00	LB	SALT		0.00	0.18	189.00
50.00	LB	FRICTION REDUCER C-37		0.00	3.75	187.50
600.00	LB	MUD FLUSH		0.00	0.80	480.00
6.00	HR	ADDITIONAL TIME		0.00	100.00	600.00
5.00	EA	5 1/2" CENTRALIZERS		0.00	65.00	325.00
1.00	EA	5 1/2" INSERT FLOAT SHOE		0.00	285.00	285.00
1.00	EA	5 1/2" WIPER PLUG		0.00	65.00	65.00
147.00	EA	BULK CHARGE		0.00	1.25	183.75
242.00	MI	BULK TRUCK - TON MILES		0.00	1.10	266.20
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP		Net Invoice:		5,577.70
RECEIVED BY		NET 30 DAYS		MPCCO Sales Tax:		209.88
				Invoice Total:		5,787.58

There will be a charge of 1.5% "per month" (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service

Gressel Oil Field Service reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code



FIELD ORDER N° C 30489

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

DATE 10/3/71 20

IS AUTHORIZED BY: Amos E. Francis
(NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease 1-11-11-11-11 Well No. 1 Customer Order No. _____

Sec. Twp. _____ Range _____ County McPherson State KS

CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 8% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By _____

Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	110	water pump tank	11.00	1210.00
	110	water pickup	7.00	770.00
	1	Pump Churn (long string)		1000.00
	105	40/100 gal. 70% sol	9.00	945.00
	1.500 [±]	Salt	.15	225.00
	50	C-37 (Injection Product)	3.50	175.00
	60 gal	mult. flush	.80	48.00
	6	Watermeter chng	18.00	108.00
	4	5/8" Conduits	8.50	34.00
	1	5/8" Insulated Steel Shoe		75.00
	1	5/8" copper plug		6.00
	147	Bulk Charge	1.00	147.00
		Bulk Truck Miles (6.5 x 1.10 = 7.15 miles)	1.00	7.15
		Process License Fee on Gallons		
		TOTAL BILLING		5,577.00

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative Amos E. Francis

Station G-3

Amos E. Francis
Well Owner, Operator or Agent

Remarks _____

NET 30 DAYS



TREATMENT REPORT

Acid Stage No.

Date 12/3-4/11 District G.B. F. O. No. C39459
 Company American Engrs Inc
 Well Name & No. Willard Street #1
 Location Field
 County McPherson State KS

Type Treatment: Amt. Type Fluid Sand Size Pounds of Sand
 Bkdown.....Bbl./Gal.
Bbl./Gal.
Bbl./Gal.
Bbl./Gal.
 FlushBbl./Gal.
 Treated from.....ft. to.....ft. No. ft.
 from.....ft. to.....ft. No. ft.
 from.....ft. to.....ft. No. ft.

Casing: Size 5 1/2" Type & Wt. Set at.....ft.
 Formation:..... Perf.....to.....
 Formation:..... Perf.....to.....
 Formation:..... Perf.....to.....
 Liner: Size..... Type & Wt. Top at.....ft. Bottom at.....ft.
 Cemented: Yes/No. Perforated from.....ft. to.....ft.
 Tubing: Size & Wt. Swung at.....ft.
 Perforated from.....ft. to.....ft.
 (Ann Hole Size..... T.H.ft. P.H. to.....ft.)

Actual Volume of Oil/Water to Load Hole:Bbl./Gal.
 Pump Trucks, No. Used: Bld. 300Twin.....
 Auxiliary Equipment 327
 Packer:..... Set at.....ft.
 Auxiliary Tools.....
 Plugging or Sealing Materials: Type.....

Company Representative Mike K. Treater Nathan W.

TIME a.m. / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
9:30	5 7/8"	7 1/2"		On location.
:				Pump drilling mud.
:				
:			10/4/11	5 1/2" @ 3634'
:				S.S. 33'
:				Brack = 3601'
:				Break circulation - w/ mud.
:				Pump 800 gal. mud flush.
:				Mix 125 gals. 50% w/ 2% sol. 10% salt 1/2% CFB.
:				Displace w/ 27.9 bbls. @ 1/2 bpm @ 725 #
:				Plugs landed @ 1,300 #
:				Released. Float held.
10:35				Shut in w/ 500 #
:				Thank You!
:				Nathan W.