

ORIGINAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form AGO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 33640
Name: Haas Petroleum, LLC
Address 1: 11551 Ash Street, # 205
Address 2: _____
City: Leawood State: KS Zip: 66211 + _____
Contact Person: Mark Haas
Phone: (913) 499-8373
CONTRACTOR: License # 32079
Name: Leis Oil Services
Wellsite Geologist: _____
Purchaser: Plains Marketing, LP

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 #: _____

5/6/10	5/7/10	5/11/10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25483-00-00
Spot Description: _____
SW NE NW _____ Sec. 8 Twp. 16 S. R. 21 East West
4,290 ~~4,299~~ Feet from North / South Line of Section
8,625 ~~3622~~ Feet from East / West Line of Section
GPS-KCC
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Franklin
Lease Name: W-Lidikay Well #: I-1 HP
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 981 Kelly Bushing: _____
Total Depth: 735 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 22 w/ 20 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 #: _____

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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.

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.

Signature: _____
Title: Operator Date: 3/23/12

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: DJG Date: 4/17/12

Operator Name: Haas Petroleum, LLC Lease Name: W-Lidikay Well #: I-1 HP
 Sec. 8 Twp. 16 S. R. 21 East West County: Franklin

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" 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
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CASING RECORD <input 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	9 7/8	7"		22'	Regular	20	
Longstring	5 5/8	2 7/8		729'	50/50 Pozmix	80	

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
	Perforated from 684.0 to 693.0		
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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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 26889

LOCATION Ottawa, KS

FOREMAN Tom Green

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
05-07-10	3451	# T-11P Well Lid: 19	NW 1/4 8	16	21	ER
CUSTOMER <u>Huss Petroleum</u>			TRUCK #			
MAILING ADDRESS <u>800 W 47th St 716</u>			DRIVER			
CITY <u>Kansas City</u>			TRUCK #			
STATE <u>MO.</u>			DRIVER			
ZIP CODE <u>64112</u>			TRUCK #			
			DRIVER			

JOB TYPE Longstring HOLE SIZE 5 7/8" HOLE DEPTH 733' CASING SIZE & WEIGHT 2 3/8" EUEB
 CASING DEPTH 729' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Establish circulation, mix and pump 100' Premium gel to flush hole. Mix and pump 90 sk 50/50 Poz Mix cement 2 1/2' gel. Flush pump clear of cement. Pump 2 1/2" rubber plug to total depth of casing. Circulating cement to surface. Pressure well up to 700' PSI. Well held good set float.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	One	PUMP CHARGE Cement Pump		900.00
5406	1/2 of 15	MILEAGE Pump TK Mileage		26.63
5407	1/2 of Min	Bulk TK Ton		152.50
5502L	1 1/2 HR	Vac TK		144.00
1124	8 SK	50/50 Poz Mix Cement	RECEIVED	840.40
118B	295'	Premium Gel	MAR 26 2012	50.85
4402	One	2 1/2" Rubber Plug		23.17
KCC WICHITA				
wo # 234223				
SALES TAX				62.12
ESTIMATED TOTAL				2,190.80

Revin 3737

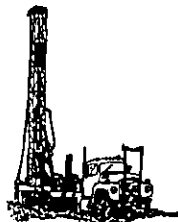
AUTHORIZATION Steve Honor

TITLE _____

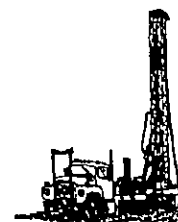
DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

97/8'



LEIS OIL SERVICES



111 East Mary • Yates Center, Kansas 66783 • (620) 625-3676

Operator License #: 33640		API: 059-25483-00-00	
Operator: Haas Petroleum, LLC		Lease Name: W. Lidikay	
Address: 800 W. 47 th , Suite 409		Well #: I-1HP	
Phone #: (816) 531-5922		Spud Date: 05/06/10 Completed: 05/07/10	
Contractor License #: 32079		Location: SW-NE-NW of 8-16-21E	
T.D.: 735	T.D. of Pipe: 730	4290 Ft from South	Line
Surface Pipe Size: 7"	Depth: 22'	3625 Ft from East	Line
Kind of Well : Enc Rec		County: Franklin	

LOG

Thickness	Strata	From	To	Thickness	Strata	From	To
4	Soil	0	4	18	Shale	640	658
25	Clay	4	29	17	Lime	658	675
22	Lime	29	51	9	Shale	675	684
7	Shale	51	58	2	Sand w/ Shale	684	686
2	Black Shale	58	60	6	Oil Sand	686	692
11	Lime	60	71	43	Sandy Shale	692	735
3	Shale	71	74				
21	Lime	74	95				
39	Shale	95	134				
17	Lime	134	151				
80	Shale	151	231				
21	Lime	231	252				
27	Shale	252	279				
6	Lime	279	285				
24	Shale	285	309				
3	Lime	309	312				
33	Shale	312	345				
22	Lime	345	367				
10	Shale	367	377				
22	Lime	377	399				
5	Shale	399	404				
2	Lime	404	406				
181	Shale	406	587		T.D.		735
7	Lime	587	594		T.D. of pipe		730
43	Shale	594	637				
3	Lime	637	640				

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