

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 (Corr, 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 #: _____

5/3/10 5/4/10 5/10/10

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

API No. 15 - 059-25485-00-00

Spot Description: _____

N SW NE NW Sec. 8 Twp. 16 S. R. 21 East West

4,950 4962 Feet from North / South Line of Section

2,625 3609 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-3HP

Field Name: Paola-Rantoul

Producing Formation: Squirrel

Elevation: Ground: 981 Kelly Bushing: _____

Total Depth: 725 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 cm.

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: [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: [Signature] Date: 4/17/12

Operator Name: Haas Petroleum, LLC Lease Name: W-Lidikay Well #: I-3HP
 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		721'	50/50 Pozmix	79	

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 682.0 to 692.0		

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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 Bbls.	Gas Mcf	Water Bbls. 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) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 26862

LOCATION Ottawa KS

FOREMAN Fred Maden

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/6/10	3451	W. Lidi Kay # I3HP	NW 8	16	21	FR
CUSTOMER Hags Petroleum			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 800 W 47 th St Ste. 409			506	Fred	Safety Mtg	
CITY STATE ZIP CODE Kansas City Mo. 64112			368	Alan		
			548	Derek	DM	
			369	Chuck	CWL	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 740' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 721' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 2 7/8" Plug.
 DISPLACEMENT 4.2 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 100' Premium Gel Flush
Mix + Pump 81 SKS 50/50 Por Mix Cement 2 7/8" Gel. Cement
to surface. Flush pump + lines clean. Displace 2 7/8" Rubber
Plug to casing TD w/ 4.2 BBL Freshwater Pressure to 750" PSI
Release pressure to set float valve. Shut in casing

J Hais Drilling.

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Cement Pump</u>		900 ⁰⁰
5406	-0-	MILEAGE <u>Trucks on lease</u>		N/C
5402	721'	Casing Footage		N/C
5407A	1/2 minimum	Ton Miles.		152 ⁵⁹
5502C	1 1/2 hrs	80 BBL Vac Truck		144 ⁰⁰
1124	79 sks	50/50 Por Mix Cement		754 ²⁵
1118B	236 ⁰⁰	Premium Gel		40 ¹²
4402	1	2 7/8" Rubber Plug		23 ⁰⁰
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				<u>WO 234209</u>
				6.5%
				SALES TAX
				ESTIMATED TOTAL
				55 ⁵⁹
				2069,66

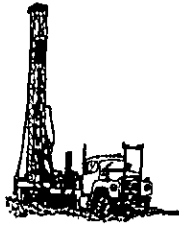
Revin 3737

AUTHORIZATION

TITLE _____

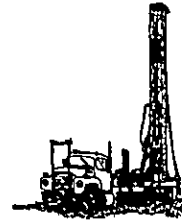
DATE _____

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.



LEIS OIL SERVICES

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



Operator License #: 33640	API: 059-25485-00-00
Operator: Haas Petroleum, LLC	Lease Name: W. Lidikay
Address: 800 W. 47 th , Suite 409	Well #: I-3HP
Phone #: (816) 531-5922	Spud Date: 05/03/10 Completed: 05/04/10
Contractor License #: 32079	Location: SW-NE-NW of 8-16-21E
T.D.: 725 T.D. of Pipe: 721	4950 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	3	Lime	409	412
19	Clay	4	23	171	Shale	412	583
1	Gravel	23	24	8	Lime	583	591
26	Lime	24	50	9	Shale	591	600
5	Shale	50	55	5	Lime	600	605
2	Black Shale	55	57	29	Shale	605	634
11	Lime	57	68	3	Lime	634	637
3	Shale	68	71	17	Shale	637	654
21	Lime	71	92	5	Lime	654	659
38	Shale	92	130	7	Shale	659	666
15	Lime	130	145	1	Lime	666	667
81	Shale	145	226	6	Shale	667	673
22	Lime	226	248	2	Lime	673	675
31	Shale	248	279	3	Shale	675	678
3	Lime	279	282	1	Lime	678	679
17	Shale	282	299	2	Shale	679	681
2	Red Shale	299	301	2	Shale w/ Oil	681	683
4	Shale	301	305	6	Oil Sand	683	689
4	Lime	305	309	6	Shale w/ Oil	689	695
32	Shale	309	341	30	Shale	695	725
23	Lime	341	364				
11	Shale	364	375				
21	Lime	375	396		T.D.		725
5	Shale	396	401		T.D. of pipe		721
4	Lime	401	405				
4	Shale	405	409				

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