



KANSAS CORPORATION COMMISSION
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 # 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 #: _____

10/19/11 10/20/11 10/25/11
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 059-25536-00-00
Spot Description: _____
NE SW SW Sec. 5 Twp. 16 S. R. 21 East West
365 Feet from North / South Line of Section
365 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: W-Lidikay Well #: I-4HP
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: 974 Kelly Bushing: _____
Total Depth: 760 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: _____
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: Dig Date: 4/17/12

Operator Name: Haas Petroleum, LLC Lease Name: W-Lidikay Well #: I-4HP
 Sec. 5 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"		20'	Regular	20	
Longstring	6 1/4	2 7/8		747'	50/50 Pozmix	124	

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 (Amount and Kind of Material Used)	Depth
	Perforated 687.0 to 701.0		

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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)</i> <i>(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

FIELD TICKET & TREATMENT REPORT
CEMENT

TICKET NUMBER 32981
LOCATION Ottawa KS
FOREMAN Fred Maden

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/20/11	3451	Lid: Kay #4 I	SW 5	16	21	FR

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
Haas Petroleum	501	FREMAN	Safety Inc	
	495	HARIBEC	JB	
	369	DERMAS	DM	
	503	KEICAR	KC	

MAILING ADDRESS	CITY	STATE	ZIP CODE
800 W. 47 th St. Ste 716	Kansas City	Mo	64112

JOB TYPE Long string HOLE SIZE 6 1/4 HOLE DEPTH 760 CASING SIZE & WEIGHT 2 1/8 EUE
 CASING DEPTH 745 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2" Plug
 DISPLACEMENT 4.34 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish circulation. Mix + Pump 700# Premium Gel. Flush.
Mix + Pump 124 sks 50/50 Por Mix Cement 2% Gel.
Cement to surface. Flush pump + lines clean. Displace 2 1/2"
rubber Plug to casing TD w/ 4.34 BBL Fresh water.
Pressure to 700# PSI. Hold pressure for 30 min MIT.
Release pressure to set float valve. Shut in casing.

KCC Rep: [Signature]

Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	975.00
5406	20 mi	MILEAGE	495	80.00
5402	747	Casing footage		N/C
5407	Minimum	Ton Miles	508	330.00
5502C	1 1/2 hrs	-80 BBL Vax Truck	2369.	136.00
1124	124 sks	50/50 Por Mix Cement		1295.00
115B	309#	Premium Gel.		61.80
4402	1	2 1/2" Rubber Plug		28.00

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SALES TAX ESTIMATED TOTAL 108.07
3013.67

Revin 3737

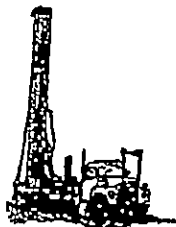
AUTHORIZATION

[Signature]

TITLE

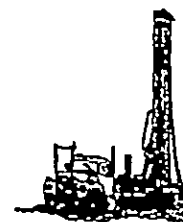
DATE

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:15-059-25536-00-00
Operator: Haas Petroleum, LLC	Lease Name: W. Lidikay
Address: 800 W. 47th, Suite 409	Well # 4-1
Phone # (816) 531-5922	Spud Date Completed
Contractor License # 32079	Location: NE-SW-SW-SW 5-16-21E
T.D. 760' T.D. of Pipe	365 Ft. from South Line
Surface Pipe Size: 7" Depth: 20'	365 Ft. from West Line
Kind of Well: Enc Refc	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	760
23	Lime	341	364				
11	Shale	364	375				
21	Lime	375	396				
5	Shale	396	401		T.D.		760
4	Lime	401	405		T.D. of pipe		747
4	Shale	405	409				

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