

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

4/12/10

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5004
Name: Vincent Oil Corporation
Address 1: 155 N. Market, Suite 7000
Address 2: _____
City: Wichita State: Ks Zip: 67202 + 1821
Contact Person: M.L. Korphage
Phone: (316) 262-3573

CONTRACTOR: License # 5822
Name: VAL Energy Inc.
Wellsite Geologist: Jim Hall
Purchaser: None (D&A)

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
(Core, WSW, Expl., Cathodic, 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
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
12/21/2009 1/03/2010 1/04/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

KCC
APR 12 2010
CONFIDENTIAL

API No. 15 - 057-20659-00-00
Spot Description: NE-SW-NE-NW
NE SW NE NW Sec. 23 Twp. 26 S. R. 24 East West
950 Feet from North / South Line of Section
1830 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ford

Lease Name: Crane Trust Well #: 1-23
Field Name: Wildcat

Producing Formation: D&A
Elevation: Ground: 2506 Kelly Bushing: 2516
Total Depth: 5188 Plug Back Total Depth: 5188
Amount of Surface Pipe Set and Cemented at: 452 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 PAUS 4-15-10
(Data must be collected from the Reserve Pit)

Chloride content: 18,500 ppm Fluid volume: 1000 bbls
Dewatering method used: Allow pits to dry by evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

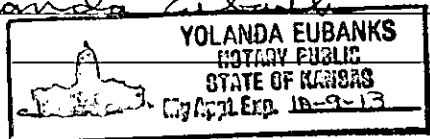
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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.

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: M.L. Korphage
Title: Geologist Date: 4/12/2010

Subscribed and sworn to before me this 12th day of April, 2010.

Notary Public: Yolanda Eubanks
Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
APR 13 2010
KCC WICHITA

Operator Name: Vincent Oil Corporation Lease Name: Crane Trust Well #: 1-23
 Sec. 23 Twp. 26 S. R. 24 East West County: Ford

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Dual Induction, Density / Neutron, Mico-log and
 Sonic log (Submitted - electr.)

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
	Heebner Shale 4172	(-1656)
	Name Top	Datum
	Brown Limestone 4271	(-1755)
	Lansing 4283	(-1767)
	Stark Shale 4598	(-2082)
	Pawnee 4807	(-2291)
	Cherokee Shale 4855	(-2339)
	Base Penn. Limestone 4941	(-2425)
	Mississippian 4989	(-2473)

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 Casing	12 1/4"	8 5/8"	23#	452'	60/40 Poz	250	2% Gel & 3% CC

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

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. Dry & Abandoned	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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO.. LLC. 30689

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal KS

DATE <u>01-04-10</u>	SEC. <u>23</u>	TWP. <u>26</u>	RANGE <u>24</u>	CALLED OUT	ON LOCATION	JOB START <u>6:00AM</u>	JOB FINISH <u>7:00AM</u>
LEASE <u>Crane Trust</u>		WELL # <u>1-23</u>	LOCATION <u>East of Dodge City</u>		COUNTY <u>Ford</u>	STATE <u>KS.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			STATE <u>KS.</u>				

CONTRACTOR Val Rig 1

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D.

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 DEPTH 1620

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 230^{SK} Light Weight

COMMON KCC

POZMIX APR 12 2010

GEL @ _____

CHLORIDE CONFIDENTIAL

ASC @ _____

Light 230 @ 14.05 3,231.50

@ _____

@ _____

@ _____

@ _____

@ _____

HANDLING 230 @ 2.40 552.00

MILEAGE _____ @ _____ 2,070.00

TOTAL 5,853.50

EQUIPMENT

PUMP TRUCK CEMENTER Kenny Boera

366 HELPER Cesar

BULK TRUCK

457-239 DRIVER Tony

BULK TRUCK

_____ DRIVER _____

REMARKS:
THANK YOU!!!

SERVICE

DEPTH OF JOB 1620

PUMP TRUCK CHARGE _____ 1,85.00

EXTRA FOOTAGE @ _____

MILEAGE 90 @ 7.00 630.00

MANIFOLD @ _____

@ _____

@ _____

CHARGE TO: Vincent Oil

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 1,815.00

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

N/A

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL 0

PRINTED NAME Scott Ross

SIGNATURE [Signature]

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS