



KANSAS CORPORATION COMMISSION 1080059
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 # 34560
Name: Circle E Investments
Address 1: 3820 W. 52ND ST
Address 2: _____
City: ROELAND PARK State: KS Zip: 66205 + _____
Contact Person: Joe Wagner
Phone: (816) 985-4497
CONTRACTOR: License # 8509
Name: Evans Energy Development, 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: _____
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 #: _____
01/26/2012 01/27/2012 1/30/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-103-21337-00-00
Spot Description: _____
SE SW SW SW Sec. 27 Twp. 12 S. R. 20 East West
165 Feet from North / South Line of Section
4785 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Leavenworth
Lease Name: John Vogel Trust Well #: 2
Field Name: _____
Producing Formation: Squirrel
Elevation: Ground: 811 Kelly Bushing: 0
Total Depth: 770 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 60 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: 60 w/ 50 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 1500 ppm Fluid volume: 80 bbls
Dewatering method used: Evaporated
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 Garton Date: 05/17/2012



1080059

Operator Name: Circle E Investments Lease Name: John Vogel Trust Well #: 2
 Sec. 27 Twp. 12 S. R. 20 East West County: Leavenworth

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GammaRay/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum GammaRay
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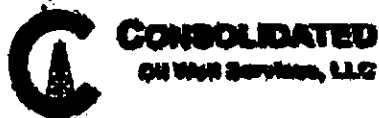
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface	11	7	10	61	portland	50	50/50 POZ
Completion	5.6250	2.8750	8	758	Portland	114	50/50 POZ

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 (Amount and Kind of Material Used)	Depth
3	644.0-650.0	2" DML RTG	6

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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PO Box 884, Chanute, KS 66720
820-431-8210 or 800-467-8678

TICKET NUMBER 36898

LOCATION D. Hawg

FOREMAN Alan Made

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-26-12	1862	John Vogel Trust #2	SW 27	12	20	Lv
CUSTOMER Circle E			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 3820 W 52nd			516	Alan M	Safety	Meat
CITY STATE ZIP CODE Roeland Park K.S. 66205			368	Arden M	AKM	
			505/7106	Keith D	RD	
			548	Ryan S	RS	

JOB TYPE Surface HOLE SIZE 11 HOLE DEPTH 61' CASING SIZE & WEIGHT 7"
 CASING DEPTH 61' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING yes
 DISPLACEMENT 2.5 DISPLACEMENT PSI 100 MIX PSI - RATE 17 bpm

REMARKS: Established rate. Mixed + pumped 50 sk Portland A plus 2% gel, 2% calcium, Yell Flo seal per sack. Circulated cement. Displaced casing with clean water. Closed well.

McGowan Frank

Alan Made

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE		825.00
5406	35	MILEAGE		140.00
5402	61	casing footage		
5407	min	ten miles		350.00
65016	3 hr	transport (includes refilling pits)		336.00
11049	50	Portland A		747.50
1118B	94#	gel		19.74
1102	25#	Flo seal		58.75
1102	94#	calcium		69.56
				2474.87
SALES TAX				65.38
ESTIMATED TOTAL				2611.93

Rev 07/07

No company rep

AUTHORIZATION Jim OK'd

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.



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-487-8876

TICKET NUMBER 36906

LOCATION Ottawa

FOREMAN Alan Mader

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-30-12	1862	John Vogel Trust #2	SW 27	12	20	LV
CUSTOMER <u>Circle E Investment</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>3820 W 52nd.</u>			516	Alan M	Safety	Med
CITY <u>Roland Park</u>			368	Aken M	ABM	
STATE <u>KS</u>	ZIP CODE <u>66205</u>		369	Derek M	DM	
			523	Daniel G	DG	
JOB TYPE <u>long string</u>	HOLE SIZE <u>5 7/8</u>	HOLE DEPTH <u>770'</u>	CASING SIZE & WEIGHT <u>2 1/8</u>			
CASING DEPTH <u>758</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>yes</u>			
DISPLACEMENT <u>4.4</u>	DISPLACEMENT PSI <u>800</u>	MIX PSI <u>200</u>	RATE <u>4 bpm</u>			

REMARKS: Held crew meet. Established rate. Mixed & pumped 100 gal followed by 114 sk 50 150 cement plus 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.

McGown, Frank

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	35	MILEAGE		140.00
5402	758	casing footage		
5407	1/2 min	ton miles		175.00
5502C	1	80 wge		90.00
1124	114	50 150 cement		1248.30
1183	292#	gel		161.32
4402	1	2 1/2 plug		28.00
<u>247562</u>				
SALES TAX				97.68
ESTIMATED TOTAL				2870.27

NO COMPANY REP

AUTHORIZATION Jim Ok'd 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.

McGown Drilling, Inc.
Mound City, Kansas

Operator:
Circle E Investments
Roeland Park, Kansas

John Vogel Trust #2
Leavenworth County, Kansas
27-12S-20E
API # 15-103-21337

Spud Date:	1/26/2012	Surface Bit:	11"
Surface Casing:	7"	Drill Bit:	5.875"
Surface Length:	60.60'	Longstring:	758.05'
Surface Cement:	Cemented by Consolidated	Longstring Date:	1/30/2012
		Longstring Size:	2 7/8 EUE

Driller's Log

Top	Bottom	Formation	Comments
0	12	Soil & silt	
12	50	Sand	
50	68	Lime	
68	88	Shale	
88	104	Lime	
104	138	Shale	
138	143	Lime	
143	159	Shale	
159	204	Lime	
204	226	Shale	
226	234	Lime	
234	250	Shale	
250	262	Lime	
262	281	Shale	
281	370	Lime	
370	374	Bl. Shale & Shale	
374	383	Lime	
383	500	Big Shale	
500	506	Lime	
506	548	Shale	
548	553	Lime	
553	569	Shale & Bl. Shale	
569	574	Lime	
574	588	Shale	
588	590	Lime	

913.795.2259 office
620.224.7406 Chris' cell

mcgowndrilling@gmail.com

PO Box K
Mound City, KS

John Vogel Trust #2
Leavenworth Co., KS

590	604	Shale	
604	613	Lime	
613	647	Shale	
647	649	Sand	Good oil show
649	651	Broken Sand	Fair oil show
651	697	Shale	
697	700	Sand	Trace of oil
700	770	Shale	
770	TD		

Coring

Run	Footage	Recovery
1	648-668	20'

Mud

Mixed 58 sx gel and 2 sx lignite to set surface.