

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 30555
Name: John Herrick
Address 1: 3553 Oregon
Address 2: _____
City: Ottawa State: KS Zip: 66067 + _____
Contact Person: John Herrick
Phone: (785) 242-6423
CONTRACTOR: License # 5682
Name: Hughes Drilling
Wellsite Geologist: none
Purchaser: Pacer Energy

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 #: _____
5/8/12 5/9/12 5/10/12
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 059 25 977 - 0000
Spot Description: SW/4 NE/4 NE/4 SE/4
SW-NE-NE-SE Sec. 6 Twp. 17 S. R. 21 East West
2145 Feet from North / South Line of Section
500 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Franklin
Lease Name: Landry Well #: 9
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: Est 923 Kelly Bushing: n/a
Total Depth: 775 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20 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

(Data must be collected from the Reserve Pit)

Chloride content: n/a ppm Fluid volume: n/a 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: Partner Date: 6/19/12

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: Dlg Date: 8/6/12

Operator Name: John Herrick Lease Name: Landry Well #: 9
 Sec. 6 Twp. 17 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: <p style="text-align: center;">Gamma Ray Neutron</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Base of Hertha</td> <td></td> <td>375</td> </tr> <tr> <td>1st Squirrel</td> <td></td> <td>649-663</td> </tr> <tr> <td>2nd Squirrel</td> <td></td> <td>705-717</td> </tr> <tr> <td>3rd Squirrel</td> <td></td> <td>722-728</td> </tr> <tr> <td>TD</td> <td></td> <td>775</td> </tr> </table>	Name	Top	Datum	Base of Hertha		375	1st Squirrel		649-663	2nd Squirrel		705-717	3rd Squirrel		722-728	TD		775
Name	Top	Datum																	
Base of Hertha		375																	
1st Squirrel		649-663																	
2nd Squirrel		705-717																	
3rd Squirrel		722-728																	
TD		775																	

CASING RECORD <input type="checkbox"/> New <input checked="" 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	7"	5 5/8"		22 ft.	portland	5	
Production	5 5/8"	2 7/8"		764	50/50 Poz	102	

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
2	649-659	spot acid on perfs and fracked	
	707-715	with 35 sacks of sand and 100	
	721-726	barrels of gelled water	

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TUBING RECORD: Size: <u>1"</u> Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>6/18/12</u>		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. <u>2</u>	Gas Mcf _____	Water Bbls. <u>2</u> Gravity <u>28</u>

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 checked="" 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 800-457-8576

TICKET NUMBER 36891
LOCATION Ottawa, KS
FOREMAN Casey Kennedy

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5/11/12	3554	Landry #9	NE 6	17	21	FR
CUSTOMER <u>John Herrick</u>			TRUCK #			
MAILING ADDRESS <u>3553 Oregon Rd</u>			DRIVER			
CITY <u>Ottawa</u>		STATE <u>KS</u>	ZIP CODE <u>66067</u>		TRUCK #	
			DRIVER			
			<u>481 Caslen ck</u>			
			<u>6666 Gar Moo BM</u>			
			<u>548 Mik Hag MH</u>			
			<u>675 Kei Det KD</u>			

JOB TYPE Longstring HOLE SIZE 5 5/8" HOLE DEPTH 774' CASING SIZE & WEIGHT 2 7/8" EUE
 CASING DEPTH 764' DRILL PIPE _____ TUBING pin - 760' OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 2 1/2" rubber plug
 DISPLACEMENT 4.42 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE 5.6 bpm

REMARKS: held safety meeting, established circulation, mixed + pumped 100 # Premium Gel followed by 10 bbls fresh water, mixed + pumped 102 sts 50/50 Pozmix cement w/ 2% gel per st, cement to surface, flushed pump clean, pumped 2 1/2" rubber plug to pin w/ 4.42 bbls fresh water, pressured to 800 PSI, shut in casing.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1030.00
5406	on lease	MILEAGE		
5402	764'	casing footage		
5407	1/2 minimum	ton mileage		175.00
5502C	1.5 hrs	80 lbs		135.00
1124	102 sts	50/50 Pozmix cement		1116.90
1118B	271 #	Premium Gel		56.91
4402	1	2 1/2" rubber plug		28.00
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			7.8%	SALES TAX 93.74
			ESTIMATED TOTAL	2635.55

249853

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.

HUGHES DRILLING REPORT

Well No. #9
 Farm Landry
 SURFACE CASING Size 7"
 Feet 22.70
 Circulated 7 ex cement

PERMANENT CSG. Size 2 3/8 B.O. EUB
 Feet Set 764.15 of pipe
 Bolt out 760
 T. D. at Completion 775
 10rd weld on collar on top

OPERATOR John Hennick

Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
2	Soil	2
3	clay	5
10	Lime	15
15	shale	30
17	lime	47
11	shale	58
6	sand	64
12	shale	76
16	lime	92
12	sand	104
79	shale	183
20	lime	203
29	shale	232
4	lime	236
3.5	shale	271
13	lime	284
18	shale	302
25	lime	327
7	shale	334
23	lime	357
4	shale	361
4	lime	365
4	shale	369
6	lime	375
102	shale	477
4	cr sand	481
49	shale	530
4	lime	537
28	shale	562
17	sand	579
3	shale	582
14	lime	596
4	shale	602
4	lime	611
8	shale	619
11	lime	630
5	shale	635
1	lime	649
5	shale	649
	sand	603
	shale	694

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
5/9/12	0	2	Soil	22.5-21.5
	2	5	clay	22.5-44.0
22'	5	15	Lime	22.5-66.5
5/10/12	15	30	shale	22.5-89.5
5 3/8 POC	30	47	lime	22.5-111.5
	47	58	shale	22.5-134.0
	58	64	sand	22.5-156.5
	64	76	shale	22.5-179.0
	76	92	lime	22.5-201.5
	92	104	sand	22.5-224.0
	104	183	shale	22.5-246.5
	183	203	lime	22.5-269.0
	203	232	shale	22.5-291.5
	232	236	lime	22.5-314.0
	236	271	shale	22.5-336.5
	271	284	lime	22.5-359.0
	284	302	shale	22.5-381.5
30'	302	327	lime	22.5-404.0
	327	334	shale (State 328-329)	22.5-426.5
20'	334	357	lime	22.5-449.0
	357	361	shale (State 359-360)	22.5-471.5
	361	365	lime	22.5-494.0
	365	369	shale	22.5-516.5
	369	375	lime	22.5-539.0
Hertha	375	477	shale (Broken 379-383) (Sand 383-402)	22.5-561.5
	477	481	Gray sand	22.5-584.0
	481	530	shale (Broken 510-530)	22.5-606.5

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HUGHES DRILLING REPORT

Well No. #9
Farm Landry
SURFACE CASING
Size.....
Feet.....
Circulated _____ sx cement

PERMANENT CSG.
Size 2 7/8" 8rd EVE
Feet Set 764.15 of pipe
seating nipple at 705'
Bolt at 760
T. D. at Completion 775'
10rd weld on collar on top

OPERATOR John Herrick

Contractor HUGHES DRILLING CO.

STRATA THICKNESS	FORMATION DRILLED	T.D.
1	Lime	695
9	Shale	704
1	Lime	705
#2 Squit. 10	sand	717
5	shale	722
#3 Squit. 6	Sand	728
9	Shale	737
1	Lime	738
37	Shale	775
		T.D.

DATE	DRILLED		REMARKS - TYPE WORK - BILLING REF.	PIPE TALLY
	FROM	TO		
5/19/12	530	534	Lime	222.5-629.0
	534	562	Shale (Broken 537-554)	222.5-651.5
	562	579	Sand & very L/W shale	222.5-674.0
	579	582	shale	222.5-696.5
	582	596	lime	222.5-719.0
	596	607	shale	222.5-741.5
	607	611	lime	222.5-764.0
	611	619	shale	
	619	630	lime	
	630	635	shale	
	635	644	lime	
	644	649	shale (Bnk 647-649)	
#1 Squit and	649	663	sand (remarks pg. 3)	
	663	694	shale	
	694	695	lime	
	695	704	shale	
	704	705	lime	
#2 Squit and	705	717	sand	
	717	722	shale (remarks pg 4)	
#3 Squit and	722	728	sand	
	728	737	shale	
	737	738	lime	
	738	775	shale (Broken 719-752)	
			T.D.	

5/10/12 Set 764.15 of 2 7/8 8rd EVE
~~seating nipple at 705'~~ Bolt at 760
 10rd weld on collar on top
 used 3 centralizers
 (No seating Nipple)

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