



KANSAS CORPORATION COMMISSION 1085415
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 # 34339
Name: D & Z Exploration, Inc.
Address 1: 901 N Elm St.
Address 2: PO BOX 159
City: ST ELMO State: IL Zip: 62458 +
Contact Person: Zane Belden
Phone: (618) 829-3274
CONTRACTOR: License # 33715
Name: Town Oilfield Service
Wellsite Geologist: none
Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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 #: _____

<u>04/19/2012</u>	<u>04/21/2012</u>	<u>04/21/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-23779-00-00

Spot Description: _____
NE SE SW NE Sec. 28 Twp. 14 S. R. 22 East West
3135 Feet from North / South Line of Section
1450 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Johnson

Lease Name: Donovan Well #: #10

Field Name: _____

Producing Formation: bartlesville

Elevation: Ground: 1030 Kelly Bushing: 0

Total Depth: 960 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 30 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 cmf.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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 Garcia Date: 06/26/2012



1085415

Operator Name: D & Z Exploration, Inc. Lease Name: Donovan Well #: #10
 Sec. 28 Twp. 14 S. R. 22 East West County: Johnson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input 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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Bartlesville</td> <td>862</td> <td></td> </tr> </table>	Name	Top	Datum	Bartlesville	862	
Name	Top	Datum					
Bartlesville	862						

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	9.825	7	20	30	Portland	10	none
production	5.625	2.825	6.5	919.35	50/50 poz	114	none

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

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. <u>06/18/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" 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

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE

Invoice # 249257

Invoice Date: 04/24/2012 Terms: 0/0/30,n/30

Page 1

D & Z EXPLORATION
901 N. ELM ST.
P.O. BOX 159
ST. ELMO IL 62458
(618) 829-3274

DONOVAN #10
36676
28-14-22
04-20-2012
KS

L.D.E.
-I.D.C.
(cementing)

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	114.00	10.9500	1248.30
1118B	PREMIUM GEL / BENTONITE	292.00	.2100	61.32
1111	SODIUM CHLORIDE (GRANULA	220.00	.3700	81.40
1110A	KOL SEAL (50# BAG)	570.00	.4600	262.20
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

Description	Hours	Unit Price	Total
369 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00
495 CEMENT PUMP	1.00	1030.00	1030.00
495 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
548 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1681.22 Freight: .00 Tax: 126.51 AR 3487.73
 Labor: .00 Misc: .00 Total: 3487.73
 Subt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 36676

LOCATION Ottawa, KS

FOREMAN Fred Maden

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

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/20/12	3392	Donovan # 10	NE 24	14	22	To
CUSTOMER D + Z Exploration			TRUCK# DRIVER TRUCK# DRIVER			
MAILING ADDRESS 901 N. Elm St.			506	FREMAD	Safety	MD
CITY STATE ZIP CODE St Elmo IL 62458			495	HARBEC	HB	J
			369	DERMAS	DM	
			548	MIRHAR	MH	

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 960 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 919 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 2 1/2" Plug
 DISPLACEMENT 5.34 DISPLACEMENT PSI _____ MIX PSI _____ RATE 53 PM

REMARKS: Establish pump rate. Mix + Pump 100# Premium Gel Flush.
Mix + Pump 114 sks 50/50 Por Mix Cement 2% Gel 5% Salt
5# Kal Seal/sk. Cement to surface Flush pump & line clean
Displace 2 1/2" Rubber plug to TD. Pressure to 500# PSI.
Release pressure to set Float Valve.

Tos Drilling

Fred Maden

75
95
85
78
69

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	1030 ⁰⁹
5406	30 mi	MILEAGE	495	120 ⁰⁰
5402	919'	Casing Footage		N/C
5407	Minimum	Ton Miles	548	350 ⁰⁰
5502C	2 hrs	80 BBL Vac Truck	369	180 ⁰⁰
1124	114 sks	50/50 Por Mix Cement		1248 ³⁹
1115B	292#	Premium Gel		61 ³²
1111	220#	Granulated Salt		81 ⁴⁰
1110A	570#	Kal Seal		262 ²⁰
4402	1	2 1/2" Rubber Plug		25 ⁰⁰
			7.525%	SALES TAX
				ESTIMATED TOTAL
				126 ⁵¹
				3487 ⁷³

Rev 01/97

AUTHORIZATION Depl Belden TITLE 249257 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.

Johnson County, KS
 Well: Donovan # 10
 Lease Owner: D Z

Town Oilfield Service, Inc.
 (913) 837-8400

Commenced Spudding:
 4/19/2012

WELL LOG

Thickness of Strata	Formation	Total Depth
8	Soil/Clay	8
9	Sandstone	17
22	Shale	39
8	Lime	47
6	Shale	53
16	Lime	69
8	Shale	77
9	Lime	86
8	Shale	94
18	Lime	112
17	Shale	129
17	Lime	146
10	Shale	156
57	Lime	213
20	Shale	233
8	Lime	241
20	Shale	261
7	Lime	268
3	Shale	271
10	Lime	281
33	Shale	314
1	Lime	315
12	Shale	327
26	Lime	353
7	Shale	360
23	Lime	383
4	Shale	387
4	Lime	391
5	Shale	396
7	Lime	403
111	Shale	514
7	Sand	521
55	Shale	576
5	Lime	581
2	Shale	583
2	Lime	585
8	Shale	593
10	Lime	603
14	Shale	617
3	Lime	620

Thickness of Strata	Formation	Total Depth	Remarks
8	sil / clay	8	
9	sandstone	17	
22	shale	39	
8	lime	47	
6	shale	53	
16	lime	69	
8	shale	77	
9	lime	86	
8	shale	94	
18	lime	112	
17	shale	129	
17	lime	146	
10	shale	156	
27	lime	183	
20	shale	203	
8	lime	211	
20	shale	231	
7	lime	238	
3	shale	241	
10	lime	251	
33	shale	284	
1	lime	285	
12	shale	297	
26	lime	323	
7	shale	330	
23	lime	353	
4	shale	357	

Thickness of Strata	Formation	387 Total Depth	Remarks
4	lime	391	
5	shale	396	
7	lime	403	
111	shale	514	514
7	sand	521	grey, no oil
55	shale	576	
5	lime	581	
2	shale	583	
2	lime	585	
8	shale	593	
10	lime	603	
14	shale	617	
3	lime	620	
6	shale	626	
6	lime	632	
112	shale	744	red bed 645
11	Block sand	755	
115	shale	870	
2	sand	872	no oil
6	sand	878	solid oil
2	sand	880	20%
1	Block sand	881	20%
4	sandy shale	885	no oil
88	shale	973	70