



KANSAS CORPORATION COMMISSION 1083307
OIL & GAS CONSERVATION DIVISION

Form AGO-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 # 33350
Name: Reif Oil & Gas Company LLC
Address 1: PO BOX 298
Address 2: _____
City: HOISINGTON State: KS Zip: 67544 + 0298
Contact Person: Donald J Reif
Phone: (620) 786-5698
CONTRACTOR: License # 33350
Name: Southwind Drilling, Inc.
Wellsite Geologist: James Musgrove
Purchaser: Plains Marketing

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: REIF OIL & GAS

Well Name: DECKERT 1
Original Comp. Date: 11/18/2011 Original Total Depth: 3860
 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 #: _____

01/15/2012 01/15/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-145-21654-00-01
Spot Description: _____
NE SW NE SE Sec. 36 Twp. 20 S. R. 16 East West
1760 Feet from North / South Line of Section
868 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Pawnee
Lease Name: DECKERT Well #: 1
Field Name: Unnamed

Producing Formation: Arbuckle
Elevation: Ground: 1994 Kelly Bushing: 1999
Total Depth: 3860 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 985 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: 56000 ppm Fluid volume: 1000 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Paul's Oilfield Service, Inc.
Lease Name: Dipman License #: 31085
Quarter SW Sec. 34 Twp. 21 S. R. 16 East West
County: Pawnee Permit #: 03589

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 Gernard Date: 08/18/2012



1083307

Operator Name: Reif Oil & Gas Company LLC Lease Name: DECKERT Well #: 1
 Sec. 36 Twp. 20 S. R. 16 East West County: Pawnee

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top Datum Attached
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 <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E. Logs Run: Dual Induction Log Dual Comp Porosity Log			

CASING RECORD New 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	10.75	8.625	24.0	985	Common	510	3% cc, 2% gel
Long String	8.62	5.5	14.0	3627	60/40 poz	180	2% gel, 18% sand, 75% CFR, 25% dexton

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 <i>(Amount and Kind of Material Used)</i>	Depth
3	Pref from 3793-3797		

TUBING RECORD: Size: 2-7/8 Set At: 4070 Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR: 01/15/2012 Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	10		200		

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-1B.)</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>	PRODUCTION INTERVAL:
<input type="checkbox"/> Other <i>(Specify)</i> _____		

Form	ACO1 - Well Completion
Operator	Reif Oil & Gas Company LLC
Well Name	DECKERT 1
Doc ID	1083307

Tops

Anhydrite	1000	+999
Base anhydrite	1026	+973
Heebner	3316	-1317
Toronto	3335	-1336
Douglas	3348	-1349
Brown Lime	3407	-1408
Lansing	3417	-1418
Base Kansas City	3637	-1638
Viola	3680	-1681
Simpson	3698	-1699
Arbuckle	3743	-1744
RTD - Samples	3860	-1861
LTD - Samples	3860	-1861