

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

ORIGINAL

Form ACO-1
June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 33328
Name: Lynn Packard
Address 1: 8113 NW River Rd
Address 2: _____
City: Medicine Lodge State: Ks Zip: 67104 + _____
Contact Person: Lynn Packard
Phone: (620) 886-0135
CONTRACTOR: License # 33549
Name: Landmark Drilling
Wellsite Geologist: Scott Alberg
Purchaser: NCRA ONEOAK

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 #: _____

<u>1-5-2012</u>	<u>1-14-2012</u>	<u>2-20-2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-23813-00-00
Spot Description: _____
SW_NE_NW Sec. 27 Twp. 31 S. R. 13 East West
960 Feet from North / South Line of Section
1,650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: Packard Well #: 1-27
Field Name: Nurse
Producing Formation: Swope
Elevation: Ground: 1564 Kelly Bushing: 1574
Total Depth: 4365 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 219 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: 40,000 ppm Fluid volume: 360 bbls
Dewatering method used: Trucked to Packard SWD
Location of fluid disposal if hauled offsite: _____
Operator Name: Lasso Energy
Lease Name: Packard 5-23 SWD License #: 34320
Quarter SW Sec. 23 Twp. 31 S. R. 13 East West
County: Barber Permit #: D-27,734

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: Lynn Packard
Title: operator Date: 6-15-2012

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: Dg Date: 6/13/12

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Operator Name: Lynn Packard Lease Name: Packard Well #: 1-27
 Sec. 27 Twp. 31 S. R. 13 East West County: Barber

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual compensated porosity, dual induction, Microresistivity, sonic cement bond	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Datum</th> </tr> </thead> <tbody> <tr> <td>Onaga shale</td> <td>2693</td> <td>1019</td> </tr> <tr> <td>Hebner shale</td> <td>3522</td> <td>1948</td> </tr> <tr> <td>Lansing</td> <td>3717</td> <td>2143</td> </tr> <tr> <td>Stark</td> <td>4036</td> <td>2462</td> </tr> <tr> <td>Mississippian</td> <td>4208</td> <td>2634</td> </tr> </tbody> </table>	Name	Top	Datum	Onaga shale	2693	1019	Hebner shale	3522	1948	Lansing	3717	2143	Stark	4036	2462	Mississippian	4208	2634
Name	Top	Datum																	
Onaga shale	2693	1019																	
Hebner shale	3522	1948																	
Lansing	3717	2143																	
Stark	4036	2462																	
Mississippian	4208	2634																	

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	12 1/4	8 5/8	20	219		175	60/40 2%gel 3%cc
Production	7 7/8	7 7/8	10.5	4365		300	ASF

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	4213-23	A Nert	75	

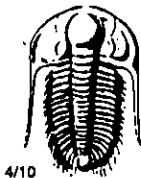
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 shots/ft	Squeeze Mississippi Perfs		4213-23
8 shots/ft	Reperforated Mississippi		4212.5-18.5
	Set bridge plug		4170
8 shots/ft	Perforated Swope		4043

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>4103</u> 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. <u>5</u>	Gas Mcf <u>25</u>	Water Bbls. <u>20</u> Gas-Oil Ratio <u>1-5</u> Gravity <u>38</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4043</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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TRILOBITE TESTING INC.

P.O. Box 1733 • Hays, Kansas 67601

Test Ticket

NO. 44123

Well Name & No. Packard # 1-27 Test No. 1 Date 1-11-12
 Company Lyhh Packard Elevation 1574 KB 1569 GL
 Address 8113 NW River Rd Medicine Lodge KS 67104
 Co. Rep / Geo. Lyhh packard/Scott Alberg Rig Landmark #2
 Location: Sec. 27 Twp. 31S Rge. 13W Co. Barber State KCS

Interval Tested 3553 - 3596 Zone Tested Upper Douglas sand
 Anchor Length 43' Drill Pipe Run 3326 Mud Wt. 9.1
 Top Packer Depth 3548 Drill Collars Run 224 Vis 49
 Bottom Packer Depth 3553 Wt. Pipe Run 0 WL 9.6
 Total Depth 3596 Chlorides 5000 ppm System LCM 0
 Blow Description IF: STRONG blow BOB 30 sec
ISI: NO blow back
FF: STRONG blow BOB 2 sec
FSI: STRONG blow back

Rec	Feet of	%gas	%oil	%water	%mud
	<u>3525 GIP</u>				
Rec <u>180'</u>	Feet of <u>G, W, M</u>	<u>10</u>	<u>40</u>	<u>40</u>	<u>40</u>
Rec <u>180'</u>	Feet of <u>G M W</u>	<u>10</u>	<u>60</u>	<u>30</u>	<u>30</u>
Rec	Feet of	%gas	%oil	%water	%mud
Rec	Feet of	%gas	%oil	%water	%mud

Rec Total 360 BHT 110 Gravity - API RW .18 @ 47 °F Chlorides 60,000 ppm

(A) Initial Hydrostatic <u>1738</u>	<input checked="" type="checkbox"/> Test	T-On Location <u>5:15</u>
(B) First Initial Flow <u>50</u>	<input checked="" type="checkbox"/> Jars	T-Started <u>5:46</u>
(C) First Final Flow <u>97</u>	<input checked="" type="checkbox"/> Safety Joint	T-Open <u>8:54</u>
(D) Initial Shut-In <u>1046</u>	<input type="checkbox"/> Circ Sub	T-Pulled <u>12:00</u>
(E) Second Initial Flow <u>94</u>	<input type="checkbox"/> Hourly Standby	T-Out <u>14:15</u>
(F) Second Final Flow <u>160</u>	<input checked="" type="checkbox"/> Mileage <u>100 m.l.s</u>	Comments
(G) Final Shut-In <u>1068</u>	<input type="checkbox"/> Sampler	
(H) Final Hydrostatic <u>1690</u>	<input type="checkbox"/> Straddle	<input type="checkbox"/> Ruined Shale Packer
Initial Open <u>30</u>	<input type="checkbox"/> Shale Packer	<input type="checkbox"/> Ruined Packer
Initial Shut-In <u>60</u>	<input type="checkbox"/> Extra Packer	<input type="checkbox"/> Extra Copies
Final Flow <u>30</u>	<input type="checkbox"/> Extra Recorder	Sub Total
Final Shut-In <u>60</u>	<input type="checkbox"/> Day Standby	Total
	<input checked="" type="checkbox"/> Accessibility	MP/DST Disc't <u>RECEIVED</u>
Sub Total		

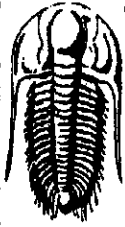
Approved By [Signature]

Our Representative [Signature]

JUN 04 2012

TriLOBITE TESTING Inc. shall not be liable for damaged of any kind of the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, by the party for whom the test is made, or its statements or opinion concerning the results of any test, tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

KCO WICHITA



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

GAS RATES

Lynn Packard

27-31s-13w

8113 NW River RD Medicinelodge KS 67104

Padkard # 1-27

Job Ticket: 44123

DST#: 1

ATTN: Lynn Packard/ Scott

Test Start: 2012.01.11 @ 05:46:41

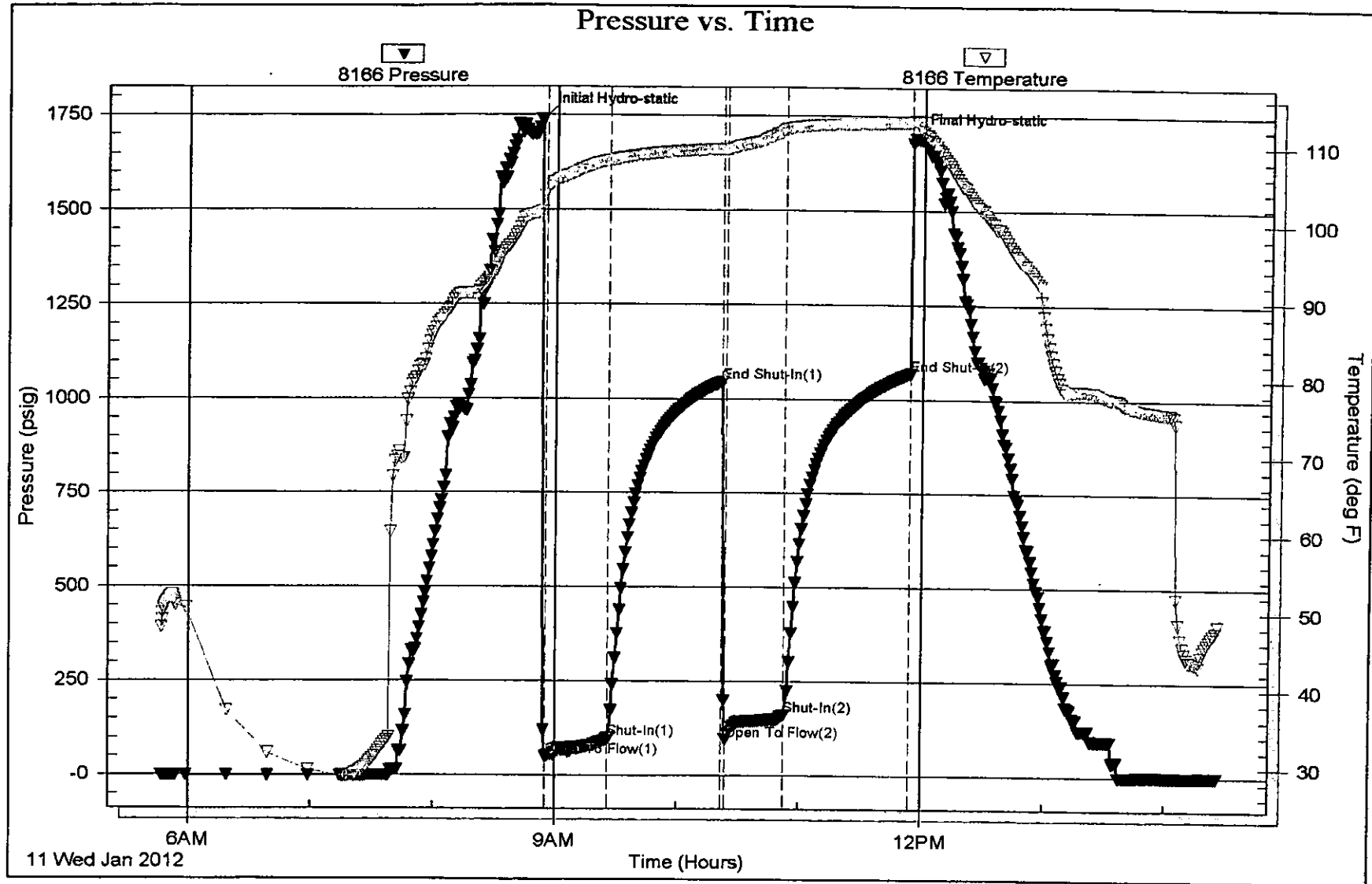
Gas Rates Information

Temperature: 59 (deg F)
Relative Density: 0.65
Z Factor: 0.8

Gas Rates Table

Flow Period	Elapsed Time	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
1	10	0.13	2.00	6.14
1	20	0.13	2.00	6.14
1	30	0.13	1.00	5.76
2	1	0.13	6.00	7.64
2	10	0.13	0.00	5.39

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ALLIED CEMENTING CO., LLC. 038015

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

SERVICE POINT: Mid West

DATE <u>2-25-12</u>	SEC. <u>2-</u>	TWP. <u>31S</u>	RANGE <u>13E</u>	CALLED OUT	ON LOCATION	JOB START <u>12:00pm</u>	JOB FINISH <u>12:30pm</u>
LEASE <u>Provided</u>	WELL # <u>21227</u>	LOCATION <u>Allied show, 7 1/2 W S. 10</u>			COUNTY <u>Butler</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Chick OWNER Lynn Richard

TYPE OF JOB Service

HOLE SIZE _____ T.D. _____ CEMENT AMOUNT ORDERED 75 SA NEAT

CASING SIZE 4 1/2 10.6" DEPTH _____

TUBING SIZE 2 3/4 DEPTH 4117

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1000 MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS: 4213-4223

DISPLACEMENT 15.9 Lbs

EQUIPMENT

PUMP TRUCK CEMENTER Art Timmer

300/15 HELPER Sara Timmer

BULK TRUCK _____

381/20 DRIVER Tony

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

1 mi. N. side to Russell, with 11 bbls
put in 4117 in. Rate 1.75 bpm 500 ps
mixing in 75 SA NEAT at 1 1/2 bpm 700 ps
when pump 4 lines drop 6 bbls at 2.5 bpm
pressure up to 1000 ps stop 2 min
Release well. Release on with 6.5 bbls @ 2.0
at 2 bpm 700 ps
put 11 bbls in 10 min to Russell, KS

COMMON <u>75</u>	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
ASC	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
HANDLING	@	_____
MILEAGE	@	_____
TOTAL		_____

SERVICE

DEPTH OF JOB <u>4117</u>	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE	@ _____
MANIFOLD	@ _____
_____	@ _____
_____	@ _____
TOTAL	_____

CHARGE TO: Lynn Richard

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL		_____

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.

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

SIGNATURE Lynn Richard

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ALLIED CEMENTING CO., LLC. 037924

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

SERVICE POINT:
Medicine Lodge, KS

DATE <u>1-14-2012</u>	SEC. <u>27</u>	TWP. <u>31S</u>	RANGE <u>13W</u>	CALLED OUT <u>3:00 PM</u>	ON LOCATION <u>3:30 PM</u>	JOB START <u>6:00 PM</u>	JOB FINISH <u>7:00 PM</u>
LEASE <u>Packer</u>		WELL # <u>127</u>	LOCATION <u>Allied Shop, Gwas-</u>			COUNTY <u>Bevier</u>	STATE <u>KS</u>
OLD OR (NEW) (Circle one)			<u>S/in to</u>				

CONTRACTOR Lgnameric #2

TYPE OF JOB Production

HOLE SIZE 7 7/8 T.D. 4365'

CASING SIZE 4 1/2 10.5 DEPTH 4363'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 43'

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 70 bbls of 2% KCL water

OWNER Lynn Packard

CEMENT

AMOUNT ORDERED 30.5x 60' 40' 40' 50'

150s x Class A ASC + 5# Kalsol +

.2% FL160 + .2% Geshick + Defosmer

2 1/2 5585 ASF, 79515 Cipro

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

ASC _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

EQUIPMENT

PUMP TRUCK CEMENTER Don F

360-265 HELPER Tyson T

BULK TRUCK

363-190 DRIVER Adm M

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pipe on bottom - bio sk circulation

Pump 3 bbls water 500555 ASF 3 bbls water

mix 30.5x 10' Rst hold, mix 150s of

Cement + shut down wash pump during

Release plus, 5+grs 2.0% cement, 4 ft

Pressure 9.45 bbls slow rate to 3 bpm

9+60 bbls bump plus 70 bbls 500

-1100 PSI, plus 2nd hold

SERVICE

DEPTH OF JOB 4363'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

MANIFOLD Headvent 91 @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: Lynn Packard

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

4 1/2

1 Rubber plug _____ @ _____

1 AFV Insert _____ @ _____

1 Guide shoe _____ @ _____

5 - Centralizers _____ @ _____

_____ @ _____

TOTAL _____

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.

PRINTED NAME X Lynn Packard

SIGNATURE X Lynn Packard

Thank you!!!

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

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KCC WICHITA

ALLIED CEMENTING CO., LLC. 037919

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

SERVICE POINT:
Medicine House KS

DATE <u>1-5-2012</u>	SEC. <u>27</u>	TWP. <u>31S</u>	RANGE <u>13W</u>	CALLED OUT <u>2:00pm</u>	ON LOCATION <u>3:30pm</u>	JOB START <u>5:00pm</u>	JOB FINISH <u>5:30pm</u>
LEASE <u>Packard</u>		WELL# <u>1-27</u>		LOCATION <u>Linn Co., Rose, 9 well</u>		COUNTY <u>RClinch</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				<u>South line</u>			

CONTRACTOR Lynn Packard #2 OWNER Proline Resources

TYPE OF JOB SWP Core
 HOLE SIZE 12 3/4 T.D. 222'
 CASING SIZE 8 5/8 DEPTH 221'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 20'
 PERFS. _____
 DISPLACEMENT 12 3/4 hbk Fresh water.

CEMENT
 AMOUNT ORDERED 1755 - 601401290601
3% O.C.

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Don F
 # 471 302 HELPER Ron G
 BULK TRUCK
 # 363 290 DRIVER Fred P
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Pipe on bottom & break circulation
Pump 3 hbk water. Check mix 1755
Cement, slow down, Release Plug
Start displacement, pump 12 3/4 hbk
water, start in cement and circulate.

SERVICE

DEPTH OF JOB 221
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD 1100000001 @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: Proline Resources
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

8 5/8
1-Woman Plug @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

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 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.

SALES TAX (If Any) _____
 TOTAL CHARGES _____

PRINTED NAME X Lynn Packard DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE X Lynn Packard

Thank you!!!

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