



KANSAS CORPORATION COMMISSION 1079238
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 # 32044
Name: Trimble & Maclaskey Oil LLC
Address 1: 110 SOUTH ST
Address 2: PO BOX 171
City: GRIDLEY State: KS Zip: 66852 +
Contact Person: Randall L. Trimble
Phone: (620) 836-2000
CONTRACTOR: License # 32854
Name: Gulick Drilling Co., Inc.
Wellsite Geologist: Thomas E. Blair
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 #: _____

<u>12/06/2011</u>	<u>12/10/2011</u>	<u>02/08/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-111-20445-00-00

Spot Description: _____
NW NW SW SE Sec. 24 Twp. 21 S. R. 10 East West
1125 Feet from North / South Line of Section
2620 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Lyon

Lease Name: Rossillon Well #: 6D

Field Name: _____

Producing Formation: Arbuckle

Elevation: Ground: 1286 Kelly Bushing: 1294

Total Depth: 2952 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 110 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1667 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: 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 Gamsior Date: 09/06/2012



1079238

Operator Name: Trimble & Maclaskey Oil LLC Lease Name: Rossillon Well #: 6D

Sec. 24 Twp. 21 S. R. 10 East West County: Lyon

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 checked="" type="checkbox"/> Yes <input 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 Name Top Datum N/A
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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	12.25	8.625	20	110		90	
Production	7.875	5.5	17	2675		385	

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

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

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	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 # 246534

Invoice Date: 12/15/2011 Terms:

Page 1

TRIMBLE & MACLASKEY OIL LLC
BOX 171
GRIDLEY KS 66852
() -

ROSSILLION #6D
33476
24-21-10E
12-10-11
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	140.00	19.2000	2688.00
1110A	KOL SEAL (50# BAG)	700.00	.4600	322.00
1107A	PHENOSEAL (M) 40# BAG)	140.00	1.2900	180.60
1131	60/40 POZ MIX	245.00	12.5500	3074.75
1118B	PREMIUM GEL / BENTONITE	1685.00	.2100	353.85
1107A	PHENOSEAL (M) 40# BAG)	245.00	1.2900	316.05
4104	CEMENT BASKET 5 1/2"	2.00	229.0000	458.00
4130	CENTRALIZER 5 1/2"	4.00	48.0000	192.00
4253	TYPE A PACKER SHOE 6 1/2X6	1.00	1584.0000	1584.00
4277	DV TOOL SIZE 5 1/2" (STA	1.00	3220.0000	3220.00
4306	THREAD LOCK KIT	1.00	25.0000	25.00
4310	STOP RING 5 1/2"	1.00	30.0000	30.00

Description	Hours	Unit Price	Total
515 TON MILEAGE DELIVERY	547.20	1.34	733.25
520 CEMENT PUMP	1.00	1030.00	1030.00
520 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
520 CEMENT PUMP	1.00	1030.00	1030.00

Parts:	12444.25	Freight:	.00	Tax:	908.43	AR	16265.93
Labor:	.00	Misc:	.00	Total:	16265.93		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK 918/338-0808	EL DORADO, KS 316/322-7022	EUREKA, KS 620/583-7664	PONCA CITY, OK 580/762-2303	OAKLEY, KS 785/672-2227	OTTAWA, KS 785/242-4044	THAYER, KS 620/839-5269	GILLETTE, WY 307/686-4914
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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33476
LOCATION Eureka
FOREMAN Rick Ledford

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8876

FIELD TICKET & TREATMENT REPORT

CEMENT

API# 15-111-20445

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/10/11	7842	Rossillon # 60	24	21	10E	Lyon
CUSTOMER Tumble Machinery Oil LLC			Gulch Orly			
MAILING ADDRESS P.O. Box 171						
CITY Gridley		STATE KS	ZIP CODE 66652			

JOB TYPE L/S 0 HOLE SIZE 7 7/8" HOLE DEPTH 2952' CASING SIZE & WEIGHT 2 1/2" x 12.75#
 DRILL PIPE 2 1/2" 2nd TUBING OTHER O.V. tool @ 1667' KB.
 SLURRY WEIGHT 136# SLURRY VOL 4400 - 7900 WATER gal/ek 9.0 - 8.0 CEMENT LEFT in CASING 44'
 DISPLACEMENT 61 - 38.2 DISPLACEMENT PSI 1100 RATE

REMARKS: Safety meeting. Rig up to 5th casing. Packer shoe set @ 2625' BS. Jct packer shoe @ 2000 BS. Stage 1: Pump 15 bbl water ahead. Mixed 140 sacks thickset cement w/ 5" Katsol/sk + 1" phenosan/sk @ 12.5 gpl yield 1.25 washout pump + loss, release flow plug. Displace w/ 61 bbl water. Final pump pressure 700 PSI. Bump plug to 2000 PSI, release pressure, plug held. Drop top back. Open stage collar @ 1100 BS. Circulated 6 bbl slurry cement w/ cty mud pump. Circulate 2 1/2 hrs stage 1 complete. Stage 2: Pump 10 bbl water ahead. Mixed 245 sacks 60/40 Permiv cement w/ 8.2 gpl + 1" phenosan/sk @ 12.5 gpl yield 1.25. Washout pump + loss, release closing plug. Displace to seat w/ 38.2 bbl water. Final pump pressure 700 PSI. Bump plug to 1100 PSI, tool closed. 1500 PSI. Bump plug. Release pressure, float + plug held. No flow back. Tool closed. 12 bbl slurry to pit. Stage 2 complete. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	30	MILEAGE	4.00	120.00
5401	1	2nd stage pump charge	1030.00	1030.00
1126A	140 sacks	thickset cement	19.20	2688.00
116A	700#	5" Katsol/sk	.46	322.00
1167A	140#	1" phenosan/sk	1.29	180.60
1131	245 sacks	60/40 Permiv cement	12.55	3074.75
1118B	16.85 gal	8.2 gpl	.21	353.85
1167A	245#	1" phenosan/sk	1.29	316.05
5407A	18.24	tan mileage bulk tck	1.34	243.25
4104	2	cement baskets	229.00	458.00
4130	4	centralizers	48.00	192.00
4253	1	5 1/2" x 7 7/8" Type A packer shoe	1589.00	1589.00
4277	1	5 1/2" O.V. tool (stage collar)	3220.00	3220.00
4306	1	thread lock kit	25.00	25.00
4310	1	stop ring 5 1/2"	30.00	30.00
		Subtotal		15357.50
		SALES TAX 7.37%		908.43
		ESTIMATED TOTAL		16265.93

Revin 3737

246334

7.37%

AUTHORIZATION Mick Duke TITLE Drill DATE 12-10-11

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

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 # 246377

Invoice Date: 12/09/2011 Terms:

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TRIMBLE & MACLASKEY OIL LLC
BOX 171
GRIDLEY KS 66852
() -

ROSSILLION #60
33472
24-21S-10E
12-06-11
KS

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	90.00	14.9500	1345.50
1102	CALCIUM CHLORIDE (50#)	255.00	.7400	188.70
1118B	PREMIUM GEL / BENTONITE	170.00	.2100	35.70
1107	FLO-SEAL (25#)	22.00	2.3500	51.70

Description	Hours	Unit Price	Total
445 CEMENT PUMP (SURFACE)	1.00	825.00	825.00
445 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
667 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 1621.60 Freight: .00 Tax: 118.38 AR 3034.98
 Labor: .00 Misc: .00 Total: 3034.98
 Sublt: .00 Supplies: .00 Change: .00

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

EL DORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

PONCA CITY, OK
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OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

GILLETTE, WY
307/686-4914



CONSOLIDATED
Oil Well Services, LLC



ENTERED

TICKET NUMBER 33472

LOCATION Fixera

FOREMAN Rick Lafford

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

API # 15-111-20445

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12/16/14	7842	Rossillon # 60	24	215	10E	Lincoln
CUSTOMER Trimble + Macloskey Oil LLC			Gulick Oil			
MAILING ADDRESS P.O. Box 171						
CITY Gridley	STATE KS	ZIP CODE 66653	TRUCK # 445	DRIVER Dave	TRUCK #	DRIVER
			667	Allen B.		

JOB TYPE surface 0 HOLE SIZE 12 1/4" HOLE DEPTH 124' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 123' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15# SLURRY VOL 21.6 Bbls WATER gal/sk 6.5 CEMENT LEFT IN CASING 20'
 DISPLACEMENT 6 1/2 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting - Rig up to 8 1/2" casing. Break circulation w/ fresh water. Mixed 90 sacks class A cement w/ 3% casing, 2% gel + 1/4" flucel @ 15#/gal. Displace w/ 6 1/2 Bbl fresh water. Shut casing in w/ good cement returns to surface = 6 Bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5403	1	PUMP CHARGE	825.00	825.00
5406	30	MILEAGE	4.00	120.00
11845	90 sacks	Class A cement	14.95	1345.50
1102	255#	3% casing	.74	188.70
1188	170#	2% gel	.21	35.70
1102	22#	1/4" flucel/sk	2.35	51.70
5407	4.23	tar mileage bulk trl	m/c	350.00
				2916.60
			7.30%	SALES TAX 118.39
				ESTIMATED TOTAL 3034.99

Revin 3737

[Signature] 2463M

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.