



KANSAS CORPORATION COMMISSION 1079237
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>12/01/2011</u>	<u>12/04/2011</u>	<u>01/11/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-111-20444-00-00
Spot Description: _____
 NW SW SE Sec. 24 Twp. 21 S. R. 10 East West
990 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Lyon
Lease Name: Rossillon Well #: 5
Field Name: _____
Producing Formation: Arbuckle
Elevation: Ground: 1273 Kelly Bushing: 1281
Total Depth: 2675 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 126 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: 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 Gamba Date: 08/16/2012



1079237

Operator Name: Trimble & Maclaskey Oil LLC Lease Name: Rossillon Well #: 5
 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 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: Gamma Ray/ Neutron/ CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Mississippi</td> <td>2154</td> <td>875</td> </tr> <tr> <td>Kinderhook</td> <td>2498</td> <td>1217</td> </tr> <tr> <td>Viola</td> <td>2589</td> <td>1308</td> </tr> <tr> <td>Arbuckle</td> <td>2596</td> <td>1315</td> </tr> <tr> <td>Total depth</td> <td>2675</td> <td>1394</td> </tr> </tbody> </table>	Name	Top	Datum	Mississippi	2154	875	Kinderhook	2498	1217	Viola	2589	1308	Arbuckle	2596	1315	Total depth	2675	1394
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Arbuckle	2596	1315																	
Total depth	2675	1394																	

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	126		90	
Production	7.875	5.5	17	2675		125	

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: <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.	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 # **246375**

Invoice Date: **12/09/2011** Terms: _____ Page **1**

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

ROSSILLION #5
33466
24-21S-10E
12-04-11
KS

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	125.00	19.2000	2400.00
1110A	KOL SEAL (50# BAG)	625.00	.4600	287.50
1107A	PHENOSEAL (M) 40# BAG)	30.00	1.2900	38.70
1103	CAUSTIC SODA	100.00	1.6100	161.00
4159	FLOAT SHOE AFU 5 1/2"	1.00	344.0000	344.00
4104	CEMENT BASKET 5 1/2"	1.00	229.0000	229.00
4130	CENTRALIZER 5 1/2"	6.00	48.0000	288.00
4454	5 1/2" LATCH DOWN PLUG	1.00	254.0000	254.00

Description	Hours	Unit Price	Total
445 CEMENT PUMP	1.00	1030.00	1030.00
445 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00
WASH- WASH OR SWIVEL HEAD	1.00	100.00	100.00
667 MIN. BULK DELIVERY	1.00	350.00	350.00

Parts: 4002.20 Freight: .00 Tax: 292.16 AR 5894.36
 Labor: .00 Misc: .00 Total: 5894.36
 Sublt: .00 Supplies: .00 Change: .00

Signed _____ Date _____



ENTERED

TICKET NUMBER 33466
 LOCATION Eureka, KS
 FOREMAN Shannon Feck

PO Box 884, Chanute, KS 66720
 620-431-9210 or 800-467-8576

FIELD TICKET & TREATMENT REPORT
 CEMENT API #

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-4-11	7842	Rossillon #5	24	215	10E	LYON
CUSTOMER Trimbler MacLuskey Oil LLC			Gulick DRL6			
MAILING ADDRESS P.O. Box 171			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Gridley			667	Allen B		
STATE KS			Extra Hand	Chris B.		
ZIP CODE 66852						

JOB TYPE Long String HOLE SIZE 7 7/8" HOLE DEPTH 2675' CASING SIZE & WEIGHT 5 1/2" @ 17#
 CASING DEPTH 2675.86' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.7# SLURRY VOL 42 Bbl WATER gal/blk 9.0 CEMENT LEFT IN CASING NONE
 DISPLACEMENT 63 1/4" DISPLACEMENT PSI 900 Bump Plug 1300 RATE 5BPM

REMARKS: Rig up to 5 1/2" casing with rotating head, Break Circulation with 5 Bbl water, Mixed 12 Bbl Caustic soda pre flush, 5 Bbl water spacer. Mixed 125 SKS Thickset Cement with 5# Kol-seal/SK & 1/4# Pheno-seal/SK @ 13.7#/gal. Shut down wash out pump & lines & displace with 63 1/4" Bbl. Final pumping pressure of 900psi, bumped plug to 1300psi, Good circulation @ all times. Wait two minutes & release pressure. Float & plug held good. Job complete. Ran centralizers on 1, 2, 3, 5, 10 & 15. & Ran a basket on # 8.

"Thanks Shannon & Crew"

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
1126 A	125 SKS	Thickset Cement	19.20	2400.00
1110 A	625 #	Kol-seal @ 5#/SK	.46	287.50
1107 A	30 #	Pheno-seal @ 1/4#/SK	1.29	38.70
1103	100 #	Caustic Soda pre flush (12 Bbl)	1.61	161.00
5407	6.87 Tons	Ton mileage bulk truck	M/C	350.00
4159	1	5 1/2" AFV Float Shoe	344.00	344.00
4104	1	5 1/2" Cement Basket	229.00	229.00
4130	6	5 1/2" x 7 7/8" Centralizers	48.00	288.00
4454	1	5 1/2" Latch down Plug	254.00	254.00
5611	1	Rental on Rotating head	100.00	100.00
		Sub total		5602.20
		7.3% SALES TAX		408.16
		ESTIMATED TOTAL		5994.36

Ravin 5737

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.



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 # **246335**

Invoice Date: **12/09/2011** Terms:

Page **1**

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

ROSSILLION #5
33446
24-218-10E
12-01-11
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
479 MIN. BULK DELIVERY	1.00	350.00	350.00
485 CEMENT PUMP (SURFACE)	1.00	825.00	825.00
485 EQUIPMENT MILEAGE (ONE WAY)	30.00	4.00	120.00

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 _____



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 33446
LOCATION Europe
FOREMAN Steve Mead

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-487-8876

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-1-11	1940	Rossillon #5	24	215	10E	Leon
CUSTOMER Zimble MacLuskey Oil LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS Box 171			485	Alan M.		
CITY Gridley			479	Mark		
STATE KS						
ZIP CODE 66852						

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 126' CASING SIZE & WEIGHT 8 3/8"
CASING DEPTH 114' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 14.6# SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT In CASING 28'
DISPLACEMENT 6 3/4 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting. Rig up to 8 3/8" casing. Break circulation w/ 5 bbls Freshwater. Mix 905A Class A Cement w/ 3% Cacl₂, 2% Gel & 1/2" Flo-Cele perft At 146'. Displace with 6 3/4 bbls Fresh Water Shut well in. Good Cement Returns to Surface. 6 bbls to pit. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	30	MILEAGE	4.00	120.00
11045	90 sks	Class A Cement	14.95	1345.50
1102	255 #	Cacl ₂ 3%	.74	188.70
1118B	170 #	Gel 2%	.31	35.70
1107	22 #	1/2" Flo-Cele perft	2.35	51.70
5407	4.23	Ton mileage Bulk Truck	mic	350.00
			Sub Total	2916.60
			SALES TAX	118.38
			ESTIMATED TOTAL	3034.98

Rev'n 3757

AUTHORIZATION [Signature] TITLE Driller DATE 12-1-11

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.