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

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

OPERATOR: License # 34515  
 Name: 6 G Twister, Inc  
 Address 1: PO Box 1565  
 Address 2:  
 City: Gillette State: WY Zip: 82717 +  
 Contact Person: Lee Greene  
 Phone: (307) 682-7380  
 CONTRACTOR: License # 34514  
 Name: Greene Enterprises of Kansas, Inc  
 Wellsite Geologist: None  
 Purchaser: None

## 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: Empire Drilling  
 Well Name: Madden-Davis 'B' 1

Original Comp. Date: 1/15/1954 Original Total Depth: 3807

- ☐ 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 #:

April 21, 2011

Spud Date or  
Recompletion Date

Date Reached TD

Plugged 4/29/11  
Completion Date or  
Recompletion Date

API No. 15 - 065-00447-0001

## Spot Description:

E/2\_NE\_SE Sec. 17 Twp. 8 S. R. 25 ☐ East ☒ West  
 1,980 Feet from ☐ North / ☒ South Line of Section  
 330 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: Graham

Lease Name: Madden Davis 'B' Well #: 1

Field Name: Schmeid

Producing Formation: Lansing/Kansas City

Elevation: Ground: 2345 Kelly Bushing:

Total Depth: 1450 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 199 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: ppm Fluid volume: bbls

Dewatering method used:

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. ☐ East ☐ West

County: Permit #:

**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: *Lee Greene*

Title: President Date: 9/11/2012

## KCC Office Use ONLY

☐ Letter of Confidentiality Received

Date:

☐ Confidential Release Date:☐ Wireline Log Received☐ Geologist Report Received☐ UIC DistributionALT ☐ I ☒ II ☐ III Approved by: *DG* Date: 9/12/12

Operator Name: 6 G Twister, Inc Lease Name: Madden Davis 'B' Well #: 1  
 Sec. 17 Twp. 8 S. R. 25 ☐ East ☒ West County: Graham

**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 ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No

Electric Log Submitted Electronically ☐ Yes ☒ No  
 (If no, Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum

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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

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
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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 (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. (Submit ACO-5) <input type="checkbox"/> Commingled (Submit ACO-4) <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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# ALLIED CEMENTING CO., LLC. 039924

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

SERVICE POINT:

*09 Kly, KS*

DATE <i>4/29/14</i>	SEC. <i>17</i>	TWP. <i>8</i>	RANGE <i>25</i>	CALLED OUT	ON LOCATION	JOB START <i>3:00 p.m.</i>	JOB FINISH <i>3:30 p.m.</i>
LEASE <i>Madden Davis</i>	WELL # <i>B #1</i>	LOCATION <i>Stedley 2E 1/2 S</i>			COUNTY <i>Graham</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one) <i>Work Down</i>							

CONTRACTOR <i>Green Drilling</i>	OWNER <i>Same</i>
TYPE OF JOB <i>TA</i>	
HOLE SIZE <i>7 7/8</i>	T.D.
CASING SIZE <i>8 7/8</i>	DEPTH
TUBING SIZE <i>2 7/8</i>	DEPTH <i>1450</i>
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

EQUIPMENT			
PUMP TRUCK	CEMENTER <i>Alan</i>	<i>Flo Seal</i>	<i>3716</i>
# <i>422</i>	HELPER <i>Wayne</i>		
BULK TRUCK			
# <i>404</i>	DRIVER <i>Wes</i>		
BULK TRUCK			
#	DRIVER		

HANDLING <i>157 SK</i>	
MILEAGE <i>114 SK/mile</i>	
TOTAL	<i>3481.75</i>

REMARKS:

*100 SK @ 14.50*

*10 SK @ 2.50*

*10 SK @ 4.00*

DEPTH OF JOB	<i>1450</i>
PUMP TRUCK CHARGE	<i>12.00</i>
EXTRA FOOTAGE	
MILEAGE <i>55 X 2</i>	<i>110.00</i>
MANIFOLD	
<i>157 vehicle 55 X 2</i>	<i>4.00</i>

CHARGE TO: *6 A Twister*

STREET

CITY STATE ZIP

TOTAL *3735.00*

*2460.00*

PLUG & FLOAT EQUIPMENT

*wooden Plug*

*82.00*

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

SIGNATURE *[Signature]*

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SALES TAX (If Any) *50.96*

TOTAL CHARGES *7204.51*

DISCOUNT *1570.00*

TOTAL *5634.51*

IF PAID IN 30 DAYS

*5506.26*