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OCT 05 2012
KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 34475
Name: TransCanada Keystone Pipeline, LP
Address 1: 717 Texas St, Ste 24100
Address 2: _____
City: Houston State: TX Zip: 77002 + _____
Contact Person: Chuck Bucy
Phone: (860) 939-3239
CONTRACTOR: License # KS791
Name: Giles Environmental Drilling
Wellsite Geologist: _____
Purchaser: _____

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: N/A
Well Name: N/A

Original Comp. Date: N/A Original Total Depth: N/A
 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 #: _____
7/24/12 7/30/12 7/30/12
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 117-20023-0000
Spot Description: 39.986542, -96.676089
NW NW NW NW Sec. 8 Twp. 1 S. R. 7 East West
162 Feet from North / South Line of Section
95 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Marshall
Lease Name: MP 658.25 Well #: 1
Field Name: N/A
Producing Formation: _____
Elevation: Ground: 1353 Kelly Bushing: N/A
Total Depth: 300' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 200' 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: 3570 ppm Fluid volume: 151.19 bbls
Dewatering method used: Plate/Frame Filter Press
Location of fluid disposal if hauled offsite:
Operator Name: Reddi Industries, Inc
Lease Name: N/A License #: N/A
Quarter NE Sec. 35 Twp. 27 S. R. 1 East West
County: Sedgwick Permit #: Solid Waste KDHE No.856

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: Rusty Law
Title: Project Coordinator Date: 10/4/2012

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: D/S Date: 10/5/12

Operator Name: TransCanada Keystone Pipeline, LP Lease Name: MP 658.25 Well #: 1
 Sec. 8 Twp. 1 S. R. 7 East West County: Marshall

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 type="checkbox"/> Yes <input checked="" 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 checked="" 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
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CASING RECORD <input 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 Casing	17"	10"	N/A	200'	Portland	6.0 yds	N/A

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ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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

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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Midwest Products, LLC

203 W North

Hanover, Kansas 66945

785-337-2252

www.midwestproductslc.com

Invoice

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AUG 29 2012

BY: _____

Date	Invoice #
8/24/2012	14314

Bill To
MESA PRODUCTS PO BOX 52608 TULSA, OK 74152 ATTN: ROBERT HOGAN

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		Project/PO #	Terms
			Due by 10th
Quantity	Description	Rate	Amount
6	22 sack ready mix 7/27/12 MP658 10-11-0873	290.00	1,740.00T
16	Hauling	4.00	64.00T
	Sales Tax	6.30%	113.65
Thank you! Please include invoice number on check. A 1.5% finance fee is added to past due accounts.		Total	\$1,917.65

TRANS CANADA
APPROVED
OK
RS

Cash, Check, Visa or Master Card.

Please contact us if you would like your monthly invoices emailed or faxed.

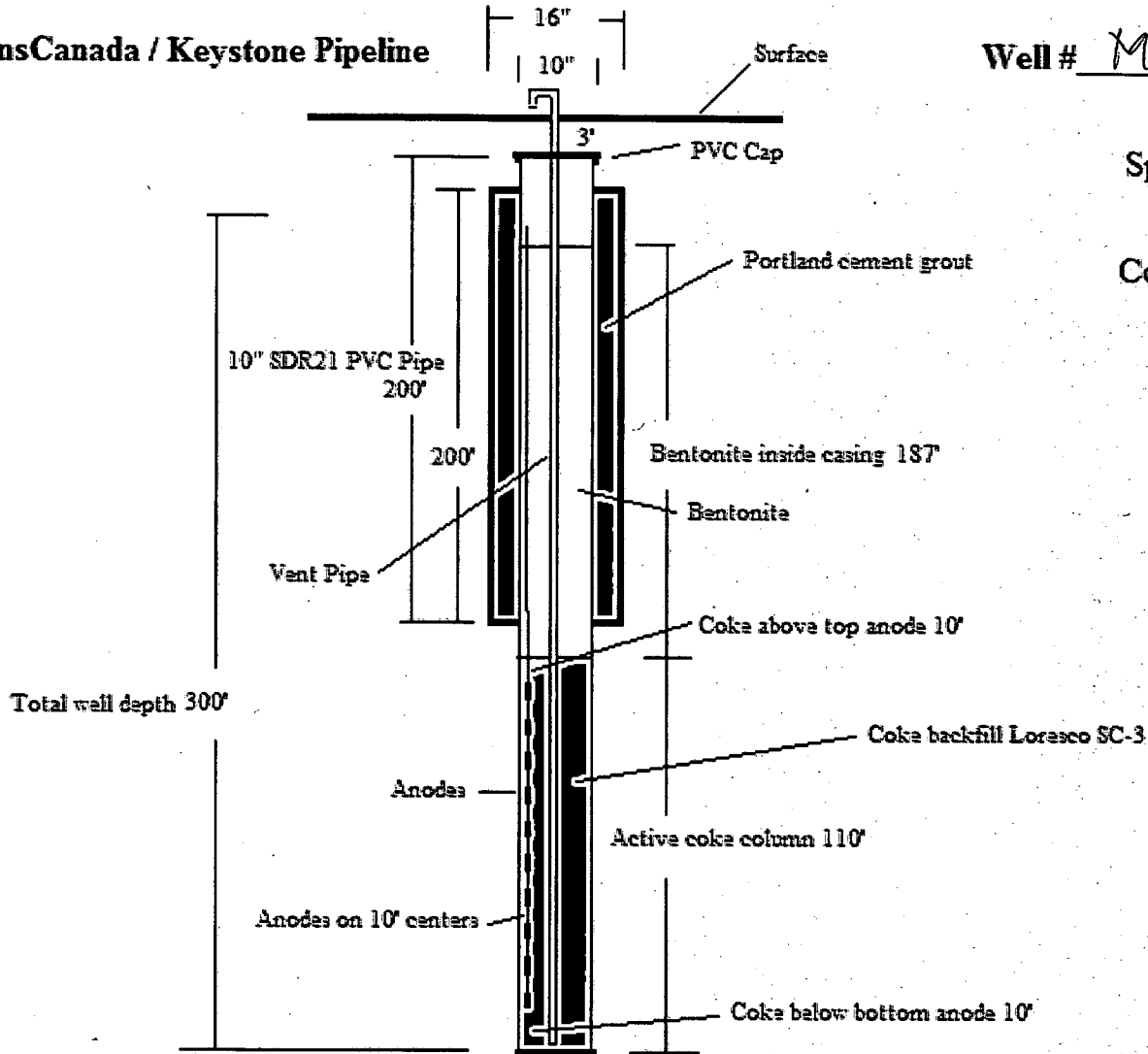
Thank you.

TransCanada / Keystone Pipeline

Well # MP 658.25

Spud Date 7-24-12

Completion Date 7-30-12



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