

CORRECTION #1



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

1095791

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 # 30742

Name: Palomino Petroleum, Inc.

Address 1: 4924 SE 84TH ST

Address 2:

City: NEWTON State: KS Zip: 67114 + 8827

Contact Person: Klee R. Watchous

Phone: ( 316 ) 799-1000

CONTRACTOR: License # 33575

Name: WW Drilling, LLC

Wellsite Geologist: Ryan Seib

Purchaser: None

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 (Cora, 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 #:

06/26/2012	07/02/2012	07/03/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-135-25400-00-00

Spot Description:

NE NW SE SE Sec. 16 Twp. 18 S. R. 26  East  West

1245 Feet from  North /  South Line of Section

748 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE  NW  SE  SW

County: Ness

Lease Name: Atwell Family Trust Well #: 1

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 2637 Kelly Bushing: 2639

Total Depth: 4666 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 220 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: NAOMI JAMES Date: 10/03/2012



Operator Name: Palomino Petroleum, Inc. Lease Name: Atwell Family Trust Well #: 1  
 Sec. 16 Twp. 18 S R. 26  East  West County: Ness

**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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name Attached	Top Attached	Datum Attached
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 <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Radiation Guard Log				

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	23	220	Class A	165	2%gel 3%cc

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 - Bndgo 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
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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 <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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Form	ACO1 - Well Completion
Operator	Palomino Petroleum, Inc.
Well Name	Atwell Family Trust 1
Doc ID	1095791

Tops

Name	Top	Depth
Anhy.	1988	+ 651
Base Anhy	2012	+ 626
Heebner	3950	-1311
Lansing	3988	-1349
BKC	4312	-1673
Marmaton	4354	-1715
Pawnee	4439	-1800
Ft. Scott	4494	-1855
Cherokee Sh.	4522	-1883
Miss. Porosity	4612	-1704
LTD	4665	-2026

### Summary of Changes

Lease Name and Number: Atwell Family Trust 1

API/Permit #: 15-135-25400-00-00

Doc ID: 1095791

Correction Number: 1

Approved By: NAOMI JAMES

Field Name	Previous Value	New Value
Approved Date	10/01/2012	10/03/2012
Field Name		Wildcat
Producing Formation	Mississippian	None
Purchaser's Name		None
Save Link	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1093875">../kcc/detail/operatorEditDetail.cfm?docID=1093875</a>	<a href="http://.../kcc/detail/operatorEditDetail.cfm?docID=1095791">../kcc/detail/operatorEditDetail.cfm?docID=1095791</a>

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