



KANSAS CORPORATION COMMISSION 1094477
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 # 32672
Name: Willis, Barbara A. dba Willis Energy
Address 1: 19504 325TH RD
Address 2: _____
City: NEODESHA State: KS Zip: 66757 + 1788
Contact Person: Jim Mugrage
Phone: (620) 325-5189
CONTRACTOR: License # 33286
Name: Lorenz, Barton T.
Wellsite Geologist: Tab Schweitzer
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>08/13/2012</u>	<u>08/14/2012</u>	<u>09/11/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-205-28033-00-00
Spot Description: _____
SW SE NE SE Sec. 30 Twp. 30 S. R. 16 East West
1324 Feet from North / South Line of Section
635 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Wilson
Lease Name: MOORE Well #: I-25
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: 793 Kelly Bushing: 6
Total Depth: 873 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 42 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 cm.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 25 ppm Fluid volume: 5 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



1094477

Operator Name: Willis, Barbara A. dba Willis Energy Lease Name: MOORE Well #: I-25
 Sec. 30 Twp. 30 S. R. 16 East West County: Wilson

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 Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top 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: Cornish Wireline Services, Inc.			

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	11	8.625	23	42.3	OWC	40	
Production	6.5	2.875	6.5	861	OWC	143	

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 Cas.ng				
<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 <i>(Amount and Kind of Material Used)</i>	Depth
2	804-810	25 sx Sand 16/20	
2	810-820	75 sx Sand 12/30	
		100# Water Gel	
		7/8" B10 Ball Sealers 15%HCL	

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	Willis, Barbara A. dba Willis Energy
Well Name	MOORE I-25
Doc ID	1094477

Tops

Clay Dirt	0	7
Gravel Clay	7	24
Shale	24	72
Lime	72	90
Shale	90	111
Lime	111	153
Shale	153	156
Lime	156	160
Shale	160	221
Sand	221	231
Lime	231	245
Shale	245	265
Lime	265	296
Shale	296	343
Lime	343	368
Shale	368	440
Sand Water	440	450
Shale	450	517
Lime	517	560
Shale	560	566
Lime	566	570
Sandy Shale	570	611
Lime Oswego	611	630
Shale	630	636

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Tops

	Top	Depth
Lime	636	642
Shale Lime	642	657
Shale	657	663
Lime	663	666
Shale	666	784
Sand Odor	784	790
Sandy Shale	790	805
Sand Odor	805	823
Sandy Shale	823	873
Total Depth	873	

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
8/17/2012	47031

Cement Treatment Report

Willis Energy
19504 325 Road
Neodesha, KS 66757

(x) Landed Plug on Bottom at 900 PSI
 () Shut in Pressure
 (x) Good Cement Returns
 () Topped off well with 40 sacks *surface*
 (x) Set float shoe

TYPE OF TREATMENT: Production Casing
 HOLE SIZE: 6 3/4"
 TOTAL DEPTH: 871

Well Name	Terms	Due Date		
	Net 15 days	8/17/2012		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Run 2 7/8"	861	3.10	2,669.10	
Cement 2 7/8"	1	1,000.00	1,000.00	
Sales Tax		7.30%	0.00	

8-14-12
 Moore #I-25
 Wilson County
 Section: 30
 Township: 30
 Range: 16

RECEIVED
 SEP 20 2012
 KCC WICHITA

Hooked onto 2 7/8" casing. Established circulation with 12 barrels of water, 2 GEL, METSO, COTTONSEED ahead, blended 143 sacks of 2% cement, dropped 2 rubber plugs, and pumped 5 barrels of water

Total	\$3,669.10
Payments/Credits	\$0.00
Balance Due	\$3,669.10