



KANSAS CORPORATION COMMISSION 1095753
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 # 31160
Name: Phillips Exploration Company L.C.
Address 1: 1601 Sagebrush
Address 2: _____
City: WICHITA State: KS Zip: 67230 + 7010
Contact Person: James B. Phillips
Phone: (316) 636-2256
CONTRACTOR: License # 33350
Name: Southwind Drilling, Inc.
Wellsite Geologist: James B. Phillips
Purchaser: na

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 #: _____

| 01/05/2012 | 01/11/2012 | 01/11/2012 |
|-----------------------------------|-----------------|-----------------------------------------|
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-185-23730-00-00
Spot Description: _____
NE SE NW NE Sec. 7 Twp. 21 S. R. 13 East West
980 Feet from North / South Line of Section
1490 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Stafford
Lease Name: Debes Well #: 1-7
Field Name: _____
Producing Formation: na
Elevation: Ground: 1911 Kelly Bushing: 1919
Total Depth: 3675 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 225 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: 500 ppm Fluid volume: 400 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 Gantner Date: 10/09/2012



1095753

Operator Name: Phillips Exploration Company L.C. Lease Name: Debes Well #: 1-7
 Sec. 7 Twp. 21 S. R. 13 East West County: Stafford

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 checked="" type="checkbox"/> Yes <input 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: Dual Induction Compensated Density Micro | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3206</td> <td>-1287</td> </tr> <tr> <td>Lansing</td> <td>3336</td> <td>-1417</td> </tr> <tr> <td>B/KC</td> <td>3558</td> <td>-1634</td> </tr> <tr> <td>Arbuckle</td> <td>3624</td> <td>-1705</td> </tr> <tr> <td>TD</td> <td>3675</td> <td>-1756</td> </tr> </table> | Name | Top | Datum | Heebner | 3206 | -1287 | Lansing | 3336 | -1417 | B/KC | 3558 | -1634 | Arbuckle | 3624 | -1705 | TD | 3675 | -1756 |
| Name | Top | Datum | | | | | | | | | | | | | | | | | |
| Heebner | 3206 | -1287 | | | | | | | | | | | | | | | | | |
| Lansing | 3336 | -1417 | | | | | | | | | | | | | | | | | |
| B/KC | 3558 | -1634 | | | | | | | | | | | | | | | | | |
| Arbuckle | 3624 | -1705 | | | | | | | | | | | | | | | | | |
| TD | 3675 | -1756 | | | | | | | | | | | | | | | | | |

| 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 | 12.5 | 8.625 | 23 | 225 | common | 300 | 60/40 |
| | | | | | | | |
| | | | | | | | |

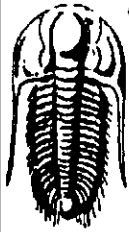
| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|---------------------------------------|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| ___ Perforate | | | | |
| ___ Protect 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: Yes 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: _____ _____ |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Phillips Exploration Co

7-21S-13W Stafford

1601 N Sagebrush
Wichita, KS 67230

Debes 1-7

Job Ticket: 44139

DST#: 3

ATTN: Jim Phillips

Test Start: 2012.01.10 @ 18:41:59

GENERAL INFORMATION:

Formation: **Arbuckle**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 20:10:44

Time Test Ended: 01:17:59

Test Type: Conventional Bottom Hole (Reset)

Tester: Leal Cason

Unit No: 45

Interval: **3545.00 ft (KB) To 3635.00 ft (KB) (TVD)**

Reference Elevations: 1919.00 ft (KB)

Total Depth: 3635.00 ft (KB) (TVD)

1911.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Good

KB to GR/CF: 8.00 ft

Serial #: **6798**

Inside

Press@RunDepth: 265.14 psig @ 3546.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2012.01.10

End Date:

2012.01.11

Last Calib.: 2012.01.11

Start Time: 18:42:00

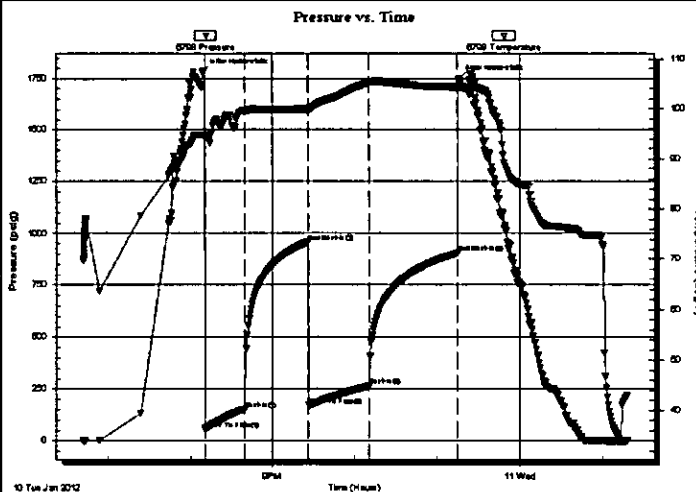
End Time:

01:17:59

Time On Btm: 2012.01.10 @ 20:08:59

Time Off Btm: 2012.01.10 @ 23:15:59

TEST COMMENT: IF: Strong Blow, BOB in 8 minutes
IS: No Blow back
FF: Fair Blow, BOB in 17 minutes
FS:



PRESSURE SUMMARY

| Time (Mn.) | Pressure (psig) | Temp (deg F) | Annotation |
|------------|-----------------|--------------|----------------------|
| 0 | 1778.56 | 94.75 | Initial Hydro-static |
| 2 | 55.06 | 94.36 | Open To Flow (1) |
| 31 | 151.61 | 99.44 | Shut-in(1) |
| 77 | 957.51 | 99.97 | End Shut-in(1) |
| 78 | 170.54 | 99.81 | Open To Flow (2) |
| 122 | 265.14 | 105.19 | Shut-in(2) |
| 186 | 904.64 | 104.33 | End Shut-in(2) |
| 187 | 1747.78 | 104.45 | Final Hydro-static |

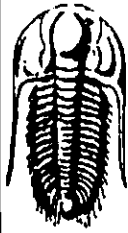
Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|---------------|--------------|
| 189.00 | MCW 30%M 70%W | 2.65 |
| 189.00 | WCM 40%W 60%M | 2.65 |
| 282.00 | Mud | 3.96 |
| | | |
| | | |

* Recovery from multiple tests

Gas Rates

| | Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|--|----------------|-----------------|------------------|
| | | | |



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Phillips Exploration Co

7-21S-13W Stafford

1601 N Sagebrush
Wichita, KS 67230

Debes 1-7

Job Ticket: 44139

DST#: 3

ATTN: Jim Phillips

Test Start: 2012.01.10 @ 18:41:59

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

40000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 9.59 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 8500.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

| Length ft | Description | Volume bbl |
|--------------|---------------|---------------|
| 189.00 | MCW 30%M 70%W | 2.651 |
| 189.00 | WCM 40%W 60%M | 2.651 |
| 282.00 | Mud | 3.956 |

Total Length: 660.00 ft Total Volume: 9.258 bbl

Num Fluid Samples: 0

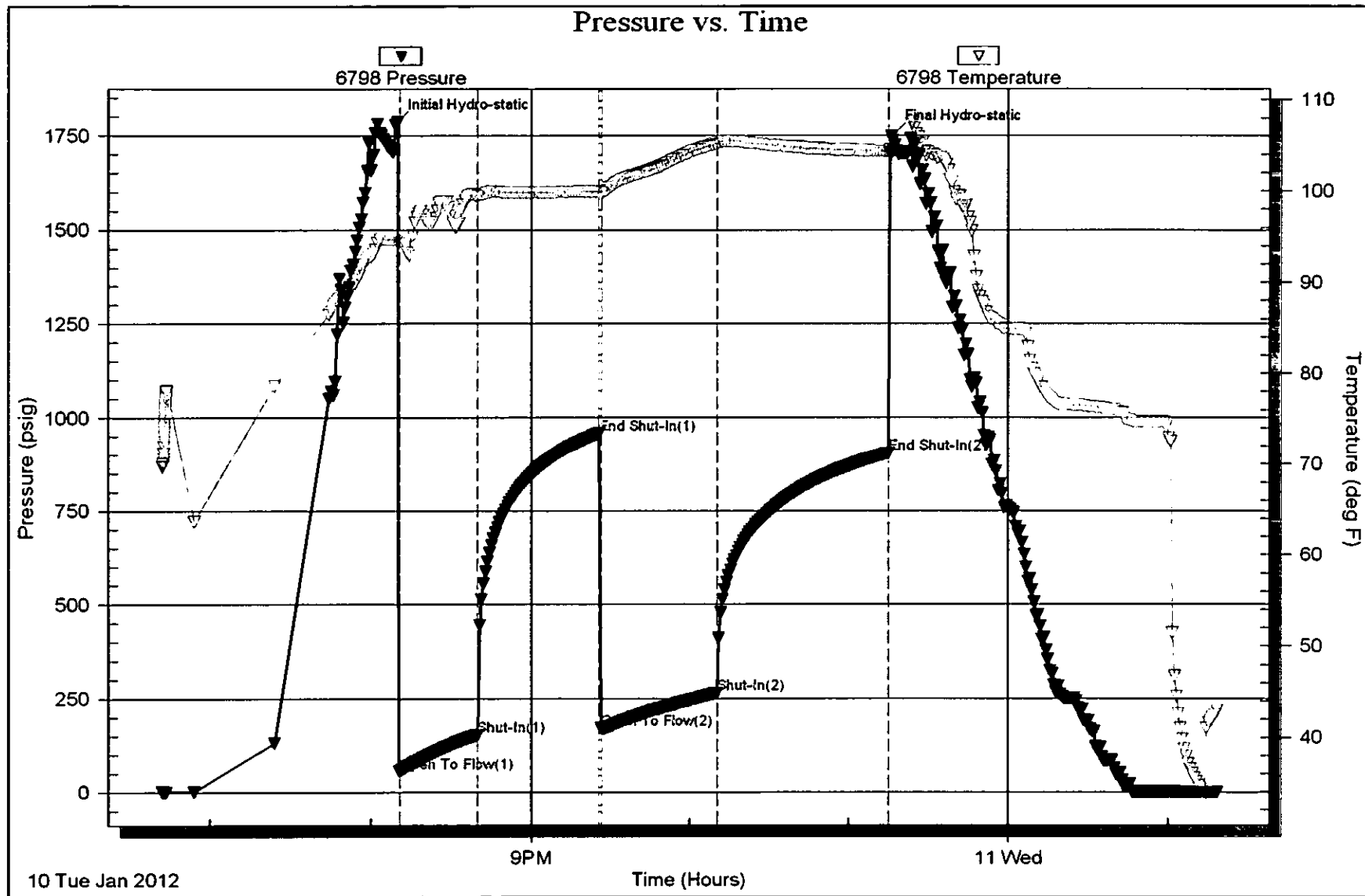
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: RW w as .36 @ 35 degrees



QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

No. 560

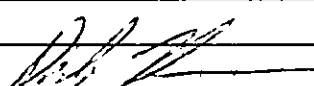
| | | | | | | | | | | | | | | | | |
|-------------------------------------|---------------------------|----------|------------|------------|----------|----------------------------------------------------------------------------------|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------|----|--------------|--|--------|---------|--|
| Date | 1-5-12 | Sec. | 7 | Twp. | 21 | Range | 13 | County | Stafford | State | Ks | On Location | | Finish | 9:45 PM | |
| Lease | Debes | | Well No. | 1-7 | | Location | | BT + Stafford Co line, 15, 2 1/2 W | | | | | | | | |
| Contractor | Southwind #1 | | | | | | | Owner S/Into | | | | | | | | |
| Type Job | Surface | | | | | | | To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | | |
| Hole Size | 12 1/4" | | T.D. | 227' | | Charge To | | Phillips Exploration | | | | | | | | |
| Csg. | 8 5/8" | | Depth | 225' | | Street | | | | | | | | | | |
| Tbg. Size | | | Depth | | | City | | State | | | | | | | | |
| Tool | | | Depth | | | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | | |
| Cement Left in Csg. | 15' | | Shoe Joint | 15' | | Cement Amount Ordered | | 225 sx Common 3%CL. 2%Gel | | | | | | | | |
| Meas Line | | | Displace | 13 1/4 BLS | | 1/2# Flo-seal | | 200 sx Common | | 3%CL. 2%Gel | | | | | | |
| EQUIPMENT | | | | | | | | | | | | | | | | |
| Pumptrk | 1 No. | Cementor | Cisco | | Common | | 300 | | | | | | | | | |
| Bulktrk | 14 No. | Driver | Brian | | Poz. Mix | | | | | | | | | | | |
| Bulktrk | p.m. No. | Driver | Rick | | Gel. | | 9 | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | | | | | | | | | | |
| Remarks: | Cement did NOT Circulate. | | | | | | | Calcium 12 | | | | | | | | |
| Rat Hole | | | | | | | | Hulls | | | | | | | | |
| Mouse Hole | | | | | | | | Salt | | | | | | | | |
| Centralizers | | | | | | | | Flowseal 112# | | | | | | | | |
| Baskets | | | | | | | | Kol-Seal | | | | | | | | |
| D/V or Port Collar | | | | | | | | Mud CLR 48 | | | | | | | | |
| | | | | | | | | CFL-117 or CD110 CAF 38 | | | | | | | | |
| | | | | | | | | Sand | | | | | | | | |
| | Run 92' of 1" pipe | | | | | | | Handling 446 | | | | | | | | |
| | down backside & mixed | | | | | | | Mileage | | | | | | | | |
| | 75 sx Common 3%CL | | | | | | | FLOAT EQUIPMENT | | | | | | | | |
| | 2%Gel. | | | | | | | Guide Shoe | | | | | | | | |
| | Cement did Circulate. | | | | | | | Centralizer | | | | | | | | |
| | wash up & Rigged down. | | | | | | | Baskets | | | | | | | | |
| | | | | | | | | AFU Inserts | | | | | | | | |
| | | | | | | | | Float Shoe | | | | | | | | |
| | | | | | | | | Latch Down | | | | | | | | |
| | | | | | | | | Pumptrk Charge Surface | | | | | | | | |
| | | | | | | | | Mileage 18 | | | | | | | | |
| | | | | | | | | | | | | Tax | | | | |
| | | | | | | | | | | | | Discount | | | | |
| | | | | | | | | | | | | Total Charge | | | | |
| X Signature <i>Ruby [Signature]</i> | | | | | | | | | | | | | | | | |

QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025
Cell 785-324-1041

Home Office P.O. Box 32 Husker, NE 68705

No. 208

| | | | | | | | | | | | | | | | |
|-----------------------------------|-------------------------------------------------------------------------------------|------|------------|----------------------------------------------------------------------------------|----|---------------------------------------------------|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------|----|-------------|--|--------|---------|
| Date | 1/11/12 | Sec. | 9 | Twp. | 21 | Range | 13 | County | Stafford | State | KS | On Location | | Finish | 8:00 PM |
| Lease | Debes | | Well No. | 1-7 | | Location Barton / Stafford CL 15, 2 1/2 W, S 20th | | | | | | | | | |
| Contractor | Southwind Drilling Rig #1 | | | | | | | Owner | | | | | | | |
| Type Job | PTA | | | | | | | To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. | | | | | | | |
| Hole Size | 7 7/8" | | T.D. | 3675' | | | | | | | | | | | |
| Csg. | | | Depth | Charge To Phillips Exploration | | | | | | | | | | | |
| Tbg. Size | | | Depth | Street | | | | | | | | | | | |
| Tool | | | Depth | City State | | | | | | | | | | | |
| Cement Left in Csg. | | | Shoe Joint | The above was done to satisfaction and supervision of owner agent or contractor. | | | | | | | | | | | |
| Meas Line | | | Displace | Cement Amount Ordered 22050 60/110 1/2 gal 1/2 Flow | | | | | | | | | | | |
| EQUIPMENT | | | | | | | | | | | | | | | |
| Pumptrk | 9 | No. | Cement | Pmi | | Common 132 | | | | | | | | | |
| Bulktrk | 10 | No. | Driver | Matt | | Poz. Mix 88 | | | | | | | | | |
| Bulktrk | PV | No. | Driver | Bryan | | Gel. 8 | | | | | | | | | |
| JOB SERVICES & REMARKS | | | | | | | | | | | | | | | |
| Remarks: | Calcium | | | | | | | | | | | | | | |
| Rat Hole | 305x | | | | | | | | | | | | | | |
| Mouse Hole | 205x | | | | | | | | | | | | | | |
| Centralizers | Hulls | | | | | | | | | | | | | | |
| Baskets | Salt | | | | | | | | | | | | | | |
| D/V or Port Collar | Flowseal 50A | | | | | | | | | | | | | | |
| | Kol-Seal | | | | | | | | | | | | | | |
| | Mud CLR 48 | | | | | | | | | | | | | | |
| | CFL-117 or CD110 CAF 38 | | | | | | | | | | | | | | |
| | Sand | | | | | | | | | | | | | | |
| | Handling 228 | | | | | | | | | | | | | | |
| | Mileage | | | | | | | | | | | | | | |
| FLOAT EQUIPMENT | | | | | | | | | | | | | | | |
| | Guide Shoe | | | | | | | | | | | | | | |
| | Centralizer | | | | | | | | | | | | | | |
| | Baskets | | | | | | | | | | | | | | |
| | AFU Inserts | | | | | | | | | | | | | | |
| | Float Shoe | | | | | | | | | | | | | | |
| | Latch Down | | | | | | | | | | | | | | |
| | Pumptrk Charge 18 plug | | | | | | | | | | | | | | |
| | Mileage 18 | | | | | | | | | | | | | | |
| | Tax | | | | | | | | | | | | | | |
| | Discount | | | | | | | | | | | | | | |
| | Total Charge | | | | | | | | | | | | | | |
| X Signature |  | | | | | | | | | | | | | | |

Thank You!!