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OCT 12 2012

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License # 6030
Name: Ainsworth Operating Company
Address 1: 4676 Commercial St. SE
Address 2: # 412
City: Salem State: OR Zip: 97302 +
Contact Person: Al Ainsworth
Phone: (503) 881-4357
CONTRACTOR: License # 30606
Name: Murphin Drilling Co.
Wellsite Geologist: Randy Killian
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 #: _____

9/29/10	10/5/10	10/6/10
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 195-22684-00-00
Spot Description: _____
C SW NW Sec. 33 Twp. 15 S. R. 25 East West
1980 Feet from North / South Line of Section
500 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Trego
Lease Name: Basinger Well #: 2
Field Name: Basinger
Producing Formation: _____
Elevation: Ground: 2460 Kelly Bushing: 2471
Total Depth: 4485 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: 66000 ppm Fluid volume: 500 bbls
Dewatering method used: evaporation
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: _____
Title: Vice President Date: 10/8/12

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: DJG Date: 10/16/12

Operator Name: Ainsworth Operating Company Lease Name: Basinger Well #: 2
 Sec. 33 Twp. 15 S. R. 25 East West County: Trego

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 type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: Dual Induction, Dual Compensated Porosity, Microresistivity	<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>Anhydrite</td> <td>1884</td> <td>+587</td> </tr> <tr> <td>Heebner Shale</td> <td>3745</td> <td>-1274</td> </tr> <tr> <td>Lansing</td> <td>3781</td> <td>-1310</td> </tr> <tr> <td>Bkc</td> <td>4089</td> <td>-1618</td> </tr> <tr> <td>Mississippian</td> <td>4385</td> <td>-1914</td> </tr> </table>	Name	Top	Datum	Anhydrite	1884	+587	Heebner Shale	3745	-1274	Lansing	3781	-1310	Bkc	4089	-1618	Mississippian	4385	-1914
Name	Top	Datum																	
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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 1/4"	8 5/8	24	225	Common	150	

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 <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	
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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ALLIED CEMENTING CO., LLC. 041958

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

SERVICE POINT:
Russell Ks

DATE <u>10-6-10</u>	SEC. <u>33</u>	TWP. <u>15</u>	RANGE <u>25</u>	CALLED OUT	ON LOCATION	JOB START <u>9:30 PM</u>	JOB FINISH <u>9:30 PM</u>
LEASE <u>BASINGER #2</u>			LOCATION <u>Collyers, 2 1/2 S 1/4 E</u>		COUNTY <u>Trego</u>	STATE <u>KANSAS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR MURFIN DRILL Rig #22

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. @ 4480

CASING SIZE 8 7/8 SURE DEPTH @

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 X-H DEPTH @ 1900

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 220 SX 69/40
14 # FLO-Seal per SX
4% GEL

COMMON	<u>130</u>	@	<u>15.45</u>	<u>2008.50</u>
POZMIX	<u>90</u>	@	<u>8.00</u>	<u>720.00</u>
GEL	<u>8</u>	@	<u>20.80</u>	<u>166.40</u>
CHLORIDE		@		
ASC		@		
<u>Flo seal</u>	<u>55</u>	@	<u>2.50</u>	<u>137.50</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>220</u>	@	<u>2.40</u>	<u>528.00</u>
MILEAGE	<u>.104/SK/Mile</u>			<u>550.00</u>
TOTAL				<u>4110.40</u>

EQUIPMENT

PUMP TRUCK CEMENTER Glen

417 HELPER Heath

BULK TRUCK

386 DRIVER Jerry okly.

BULK TRUCK

_____ DRIVER _____

REMARKS:

25 SX @ 1900'

100 SX @ 875'

40 SX @ 270

10 SX @ 40'

30 SX @ Bat Hole

15 SX @ Mouse Hole

THANK'S

CHARGE TO: AINSWORTH OPERATING

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 1017.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 7.00 175

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1192.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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 KELLY WILSON

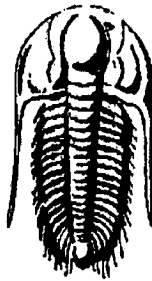
SIGNATURE Kelly Wilson

SALES TAX (If Any) _____

TOTAL CHARGES ~~_____~~

DISCOUNT ~~_____~~

IF PAID IN 30 DAYS
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KCC WICHITA



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Prepared For: **Ainsworth Operating Co.**

4676 Commercial St. SE
Salem, OR 97302

ATTN: Randy Killian

33-15s-25w Trego,KS

Basinger #2

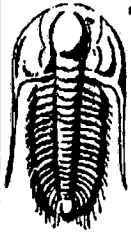
Start Date: 2010.10.06 @ 04:45:04

End Date: 2010.10.06 @ 14:04:04

Job Ticket #: 39016 DST #: 1

Trilobite Testing, Inc
PO Box 1733 Hays, KS 67601
ph: 785-625-4778 fax: 785-625-5620

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**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Ainsworth Operating Co.

Basinger #2

4676 Commercial St. SE
Salem, OR 97302

33-15s-25w Trego, KS

Job Ticket: 39016

DST#: 1

ATTN: Randy Killian

Test Start: 2010.10.06 @ 04:45:04

GENERAL INFORMATION:

Formation: **Mississippi**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 08:21:04
 Time Test Ended: 14:04:04

Test Type: Conventional Straddle
 Tester: Jason McLemore
 Unit No: 54

Interval: **4352.00 ft (KB) To 4408.00 ft (KB) (TVD)**
 Total Depth: 4485.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good

Reference Elevations: 2471.00 ft (KB)
 2461.00 ft (CF)
 KB to GR/CF: 10.00 ft

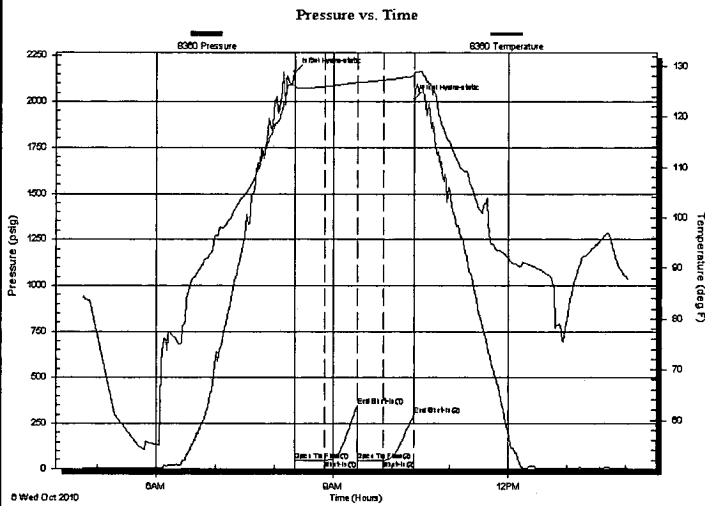
Serial #: 8360

Inside

Press@RunDepth: 49.16 psig @ 4357.00 ft (KB)
 Start Date: 2010.10.06 End Date: 2010.10.06
 Start Time: 04:45:06 End Time: 14:04:04

Capacity: 8000.00 psig
 Last Calib.: 2010.10.06
 Time On Btm: 2010.10.06 @ 08:20:19
 Time Off Btm: 2010.10.06 @ 10:23:04

TEST COMMENT: IFP-Weak blow died in 15 Min.
 ISI-Dead
 FFP-Dead
 FSI-Dead



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2162.32	126.16	Initial Hydro-static
1	47.10	125.63	Open To Flow (1)
32	48.81	126.01	Shut-In(1)
65	345.01	126.87	End Shut-In(1)
65	46.41	126.75	Open To Flow (2)
91	49.16	127.31	Shut-In(2)
123	298.70	128.03	End Shut-In(2)
123	2015.94	128.70	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
3.00	Drilling Mud	0.01

Gas Rates

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

EV-10705

APC 11 11 11



DRILL STEM TEST REPORT

TOOL DIAGRAM

Ainsworth Operating Co.

Basinger #2

4676 Commercial St. SE
Salem, OR 97302

33-15s-25w Trego, KS

Job Ticket: 39016

DST#: 1

ATTN: Randy Killian

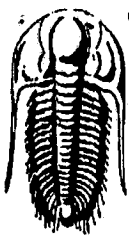
Test Start: 2010.10.06 @ 04:45:04

Tool Information

Drill Pipe:	Length: 3805.00 ft	Diameter: 3.80 inches	Volume: 53.37 bbl	Tool Weight: 2000.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 2.70 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 533.00 ft	Diameter: 2.25 inches	Volume: 2.62 bbl	Weight to Pull Loose: 105000.0 lb
			Total Volume: 55.99 bbl	Tool Chased: 0.00 ft
Drill Pipe Above KB:	14.00 ft			String Weight: Initial 98000.00 lb
Depth to Top Packer:	4352.00 ft			Final 98000.00 lb
Depth to Bottom Packer:	4398.00 ft			
Interval between Packers:	46.00 ft			
Tool Length:	150.00 ft			
Number of Packers:	3	Diameter: 6.75 inches		
Tool Comments:				

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
------------------	-------------	------------	----------	------------	----------------

Change Over Sub	1.00			4325.00	
Shut In Tool	5.00			4330.00	
Hydraulic tool	5.00			4335.00	
Jars	5.00			4340.00	
Safety Joint	2.00			4342.00	
Packer	5.00			4347.00	28.00 Bottom Of Top Packer
Packer	5.00			4352.00	
Stubb	1.00			4353.00	
Perforations	3.00			4356.00	
Change Over Sub	1.00			4357.00	
Recorder	0.00	8360	Inside	4357.00	
Recorder	0.00	6755	Outside	4357.00	
Blank Spacing	31.00			4388.00	
Change Over Sub	1.00			4389.00	
Perforations	5.00			4394.00	
Blank Off Sub	1.00			4395.00	
Blank Spacing	3.00			4398.00	46.00 Tool Interval
Packer	1.00			4399.00	
Recorder	0.00	6668	Below	4399.00	
Perforations	7.00			4406.00	
Change Over Sub	1.00			4407.00	
Blank Spacing	63.00			4470.00	
Change Over Sub	1.00			4471.00	
Bullnose	3.00			4474.00	76.00 Bottom Packers & Anchor
Total Tool Length:	150.00				



**TRILOBITE
TESTING, INC**

DRILL STEM TEST REPORT

FLUID SUMMARY

Ainsworth Operating Co.

Basinger #2

4676 Commercial St. SE
Salem, OR 97302

33-15s-25w Trego,KS

Job Ticket: 39016

DST#: 1

ATTN: Randy Killian

Test Start: 2010.10.06 @ 04:45:04

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:

ppm

Viscosity: 42.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 7.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 4200.00 ppm

Filter Cake: inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
3.00	Drilling Mud	0.015

Total Length: 3.00 ft Total Volume: 0.015 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

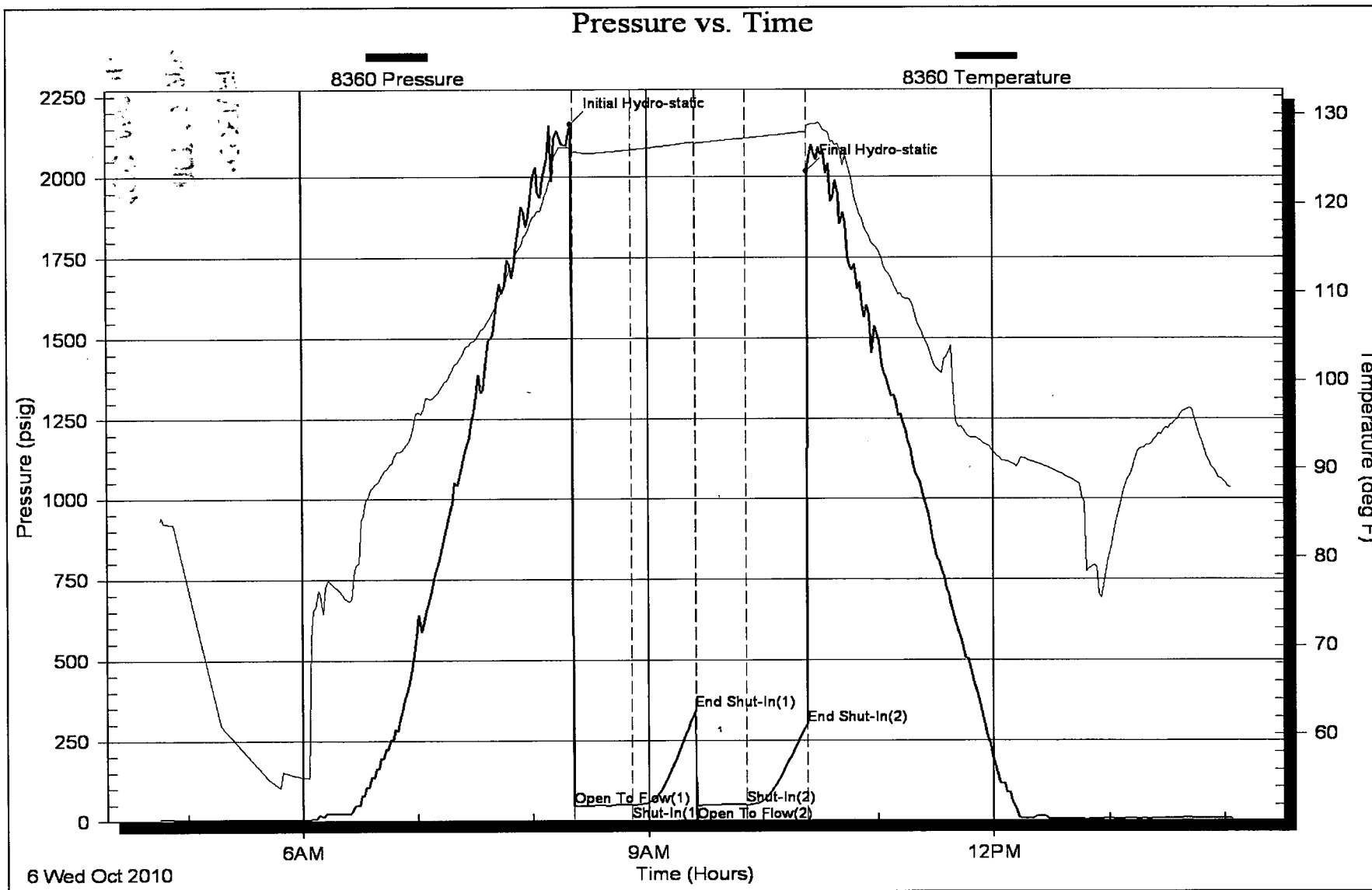
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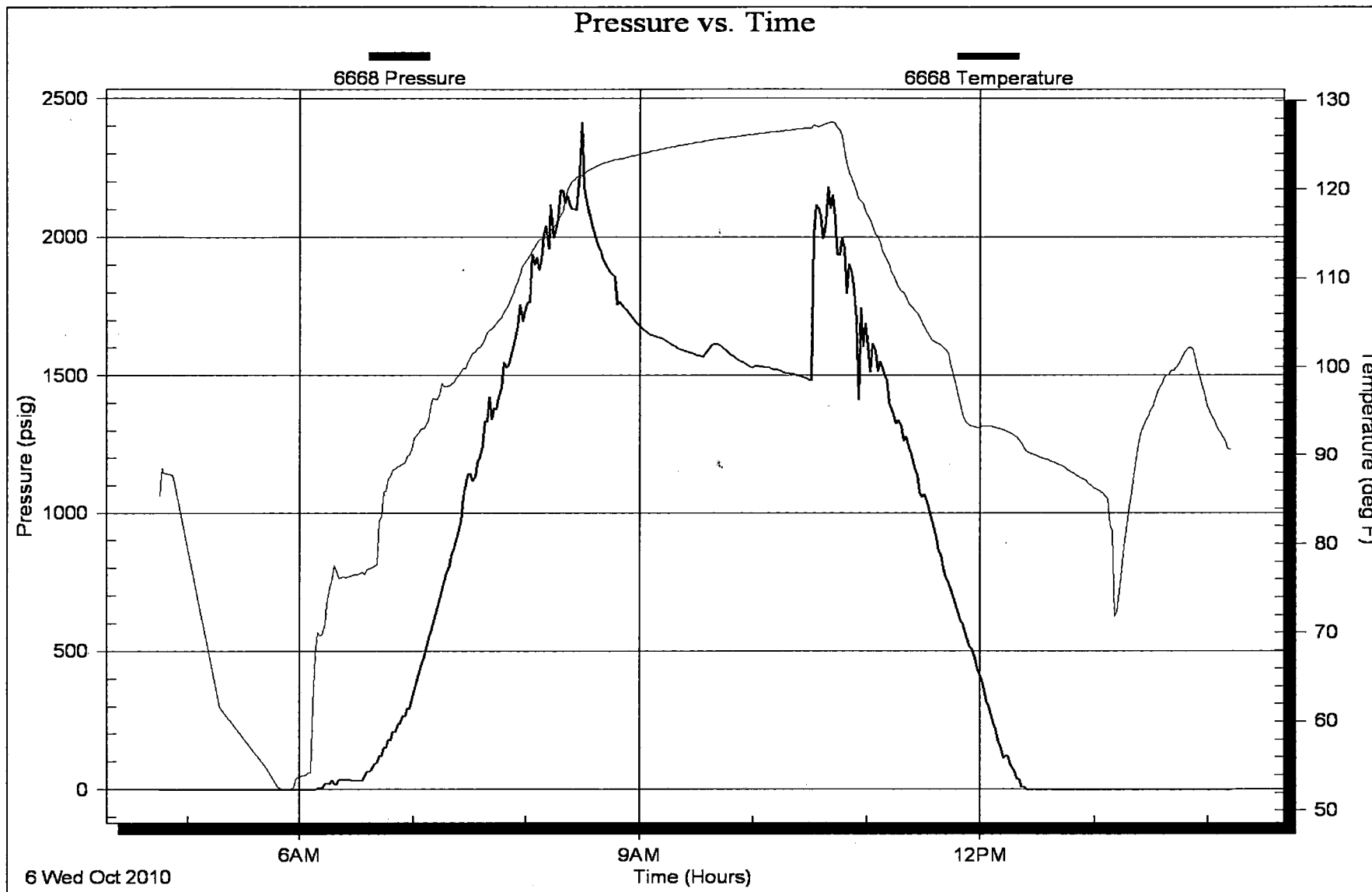
Laboratory Name:

Laboratory Location:

Recovery Comments:

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6 Wed Oct 2010

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