



KANSAS CORPORATION COMMISSION 1096224  
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 # 34365  
Name: Ventex Operating Corp.  
Address 1: 3141 HOOD ST., STE 700  
Address 2:  
City: DALLAS State: TX Zip: 75219 +  
Contact Person: Chuck Sledge  
Phone: ( 214 ) 520-2929  
CONTRACTOR: License # 33532  
Name: Advanced Drilling Technologies LLC  
Wellsite Geologist: Gary Brumley  
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:  
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 #:

4/18/2012	4/19/2012	4/19/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-127-20590-00-00  
Spot Description:  
SW SW SW Sec. 32 Twp. 16 S. R. 5  East  West  
330 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Morris  
Lease Name: Riffel Trust Well #: 1  
Field Name:  
Producing Formation: NONE  
Elevation: Ground: 1436 Kelly Bushing: 1439  
Total Depth: 260 Plug Back Total Depth:  
Amount of Surface Pipe Set and Cemented at: 260 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: 100 ppm Fluid volume: 25 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	
<input type="checkbox"/> Letter of Confidentiality Received	Date: _____
<input type="checkbox"/> Confidential Release Date: _____	
<input type="checkbox"/> Wireline Log Received	
<input type="checkbox"/> Geologist Report Received	
<input type="checkbox"/> UIC Distribution	
ALT <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III Approved by: Deanna Gamsok	Date: 11/02/2012



1096224

Operator Name: Ventex Operating Corp.

Lease Name: Riffel Trust

Well #: 1

Sec. 32 Twp. 16 S. R. 5  East  West

County: Morris

**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  Yes  No  
*(Attach Additional Sheets)*

Log Formation (Top), Depth and Datum  Sample

Samples Sent to Geological Survey  Yes  No

Name Top Datum  
NONE

Cores Taken  Yes  No

Electric Log Run  Yes  No

Electric Log Submitted Electronically  Yes  No  
*(If no, Submit Copy)*

List All E. Logs Run:

CASING RECORD  New  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	24	260	Class H	230	3% Cacl

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

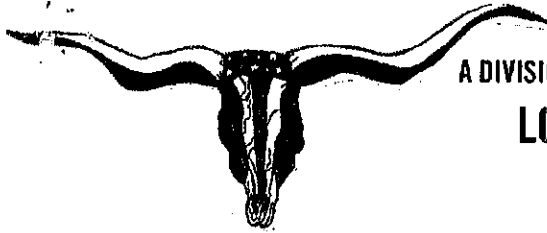
Date of First, Resumed Production, SWD or ENHR. Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS:  Vented  Sold  Used on Lease  
*(If vented, Submit ACO-18.)*

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  
*(Submit ACO-5)* *(Submit ACO-4)*  
 Other (Specify)

PRODUCTION INTERVAL:



A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

## LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80759  
Phone: 970-848-0799 Fax: 970-848-0798

**FIELD SERVICE TICKET  
AND INVOICE**

DATE 4-18-12 TICKET NO. 2275

DATE OF JOB		DISTRICT		NEW WELL <input checked="" type="checkbox"/>		OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/>		INJ <input type="checkbox"/>		WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER <u>Ventex Operating Corp</u>				LEASE <u>Riffel Trust #2</u>				WELL NO.							
ADDRESS				COUNTY				STATE							
CITY				STATE				SERVICE CREW <u>Mike E - Mark B.</u>							
AUTHORIZED BY				EQUIPMENT <u>UNIT #111</u>											
TYPE JOB: <u>TOP JOB #2</u>		DEPTH	FT.	CEMENT DATA: BULK <input type="checkbox"/>		SAND DATA: SACKS <input type="checkbox"/>		TRUCK CALLED		DATE		AM		TIME	
				SACKS	BRAND	TYPE	% GEL	ADMIXES	ARRIVED AT JOB						
SIZE HOLE: <u>12 1/4"</u>		DEPTH	FT.	<u>60</u>	<u>A</u>	<u>1-11</u>			START OPERATION						
SIZE & WT. CASTING		DEPTH	FT.						FINISH OPERATION						
SIZE & WT. D PIPE OR TUBING		DEPTH	FT.						RELEASED						
TOP PLUGS		TYPE		WEIGHT OF SLURRY: <u>14,800</u> LBS. / GAL.		LBS. / GAL.		MILES FROM STATION TO WELL							
				VOLUME OF SLURRY <u>1,325</u> CU FT											
				<u>600</u> SACKS CEMENT TREATED WITH <u>5</u> % OF Calcium											
MAX DEPTH		FT.		MAX PRESSURE		P.S.I.									

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).  
The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without written consent or an officer of Advanced Drilling Technologies, LLC.

SIGNED: \_\_\_\_\_  
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

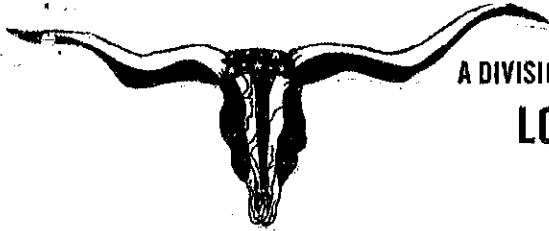
ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
001-2	<u>Depth charge - Cement - Mileage</u>				<u>1500</u> -
100-1	<u>Mileage</u>		<u>80</u>	<u>10.85</u>	<u>868</u> -
400-4	<u>Calcium chloride</u>	<u>50#</u>		<u>30</u> -	<u>30</u> -
	<u>Cement 14.1 BBL 60 SKS</u>		<u>60</u>	<u>17.50</u>	<u>1050</u> -
	<u>Invoice # 2274</u>				<u>5500</u> 00

ACID DATA:			
	GALLONS	%	ADDITIVES
HCL			
HCL			

SUB TOTAL 3448 00  
Less discount - 250 00  
Less 30% 1934 40  
**TOTAL** 4513 60

*[Signature]*

SERVICE REPRESENTATIVE *[Signature]* THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: *[Signature]*  
 FIELD SERVICE ORDER NO. \_\_\_\_\_ (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)



A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

# LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80759  
 Phone: 970-848-0799 Fax: 970-848-0798

FIELD SERVICE TICKET  
 AND INVOICE

DATE 4-17-12 TICKET NO. 2274

DATE OF JOB	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:	
CUSTOMER <u>Ventex Operating Co</u>		LEASE <u>Riffel Trust #1</u>						WELL NO.
ADDRESS		COUNTY						STATE
CITY	STATE	SERVICE CREW <u>Mike E. Marks</u>						
AUTHORIZED BY		EQUIPMENT <u>UNIT #111</u>						
TYPE JOB: <u>Surface</u>	DEPTH FT.	CEMENT DATA: BULK <input type="checkbox"/>	SAND DATA: SACKS <input type="checkbox"/>					TRUCK CALLED
		SACKS BRAND TYPE % GEL	ADMIXES					DATE AM PM
SIZE HOLE: <u>12 1/4</u>	DEPTH FT. <u>170</u>	<u>A</u> <u>1-11</u>						ARRIVED AT JOB
SIZE & WT. CASTING <u>8578</u>	DEPTH FT.							START OPERATION
SIZE & WT. D PIPE OR TUBING	DEPTH FT.							FINISH OPERATION
TOP PLUGS TYPE:	WEIGHT OF SLURRY: <u>14,860</u>	LBS. / GAL.						RELEASED
	VOLUME OF SLURRY: <u>132</u>	CUFT / SK						MILES FROM STATION TO WELL
<u>270</u>	MAX DEPTH FT.	MAX PRESSURE	PSI.					

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).  
 The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without written consent or an officer of Advanced Drilling Technologies, LLC.

SIGNED: \_\_\_\_\_  
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
001-2	Depthcharge - Cement - Mileage				1500 -
100-1	Mileage		80	10.85	868 -
400-4	Calcium chloride	100#		30 -	60 -
400-5	Cotton seed hulls	160#		30 -	96 -
	Cement 40 BBLs 170 SKS		170	17.50	2975 -
	Displaced 15.0 BBLs				

ACID DATA:			
	GALLONS	%	ADDITIVES
HCL			
HCL			

SUB TOTAL	5500 -
SERVICE & EQUIPMENT	% TAX ON \$
MATERIALS	% TAX ON \$
TOTAL	

SERVICE REPRESENTATIVE [Signature] THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY [Signature]  
 FIELD SERVICE ORDER NO. \_\_\_\_\_ (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)