



KANSAS CORPORATION COMMISSION 1095999
OIL & GAS CONSERVATION DIVISION

Form AGO-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 # 6227
Name: Kraft Oil LLC
Address 1: 434 IRIS RD SW
Address 2: _____
City: GRIDLEY State: KS Zip: 66852 + _____
Contact Person: Thomas Kraft
Phone: (620) 836-4570
CONTRACTOR: License # 33557
Name: Skyy Drilling, LLC
Wellsite Geologist: Owner
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 #: _____

<u>09/05/2012</u>	<u>09/06/2012</u>	<u>09/20/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-28279-00-00

Spot Description: _____
S2 NW NW NW Sec. 6 Twp. 24 S. R. 15 East West
600 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: Woodson

Lease Name: Vannocker Fee Well #: 7

Field Name: _____

Producing Formation: Squirrel

Elevation: Ground: 1085 Kelly Bushing: 1092

Total Depth: 1240 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 40 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: 100 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: Kraft Oil LLC

Lease Name: Weide South License #: 6227

Quarter NW Sec. 6 Twp. 24 S. R. 15 East West

County: Woodson Permit #: E-13070

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 Gerriso Date: 11/05/2012



1095999

Operator Name: Kraft Oil LLC Lease Name: Vannocker Fee Well #: 7
Sec. 6 Twp. 24 S. R. 15 [x] East [] West County: Woodson

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 [] Yes [x] No
Samples Sent to Geological Survey [x] Yes [] No
Cores Taken [] Yes [x] No
Electric Log Run [x] Yes [] No
Electric Log Submitted Electronically [x] Yes [] No
List All E. Logs Run: Cornish Wireline Services, Inc.

CASING RECORD [x] New [] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Table with columns: 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.

ADDITIONAL CEMENTING / SQUEEZE RECORD
Table with columns: Purpose, Depth Top Bottom, Type of Cement, # Sacks Used, Type and Percent Additives.

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated
Table with columns: Shots Per Foot, PERFORATION RECORD, Acid, Fracture, Shot, Cement Squeeze Record, 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
METHOD OF COMPLETION: [] Open Hole [] Perf. [] Dually Comp. [] Commingled [] Other (Specify)
PRODUCTION INTERVAL:

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT

API # 15-207-28277

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/4/12	4418	Vannacker Fee # 7	6	245	15E	Woodson
CUSTOMER Kraft Oil LLC			5474 Drly			
MAILING ADDRESS 434 Iola Rd SW			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Oridley			520	John		
STATE KS			1667	Chris B.		
ZIP CODE 66852			637	Jim		

JOB TYPE surface 0 HOLE SIZE 12 1/4" HOLE DEPTH 40' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 40' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL 9 BW WATER gal/sk 6.5 CEMENT LEFT in CASING 5'
 DISPLACEMENT 2 1/2 BW DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting - Rig up to 8 5/8" casing. Break circulation w/ 2 BW fresh water. Mixed 40 sacks class A cement w/ 3% cacl₂ + 2% gel @ 15"/gal. Displace w/ 2 1/2 BW fresh water. Shut casing in w/ good cement returns to surface. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	825.00	825.00
5406	35	MILEAGE	4.00	140.00
11045	40 SCS	class A cement	14.95	598.00
1102	116*	3% cacl ₂	.74	81.46
1188	25"	2% gel	.21	15.75
5407		tax mileage back tax	m/c	350.00
55826	3 hrs	80 BW LOC. TRK	90.00	270.00
1129	3000 gals	city water	16.50/1000	49.50
			Subtotal	2329.65
			SALES TAX 2.30%	54.30
			ESTIMATED TOTAL	2384.00

Revin 3737

AUTHORIZATION [Signature] TITLE Toolpusher DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

PO Bdx 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

CEMENT API # 15-207-28277

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-6-12	4418	Vancouver Fee #7	6	243	15E	Woodson
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Kraft Oil LLC			520	John		
MAILING ADDRESS			515	Cahn		
434 Iris Rd SW			411	Joe		
CITY	STATE	ZIP CODE	637	Jim		
Gridley	KS	66852				

JOB TYPE 4/5 6 HOLE SIZE 6 3/4" HOLE DEPTH 1247' CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 1247' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8"-13.4" SLURRY VOL 52 Bbl WATER gal/sk 8.0-9.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 20 Bbl DISPLACEMENT PSI 500 PSI 900 Pump plug RATE _____

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ 5 Bbl fresh water. Mixed 115 sacks 60/40 Perm cement w/ 8% gel + 1" phenoxal/sk @ 12.8#/gal. Tail in w/ 50 sacks thickset cement w/ 5" Katscol/sk @ 13.4#/gal. Washout pump + 1000 release plug. Displace w/ 20 Bbl fresh water. Final pump pressure 500 PSI Pump plug to 900 PSI. release pressure, float + plug held. Good cement returns to surface = 19 Bbl slurry to pit. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	1030.00	1030.00
5406	35	MILEAGE	4.00	140.00
1131	115 sacks	60/40 Perm cement	12.55	1443.25
1118B	790"	8% gel	.21	165.90
1107A	115"	1" phenoxal/sk	1.29	148.35
1126A	50 sacks	thickset cement	17.20	860.00
1110A	250"	5" Katscol/sk	.46	115.00
5407A	7.7	ton mileage bulk tax	1.34	361.44
5502C	3 1/2 hrs	80 Bbl VAC. TAX	90.00	315.00
1123	3000 gals	city water	16.50/1000	49.50
4404	1	4 1/2" top rubber plug	45.00	45.00
			Subtotal	4773.14
			SALES TAX 7.3%	213.68
			ESTIMATED TOTAL	4986.82

Revin 3737

AUTHORIZATION

Tom Kraft

TITLE

855/135

DATE

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.