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KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISIONWELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

OPERATOR: License # 4434  
 Name: Rogers & Slane Inc, LLC  
 Address 1: 30 Hillside Ranch Rd.  
 Address 2: \_\_\_\_\_  
 City: Bellevue State: ID Zip: 83313  
 Contact Person: Dean R. Rogers, Jr.  
 Phone: (208) 788-2841, 208-720-6239 (cell)

CONTRACTOR: License # 4434  
 Name: Rogers & Slane Inc, LLC  
 Wellsite Geologist: self  
 Purchaser: Rogers & Slane Inc, LLC  
 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: Rogers & Slane Inc, LLC  
 Well Name: Paul Tholen #11  
 Original Comp. Date: 10-01-09 Original Total Depth: 4556

- ☒ 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 #: \_\_\_\_\_

Aug 20, 2012 Aug 22, 2012 Oct 20, 2012  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

Dry hole drilled to 6500' had to change rigs - too small

API No. 15 - 001-28921-00-02  
 Spot Description: \_\_\_\_\_  
 SE - NW - SW Sec. 34 Twp. 23 S. R. 21 ☐ East ☐ West  
1693 Feet from ☐ North / ☒ South Line of Section  
975 Feet from ☐ East / ☒ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☐ SW

County: Allen  
 Lease Name: Paul Tholen Well #: 11  
 Field Name: Paul Tholen  
 Producing Formation: none

Elevation: Ground: NA Kelly Bushing: \_\_\_\_\_  
 Total Depth: 6500 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at: 265 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: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
 Dewatering method used: \_\_\_\_\_

Location of fluid disposal if hauled offsite:

Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West  
 County: \_\_\_\_\_ Permit #: \_\_\_\_\_

Dry hole drilled to 6500'. Had to change rigs - too small.

**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: Dean Rogers Jr  
 Title: Owner Date: 10-31-12

## 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: DG Date: 11/16/12

Operator Name: Rogers & Slane Inc, LLC Lease Name: Paul Tholen Well #: 11  
 Sec. 34 Twp. 23 S. R. 21 ☐ East ☐ West County: Allen

**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 <i>(Attach Additional Sheets)</i> <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> Samples Sent to Geological Survey <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> Cores Taken <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> Electric Log Run <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> Electric Log Submitted Electronically <div style="text-align: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <i>(If no, Submit Copy)</i>  List All E. Logs Run:	<div style="text-align: right;"><input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample</div> Formation (Top), Depth and Datum Hard rock top to bottom Name Rogers & Slane Inc, LLC 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
drill	77/8"	8	NA	265	Portland	None	None

ADDITIONAL CEMENTING / SQUEEZE RECORD <span style="float: right;">None</span>				
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 (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: <u>NA</u>		Set At: <u> </u>	Packer At: <u> </u>	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u> </u>		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u> </u>		
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) <u> </u>	PRODUCTION INTERVAL: <u> </u> <u> </u>
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