



KANSAS CORPORATION COMMISSION 1096253
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 # 8247
Name: Hembree, Robert F
Address 1: PO BOX 542
Address 2: _____
City: NESS CITY State: KS Zip: 67560 + 0542
Contact Person: Fred J. Hembree
Phone: (620) 802-7960
CONTRACTOR: License # 5123
Name: Pickrell Drilling Company, Inc.
Wellsite Geologist: Jim Musgrove
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 #: _____
09/11/2012 09/20/2012 09/20/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-135-25463-00-00
Spot Description: _____
NW NW SE NE Sec. 25 Twp. 18 S. R. 24 East West
1567 Feet from North / South Line of Section
1319 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ness
Lease Name: Parker Well #: 8
Field Name: _____
Producing Formation: Mississippi
Elevation: Ground: 2252 Kelly Bushing: 2255
Total Depth: 4305 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 224 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: 25000 ppm Fluid volume: 80 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Robert F. Hembree
Lease Name: Parker License #: 8247
Quarter NW Sec. 25 Twp. 18 S. R. 24 East West
County: Ness Permit #: D30634

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 Garrison Date: 11/08/2012



1096253

Operator Name: Hembree, Robert F Lease Name: Parker Well #: 8
 Sec. 25 Twp. 18 S. R. 24 East West County: Ness

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">Name Attached</td> <td style="width:33%; border: none;">Top Attached</td> <td style="width:33%; border: none;">Datum Attached</td> </tr> </table>	Name Attached	Top Attached	Datum Attached
Name Attached	Top Attached	Datum Attached		

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	12.250	8.625	20	224	Class A	150	2%gel,3%cc

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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Hembree, Robert F
Well Name	Parker 8
Doc ID	1096253

Tops

Anhydrite	1502	+753
Heebner	3634	-1379
Toronto	3651	-1396
Lansing	3675	-1420
B/KC	3967	-1712
Marmaton	4011	-1756
Pawnee	4100	-1845
Ft. Scott	4181	-1926
Cherokee	4209	-1954
Cherokee Sand	4285	-2030
Mississippi	4297	-2042
RTD	4305	-2050



INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 132703
Invoice Date: Sep 12, 2012
Page: 1

Voice: (817) 546-7282
Fax: (817) 246-9361



Bill To:
Robert F. Hembree
P O Box 542
Ness City, KS 67560

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Hem	Parker #8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Great Bend	Sep 12, 2012	10/12/12

Quantity	Item	Description	Unit Price	Amount
150.00	MAT	Class A Common	17.90	2,685.00
3.00	MAT	Gel	23.40	70.20
5.00	MAT	Chloride	64.00	320.00
162.09	SER	Cubic Feet	2.48	401.98
76.92	SER	Ton Mileage	2.60	200.00
1.00	SER	Surface	1,512.25	1,512.25
3.00	SER	Pump Truck Mileage	7.70	23.10
3.00	SER	Light Vehicle Mileage	4.40	13.20
1.00	CEMENTER	Charles Elkins		
1.00	EQUIP OPER	Joshua Isaac		
1.00	OPER ASSIST	Alan Genereux		

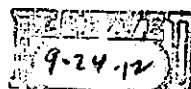
Subtotal	5,225.73
Sales Tax	193.74
Total Invoice Amount	5,419.47
Payment/Credit Applied	
TOTAL	5,419.47

ALL PRICES ARE NET. PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$1306.43

ONLY IF PAID ON OR BEFORE
Oct 7, 2012

Discount - **< 1306.43 >**
4,113.04



ALLIED OIL & GAS SERVICES, LLC

REMIT TO: P.O. BOX 93099
SOUTH LAKES TEXAS 76092

SERVICE POINT:
Edgett Bend

DATE <u>7/11/11</u>	SEC <u>25</u>	TWP <u>15S</u>	RANGE <u>20W</u>	CALLED OUT <u>12:30 PM</u>	ON LOCATION <u>7:30 AM</u>	JOB START <u>8:00 AM</u>	JOB FINISH <u>8:30 AM</u>
LEASE <u>P. H. R.</u>	WELL # <u>8</u>	LOCATION <u>WESS C. to 195W to 293 N</u>			COUNTY <u>DASS</u>	STATE <u>KS</u>	
WELL OR SURFACE (circle one)				Have West 21 Sec, 8th Twp. to post sign sign top of 1st sec. 12' high cost 16.00 + tax 1.00			

CONTRACTOR Pickwell 10 OWNER Hembree O.I.

TYPE OF JOB Surface Casing

HOLE SIZE 12 1/8" TIP 22 FT

CASING SIZE 9 5/8" 24" DEPTH 224.84 FT

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 85 PSI MINIMUM 50

MEAS. LINE _____ SHOE JOINT 20 FT

CEMENT LEFT IN CSG 20 FT

PERFS _____

DISPLACEMENT 13 505 fresh water

CEMENT AMOUNT ORDERED 191 51 Class "A" + 34 Cull + 28 6-1

COMMON	<u>150</u>	@ <u>17.90</u>	<u>2,685.00</u>
POW MIX		@	
GEL	<u>3</u>	@ <u>23.70</u>	<u>70.20</u>
CHI ORTUE	<u>5</u>	@ <u>64.00</u>	<u>320.00</u>
ASC		@	

EQUIPMENT

PUMP TRUCK # 398 CEMENTER Charles Atkins
HELPER Josh Egan

BULK TRUCK # 549/198 DRIVER Man Hembree

BULK TRUCK # _____ DRIVER _____

HANDLING 163.09 @ 2.48 401.98

MILEAGE 2.4 X 3 X @ 2.60 572.80

TOTAL 3,679.18

REMARKS:

Pump 6 1/2 hrs fresh water

Pump 2 1/2 hrs cement

Pump 1 1/2 hrs fresh water

SERVICE

DEPTH OF JOB 224

PUMP TRUCK CHARGE 1,512.75

EXTRA FOOTAGE @

MILEAGE HUM 3 @ 7.70 23.10

MANIFOLD HUM 3 @ 4.70 13.20

TOTAL 1,548.55

CHARGE TO: Hembree O.I.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	
_____	@	
_____	@	
_____	@	
_____	@	

TOTAL _____

To: Allied Oil & Gas Services, L.L.C.
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 Mike Kern

SIGNATURE Mike Kern

SALES TAX (if any) 17.77

TOTAL CHARGES 5,225.73

DISCOUNT 25% @ 1306.43 IF PAID IN 30 DAYS

3,919.30



INVOICE

PO Box 93999
Southlake, TX 76092

Invoice Number: 132810
Invoice Date: Sep 20, 2012
Page: 1

Voice: (817) 546-7282
Fax: (817) 246-3361



Bill To:
Robert F. Hambree
P O Box 542
Ness City, KS 67560

Customer ID	Well Name/# or Customer P.O.	Payment Terms	
Hem	Parker #8	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-03	Great Bend	Sep 20, 2012	10/20/12

Quantity	Item	Description	Unit Price	Amount
138.00	MAT	Class A Common	17.90	2,470.20
92.00	MAT	Pozmix	9.35	860.20
8.00	MAT	Gel	23.40	187.20
58.00	MAT	Flo Seal	2.97	172.26
247.00	SER	Cubic Feet	2.48	612.56
1.00	SER	Ton Mileage Charge	200.00	200.00
1.00	SER	Rotary Plug	2,249.84	2,249.84
3.00	SER	Pump Truck Mileage	7.70	23.10
3.00	SER	Light Vehicle Mileage	4.40	13.20
1.00	CEMENTER	Dustin Chambers		
1.00	EQUIP OPER	Joshua Isaac		
1.00	EQUIP OPER	John Campbell		

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$2036.56

ONLY IF PAID ON OR BEFORE
Oct 15, 2012



Subtotal	6,788.56
Sales Tax	427.68
Total Invoice Amount	7,216.24
Payment/Credit Applied	
TOTAL	7,216.24

~~2036.56~~
5,179.68

ALLIED OIL & GAS SERVICES, LLC

REMIT TO P.O. BOX 11
 RUSSELL, KANSAS 66668

SERVICE POINT:
Wichita Falls

DATE <u>9-20-12</u>	SEC <u>25</u>	TWP <u>18S</u>	RANGE <u>2W</u>	CALLED OUT	CONTRACTOR	JOB START <u>7:33</u>	JOB FINISH <u>8:30</u>
LEASE <u>Patco</u>	WELLS <u>3</u>	LOCATION <u>Ness city ON ship flow</u>				COUNTY <u>Woods</u>	STATE <u>KS</u>
OLD OR NEW (circle one)							

CONTRACTOR <u>Buckcell Drilling # 10</u>
TYPE OF JOB <u>Rotary Plug</u>
HOLESIZE <u>12 1/2</u> T.D.
CASING SIZE <u>5 7/8</u> DEPTH
TUBING SIZE DEPTH
DRILL PIPE <u>5 7/8</u> DEPTH <u>15 30</u>
TOOL DEPTH
PRES. MAX. MINIMUM
MEAS. LINE SHOE JOINT
CEMENT LEFT IN CSC. <u>All</u>
PERFS.
DISPLACEMENT <u>Proslurry</u>
EQUIPMENT

OWNER _____

CEMENT AMOUNT ORDERED	<u>230 SKS 60 2 class A</u>
<u>4071 pa2 412 gal 42 P30</u>	

COMMON	<u>138</u>	@ <u>17.90</u>	<u>2,470.20</u>
PUZMIX	<u>92</u>	@ <u>9.35</u>	<u>860.20</u>
GEL	<u>8</u>	@ <u>23.40</u>	<u>187.20</u>
CHLORIDE		@	
ASC		@	
<u>Flow Seal 58</u>		@ <u>2.97</u>	<u>172.26</u>
		@	
		@	
		@	
		@	
		@	
		@	
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		@	
		@	
		@	
		@	

HANDLING <u>247</u>	@ <u>2.48</u>	<u>612.26</u>
MILEAGE <u>10.82 x 3</u>	@ <u>2.60</u>	<u>86.46</u>
		<u>200.00</u>
		<u>TOTAL 4,552.42</u>

PUMP TRUCK CEMENTER <u>W.D. Curtis</u>
<u>393</u> HELPER <u>J. Wash</u>
BULK TRUCK # <u>549175</u> DRIVER <u>J. John Campbell</u>
BULK TRUCK # DRIVER

REMARKS:

- Fill Hole with Pro mud
- 1. 1930 - 50.50'S
- 2. 513 - 50.50'S
- 3. 232 - 60.4'S
- 4. 60 - 70.4'S
- RIH 32.2'S
- plug 12min 15-15
- plug 12min

CHARGE TO: Robert F Hebron
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE:

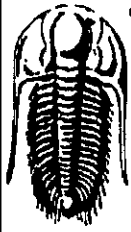
DEPTH OF JOB	<u>1530</u>	
PUMP TRUCK CHARGE	<u>2299.82</u>	
EXTRA FOOTAGE	@	
MILEAGE	<u>3</u>	@ <u>7.70</u> <u>23.10</u>
MANIFOLD	@	
	<u>3</u>	@ <u>4.40</u> <u>13.20</u>
	@	
	@	
		<u>TOTAL 2,286.14</u>

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
		<u>TOTAL _____</u>
SALES TAX (if Any)	<u>1.95</u>	
TOTAL CHARGES	<u>6,788.58</u>	
DISCOUNT <u>30%</u>	<u>2,036.58</u>	IF PAID IN 30 DAYS
		<u>4,751.99</u>

To: Allied Oil & Gas Services, 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 x Mike Kern
 SIGNATURE x Mike Kern
Thank You!!



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Hembree Robert F
 P.O. Box 542
 Ness City, Ks 67560
 ATTN: Jim Musgrove / Fred

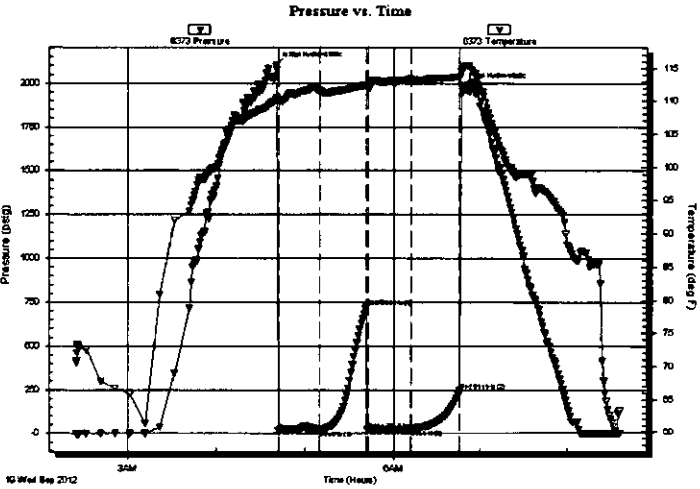
25-18-24 Ness, Ks
Parker #8
 Job Ticket: 48424 **DST#: 1**
 Test Start: 2012.09.19 @ 02:24:40

GENERAL INFORMATION:

Formation: **Ft. Scott**
 Deviated: **No** Whipstock: ft (KB)
 Time Tool Opened: 04:42:10
 Time Test Ended: 08:36:40
 Interval: **4166.00 ft (KB) To 4210.00 ft (KB) (TVD)**
 Total Depth: **4210.00 ft (KB) (TVD)**
 Hole Diameter: **7.88 inches** Hole Condition: **Good**
 Test Type: **Conventional Bottom Hole (Initial)**
 Tester: **Brandon Turley**
 Unit No: **60**
 Reference Elevations: **2255.00 ft (KB)**
 2248.00 ft (CF)
 KB to GR/CF: **7.00 ft**

Serial #: 8373 **Inside**
 Press@RunDepth: **23.33 psig @ 4167.00 ft (KB)**
 Start Date: **2012.09.19** End Date: **2012.09.19**
 Start Time: **02:24:45** End Time: **08:36:39**
 Capacity: **8000.00 psig**
 Last Calib.: **2012.09.19**
 Time On Btm: **2012.09.19 @ 04:40:10**
 Time Off Btm: **2012.09.19 @ 06:47:10**

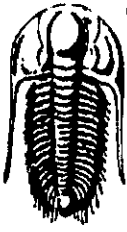
TEST COMMENT: IF: Weak blow died in 6 min.
 IS: No return.
 FF: No blow . Flushed tool w eak blow died in 1 min.
 FS: No return.



PRESSURE SUMMARY			
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2103.58	110.31	Initial Hydro-static
2	15.52	110.04	Open To Flow (1)
30	19.28	111.56	Shut-In(1)
61	721.29	112.36	End Shut-In(1)
62	19.83	112.03	Open To Flow (2)
92	23.33	113.29	Shut-In(2)
126	244.21	113.68	End Shut-In(2)
127	1984.73	114.51	Final Hydro-static

Recovery		
Length (ft)	Description	Volume (bbl)
15.00	mud 100%m	0.21

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



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Hembree Robert F

25-18-24 Ness, Ks

P.O. Box 542
Ness City, Ks 67560

Parker #8

Job Ticket: 48424

DST#: 1

ATTN: Jim Musgrove / Fred

Test Start: 2012.09.19 @ 02:24:40

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

0 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

0 ppm

Viscosity: 45.00 sec/qt

Cushion Volume:

bbl

Water Loss: 11.19 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 8400.00 ppm

Filter Cake: 1.00 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
15.00	mud 100%m	0.210

Total Length: 15.00 ft

Total Volume: 0.210 bbl

Num Fluid Samples: 0

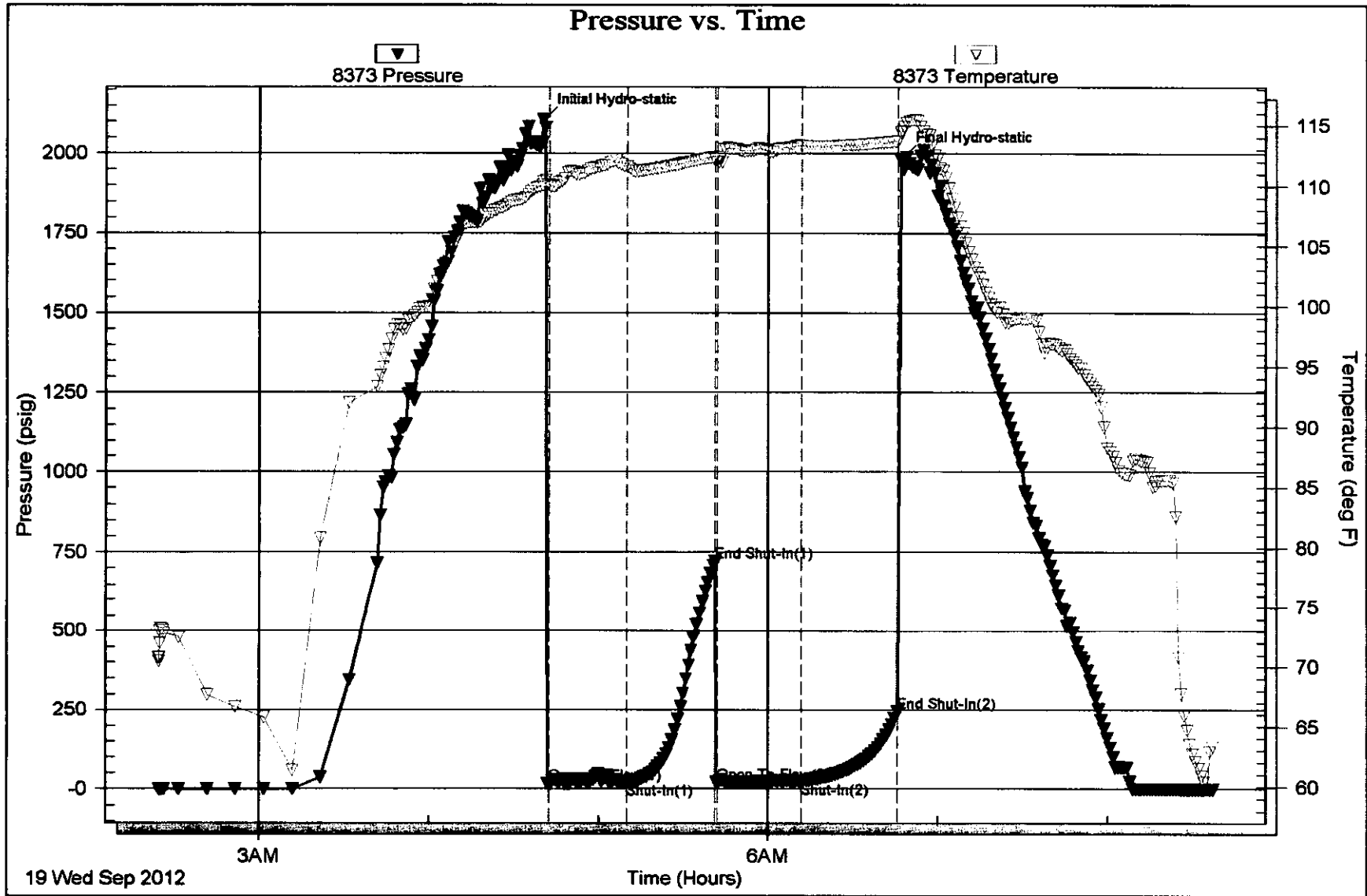
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments:



GEOLOGIST'S REPORT		SECTION OF THE AIR FORCE USE	
NAME: Kurt E. Hubert	UNIT: 2857	DATE: 3/1/54	TIME: 10:30 AM
POST: 35	PLANT: 18'	HEIGHT: 34'	ANGLE: 34°
LOCATION: Sierra Nevada, California			
PURPOSE: Geological Survey			
REMARKS: See sketch on page 2			
CORRECTIONS: None			
SCALE: 1" = 100'			
PROJECT: KYP			
CHECKED BY: KYP			
APPROVED BY: [Signature]			

Scale: 1" = 100'

