



KANSAS CORPORATION COMMISSION 1102500
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 # 30076
Name: Anderson, Andy dba A & A Production
Address 1: PO BOX 100
Address 2: _____
City: HILL CITY State: KS Zip: 67642 + 0100
Contact Person: ANDY ANDERSON
Phone: (785) 567-8066
CONTRACTOR: License # 34748
Name: M & T Drilling, LLC
Wellsite Geologist: DWANE ANDERSON
Purchaser: N/A

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 #: _____

| | | |
|-----------------------------------|-------------------|---|
| <u>08/22/2012</u> | <u>08/30/2012</u> | <u>08/30/2012</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-179-21314-00-00

Spot Description: _____

NE NE SE SW Sec. 11 Twp. 6 S. R. 26 East West
1295 Feet from North / South Line of Section
2405 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Sheridan

Lease Name: Wagoner Well #: 1

Field Name: UNNAMED

Producing Formation: KANSAS CITY

Elevation: Ground: 2565 Kelly Bushing: 2585

Total Depth: 3890 Plug Back Total Depth: 3890

Amount of Surface Pipe Set and Cemented at: 324 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/ 205 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 0 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

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Deanna Garbar Date: 11/28/2012



1102500

Operator Name: Anderson, Andy dba A & A Production Lease Name: Wagoner Well #: 1
 Sec. 11 Twp. 6 S. R. 26 East West County: Sheridan

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 type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: DUAL INDUCTION; DUAL COMPENSATED POROSITY MICRORESISTIEY; COMPUTER PROCESSED INTERPRATATION | <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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>TOPEKA</td> <td>3600</td> <td></td> </tr> <tr> <td>HEEBNER</td> <td>3800</td> <td></td> </tr> </table> | Name | Top | Datum | TOPEKA | 3600 | | HEEBNER | 3800 | |
| Name | Top | Datum | | | | | | | | |
| TOPEKA | 3600 | | | | | | | | | |
| HEEBNER | 3800 | | | | | | | | | |

| 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 | 12.625 | 8.875 | 20 | 324 | COMMON | 205 | 2%GEL; 3%CC |
| | | | | | | | |
| | | | | | | | |

| 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: <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: _____ _____ |
|---|---|--|

Schippers Oilfield Services LLC

Box 90D
Hill City, KS 67740

Phone # 785-675-8974 susllc@surattel.net
785-675-9938

Invoice

Date 8/23/2012
Invoice # 607

| |
|---|
| Bill To |
| APA Production PO box 100 Hill City, KS 67642 |

| |
|---------|
| Ship To |
| |

P.O. # Wagoner #1
Terms Net 30

Ship Date 8/28/2012
Due Date 9/22/2012
Other

| Item | Description | Qty | Price | Amount |
|-----------------------|----------------------|------|----------|----------|
| Cement | Common | 205 | 15.50 | 3,177.50 |
| Gr: chloride | calcium chloride | 5 | 26.00 | 130.00 |
| Handling of mater... | per sack | / | 52.00 | 364.00 |
| Mitcage and labor | | 21.3 | 2.15 | 457.95 |
| Pump truck charge | Tri-plex pump charge | 27 | 21.30 | 575.10 |
| Pump truck milcage | To and From Location | | 1,050.00 | 1,050.00 |
| Light vehicle mile... | To and From Location | 54 | 6.50 | 351.00 |
| 85/8 plug | | 51 | 2.00 | 108.00 |
| | | 1 | 79.00 | 79.00 |

Ad 9-8-12

OK 5396

TAKE 10% DISCOUNT IF PAID WITHIN 20 DAYS. DEDUCT FROM TOTAL.

Subtotal \$6,292.55
Sales Tax (8.3%) \$0.00
Total \$6,292.55
Payments/Credits \$0.00
Balance Due \$6,292.55

Schippers Oilfield Services LLC

629.24
5663.29