



KANSAS CORPORATION COMMISSION 1102969
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 # 30931
Name: Daystar Petroleum, Inc.
Address 1: 522 N. MAIN ST
Address 2: PO BOX 560
City: EUREKA State: KS Zip: 67045 + 0560
Contact Person: Matthew Osborn
Phone: (620) 583-5527
CONTRACTOR: License # 33793
Name: H2 Drilling LLC
Wellsite Geologist: BRAD RINE
Purchaser: NCRA

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: DAYSTAR PETROLEUM INC
Well Name: BRYAM 1-15
Original Comp. Date: 10/10/2011 Original Total Depth: 6700
 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 #: _____

08/27/2012 08/30/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-033-21593-00-01
Spot Description: _____
NE_SW_SW_NE Sec. 5 Twp. 33 S. R. 20 East West
2275 Feet from North / South Line of Section
2285 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Comanche
Lease Name: BYRAM Well #: 1-5
Field Name: OVEROCKER
Producing Formation: LANSING/KANSAS CITY
Elevation: Ground: 1894 Kelly Bushing: 1896
Total Depth: 6700 Plug Back Total Depth: 5050
Amount of Surface Pipe Set and Cemented at: 721 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 #: _____

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 Gerritsz Date: 11/30/2012



1102969

Operator Name: Daystar Petroleum, Inc. Lease Name: BYRAM Well #: 1-5
 Sec. 5 Twp. 33 S. R. 20 East West County: Comanche

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 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 type="checkbox"/> Sample Name Attached Top Attached Datum Attached
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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
SURFACE	12.25	8.50	24	721	65/35 POZCOMMON	350	3% CC/1/4 FLOSEAL
PRODUCTION	7.75	5.50	16	5464	ASC	150	5# GILSONITE

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 (Amount and Kind of Material Used)	Depth
4	5200-03	250 GALS 15% MCA	5203
4	5121-24	250GALS 15% MCA	5124
	CAST IRON BRIDGE PLUG	1 SK CEMENT ON TOP	5050
	CAST IRON BRIDGE PLUG	1 SK CEMENT ON TOP	5160
4	4602-4608	25 15% MLA AND 1250G 15% NEIFE	4602

TUBING RECORD: Size: <u>2 3/8"</u> Set At: <u>5291</u> Packer At: <u>N/A</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>08/30/2012</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____	
Estimated Production Per 24 Hours	Oil Bbls. <u>20</u>	Gas Mcf <u>0</u> Water Bbls. <u>15</u> Gas-Oil Ratio <u> </u> Gravity <u>35</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>4602-4608</u>
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Form	ACO1 - Well Completion
Operator	Daystar Petroleum, Inc.
Well Name	BYRAM 1-5
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Tops

HEEBNER SH	4182	-2296
TORONTO	4203	-2307
DOUGLAS SH	4284	-2388
BROWN LIME	4371	-2475
LANSING	4379	-2483
LANSING "B"	4422	-2526
LANSING "H"	4602	-2706
STARK SH	4751	-2855
SWOPE	4759	-2863
LKC "K"	4770	-2874
HUSHPUCKNEY SH	4789	-2893
LKC "L"	4802	-2906
B/KANSAS CITY	4839	-2943
MARMATON	4888	-2992
PAWNEE	4973	-3077
FORT SCOTT	5010	-3114
CHEROKEE SH	5023	-3127
B/INOLA-MORROW SH	5124	-3228
MISSISSIPPI (ST LOUIS)	5143	-3247
ORIGINAL TOATAL DEPTH	5266	-3370
KINDERHOOK	6274	-4378
VIOLA	6292	-4396
SIMPSON	6520	-4624
ARBUCKLE	6650	-4754

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Tops

[REDACTED]		
FINAL TOTAL DEPTH	6701	-4805