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KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL 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

ORIGINAL

OPERATOR: License # 34559
Name: WM KS Energy Resources, LLC
Address 1: P.O. Box H
Address 2: _____
City: Plainville State: KS Zip: 67663
Contact Person: Bill Robinson
Phone: (785) 688-4040
CONTRACTOR: License # 32128
Name: Western Well Service
Wellsite Geologist: Bill Robinson
Purchaser: NA

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: Great Eastern Energy & Development Corp.

Well Name: Bethel #1

Original Comp. Date: 6-6-05 Original Total Depth: 3558

- 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 #: D-31399
 ENHR Permit #: _____
 GSW Permit #: _____

11-5-12	11-15-12	11-16-12
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23061-00-01

Spot Description: _____

SW NE NE
Sec. 1 Twp. 8 S. R. 21 East West
2,146 2177 Feet from North / South Line of Section
1,400 1299 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Graham

Lease Name: Bethel Well #: 1

Field Name: na

Producing Formation: na

Elevation: Ground: 1986 Kelly Bushing: 1996

Total Depth: 1502 Plug Back Total Depth: 1502

Amount of Surface Pipe Set and Cemented at: 212 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1548 Feet

If Alternate II completion, cement circulated from: 1548

feet depth to: surface w/ 350 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: WM KS Energy Resources, LLC

Lease Name: Copeland License #: 34559

Quarter SW Sec. 19 Twp. 9 S. R. 20 East West

County: Rooks Permit #: D-27,993

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: B. W. D.

Title: agent Date: 11-20-12

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: 11/29/12

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Side Two

Operator Name: WM KS Energy Resources, LLC Lease Name: Bethel Well #: 1
 Sec. 1 Twp. 8 S. R. 21 East West County: Graham **KCC WICHITA**

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>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anyhydrite	1580 416
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E. Logs Run:	none logs on file from previous operator		

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
conductor	15	13 3/8	48	85	common	100	3% CC+ 2% gel
surface	12 1/4	8 5/8	23	212	common	165	3% CC+ 2% gel
production	7 7/8	4 1/2	10.5	3556	ASC	250	2%gel + 500 gals WFR 2

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
4	1250-1300	none	na

TUBING RECORD:	Size: <u>2 3/8</u>	Set At: <u>1200</u>	Packer At: <u>1195</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>WO KCC approval 11-20-12</u>	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>swd</u>			
Estimated Production Per 24 Hours	Oil Bbls. <u>na</u>	Gas Mcf <u>na</u>	Water Bbls. <u>na</u>	Gas-Oil Ratio <u>na</u>
				Gravity <u>na</u>

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 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>1250-1300</u>
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Mall to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

~~CONFIDENTIAL~~

ALLIED CEMENTING CO., INC. 19592

ORIGINAL

ATTN: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
OARLEY

DATE <u>5-13-05</u>	SEC. <u>1</u>	TWP. <u>25</u>	RANGE <u>21W</u>	CALLED OUT	CIN LOCATION <u>9:00 AM</u>	JOB START <u>11:55 PM</u>	JOB FINISH <u>11:55 PM</u>
LEASE <u>BETHEL</u>	WELL # <u>1</u>	LOCATION <u>NICODIMUS 1E-45-W 30</u>			COUNTY <u>GRAHAM</u>	STATE <u>KAN</u>	

CONTRACTOR Southward Drilling #1 OWNER SAME

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" TD 230'

CASING SIZE 8 5/8" DEPTH 225'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SNOP JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 1334 BBL.

AMOUNT ORDERED 165 SKS COM 3200 22661

COMMON	<u>165 SKS</u>	@	<u>9.70</u>	<u>1455.50</u>
POZMTX		@		
GEL	<u>3 SKS</u>	@	<u>14.00</u>	<u>42.00</u>
CHLORIDE	<u>2 SKS</u>	@	<u>37.00</u>	<u>74.00</u>
ASC		@		
HANDLING	<u>174 SKS</u>	@	<u>1.60</u>	<u>278.40</u>
MILEAGE	<u>60 PER SKL MILE</u>			<u>672.00</u>
TOTAL				<u>2662.90</u>

EQUIPMENT

PUMP TRUCK	CEMENTER	<u>TERRY</u>
# <u>177</u>	HELPER	<u>FREZZY</u>
BULK TRUCK		
# <u>218</u>	DRIVER	<u>LOWMEY</u>
BULK TRUCK		
# _____	DRIVER	

REMARKS:

CEMENT OED CERI.

THANK YOU

CHARGE TO: GREAT EASTERN

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Daryl Krier

SERVICE

DEPTH OF JOB	<u>225'</u>		
PUMP TRUCK CHARGE			<u>170.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>65 MZ</u>	@	<u>5.00</u>
MANIFOLD		@	
TOTAL <u>995.00</u>			

PLUG & FLOAT EQUIPMENT

<u>3 7/8 SURFACE PLUG</u>	@	<u>55.00</u>
TOTAL <u>55.00</u>		

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAY:

PRINTED NAME: DARYL KRIER

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