



KANSAS CORPORATION COMMISSION 1048403
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 # 31980
Name: Lotus Operating Company, L.L.C.
Address 1: 100 S MAIN STE 420
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 3737
Contact Person: Tim Hellman
Phone: (316) 262-1077
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Tim Hellman
Purchaser: High Sierra & ONEOK

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 #: _____
9/3/2010 9/10/2010 09/27/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-007-23588-00-00

Spot Description: _____
NW NE NW SE Sec. 36 Twp. 34 S. R. 12 East West
2940 Feet from North / South Line of Section
1895 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Barber
Lease Name: Wetz B Well #: 4
Field Name: Stranathan

Producing Formation: Mississippi
Elevation: Ground: 1356 Kelly Bushing: 1364
Total Depth: 5219 Plug Back Total Depth: 4970
Amount of Surface Pipe Set and Cemented at: 260 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: 22000 ppm Fluid volume: 80 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite: _____
Operator Name: Lotus Operating Company, LLC
Lease Name: CR Wetz SWDW License #: 31980
Quarter NE Sec. 1 Twp. 35 S. R. 12 East West
County: Barber Permit #: 15-007-20734-00-01

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: 12/27/2010
 Confidential Release Date: 12/26/2012
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 12/27/2010



1048403

Operator Name: Lotus Operating Company, L.L.C. Lease Name: Wetz B Well #: 4

Sec. 36 Twp. 34 S. R. 12 East West County: Barber

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i></p> <p>List All E. Logs Run: Attached</p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>3749</td> <td>-2385</td> </tr> <tr> <td>KC</td> <td>4277</td> <td>-2913</td> </tr> <tr> <td>BKC</td> <td>4507</td> <td>-3143</td> </tr> <tr> <td>Miss</td> <td>4696</td> <td>-3332</td> </tr> <tr> <td>Viola</td> <td>5099</td> <td>-3537</td> </tr> <tr> <td>Simp Dolo</td> <td>5185</td> <td>-3821</td> </tr> <tr> <td>LTD</td> <td>5219</td> <td>-3855</td> </tr> </tbody> </table>	Name	Top	Datum	Heebner	3749	-2385	KC	4277	-2913	BKC	4507	-3143	Miss	4696	-3332	Viola	5099	-3537	Simp Dolo	5185	-3821	LTD	5219	-3855
Name	Top	Datum																							
Heebner	3749	-2385																							
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Miss	4696	-3332																							
Viola	5099	-3537																							
Simp Dolo	5185	-3821																							
LTD	5219	-3855																							

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	14.75	10.75	28	260	60/40 poz mix	225	2% gel, 3% cc
Production	7.88	5.5	14	5016	Class A ACS	200	latex

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
1	4702-49	Acid 4950 gal, 10% NEFE, frac w/ 301,000# sd & 15,753 bbls slick water	4702-49

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>4822</u> Packer At: <u>none</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR: <u>10/12/2010</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>120</u> Gas Mcf <u>210</u> Water Bbls. <u>150</u> Gas-Oil Ratio _____ Gravity <u>21</u>

<p>DISPOSITION OF GAS:</p> <p><input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i></p>	<p>METHOD OF COMPLETION:</p> <p><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i></p> <p><input type="checkbox"/> Other (Specify) _____</p>	<p>PRODUCTION INTERVAL:</p> <p><u>4702-49</u></p>
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Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Wetz B 4
Doc ID	1048403

All Electric Logs Run

Dual Induction
Neutron Density w/PE
Micro
Sonic



PO BOX 31 Russell, KS 67665

RECEIVED

SEP 23 2010

INVOICE

Invoice Number: 124521

Invoice Date: Sep 13, 2010

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:

Lotus Operating Co., LLC
Lotus Exploration Co.
100 S. Main, STE 420
Wichita, KS 67202

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Wetz B #4	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Sep 13, 2010	10/13/10

Quantity	Item	Description	Unit Price	Amount
135.00	MAT	Class A Common	15.45	2,085.75
90.00	MAT	Pozmix	8.00	720.00
6.00	MAT	Gel	20.80	124.80
11.00	MAT	Chloride	58.20	640.20
242.00	SER	Handling	2.40	580.80
15.00	SER	Mileage 242 sx @ .10 per sk per mi	24.20	363.00
1.00	SER	Surface	1,018.00	1,018.00
15.00	SER	Pump Truck Mileage	7.00	105.00

ENTERED
SEP 24 2010

GL# 9208
DESC. Cement 10 3/4"
Surface casing
w/ 250 sx #4B

HOLE SIZE 14 3/4 T.D. 265
 CASING SIZE 10 3/4 DEPTH 204
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 20'
 PERFS. _____
 DISPLACEMENT 24 bbls of fresh water

EQUIPMENT

PUMP TRUCK CEMENTER Derin F
 # 360-265 HELPER Matt T.
 BULK TRUCK
 # 364 DRIVER Jason T.
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Pipe on bottom & break circulate on
Pump 3 bbls ahead, mix 225 sq of
Cement, Displace 24 bbls of fresh
water, Shut in, Cement to
circulate

CHARGE TO: Lexus Operations
 STREET _____
 CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., 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
 SIGNATURE [Signature]
Thank You!!!

CEMENT
 AMOUNT ORDERED 225 sq 60' 40' 24' 60'
390cc

COMMON	<u>A</u>	<u>135 SY @</u>	<u>15.45</u>	<u>2085</u>	<u>7</u>
POZMIX		<u>90 SY @</u>	<u>8.00</u>	<u>720</u>	<u>0</u>
GEL		<u>6 SY @</u>	<u>20.00</u>	<u>124</u>	<u>00</u>
CHLORIDE		<u>11 SY @</u>	<u>58.20</u>	<u>640</u>	<u>20</u>
ASC		@			
		@			
		@			
		@			
		@			
		@			
		@			
		@			
		@			
HANDLING	<u>242</u>	@	<u>240</u>	<u>580</u>	<u>00</u>
MILEAGE	<u>242/15/10</u>			<u>363</u>	<u>00</u>
				<u>TOTAL</u>	<u>4514</u>

SERVICE

DEPTH OF JOB 254'
 PUMP TRUCK CHARGE 1018 00
 EXTRA FOOTAGE @ _____
 MILEAGE 15 @ 7 00 105 00
 MANIFOLD @ _____
Shut in Valve @ _____
 @ _____
 @ _____
 TOTAL 1123 00

PLUG & FLOAT EQUIPMENT

none @ _____
 @ _____
 @ _____
 @ _____
 @ _____

TOTAL _____

SALES TAX (If Any) _____
 TOTAL CHARGES [scribble]
 DISCOUNT _____ IF PAID IN 30 DAYS
[scribble]



PO BOX 31 Russell, KS 67665

RECEIVED

SEP 23 2010

INVOICE

Invoice Number: 124468

Invoice Date: Sep 13, 2010

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

BILL TO:
Lotus Operating Co., LLC Lotus Exploration Co. 100 S. Main, STE 420 Wichita, KS 67202

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Well #4 B	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Mediche Lodge	Sep 11, 2010	10/13/10

Quantity	Item	Description	Unit Price	Amount
18.00	MAT	Class A Common	15.45	278.10
12.00	MAT	Pozmix	8.00	96.00
1.00	MAT	Gel	20.80	20.80
200.00	MAT	ASC Class A	18.60	3,720.00
1,000.00	MAT	Kol Seal	0.89	890.00
94.00	MAT	FL-160	13.30	1,250.20
50.00	MAT	Flo Seal	2.50	125.00
255.00	SER	Handling	2.40	612.00
15.00	SER	Mileage 255 sx @ .10 per sk per mi	25.50	382.50
1.00	SER	Production Casing	2,092.00	2,092.00
15.00	SER	Pump Truck Mileage	7.00	105.00
1.00	EQP	5.5 Guide Shoe	100.80	100.80
1.00	EQP	AFU Insert	112.00	112.00
1.00	EQP	Basket	161.00	161.00
6.00	EQP	5.5 Centralizer	32.20	193.20

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

2027.72

ONLY IF PAID ON OR BEFORE

Oct 8, 2010

Subtotal	10,138.60
Sales Tax	507.14
Total Invoice Amount	10,645.74
Payment/Credit Applied	
TOTAL	10,645.74

2027.72
#8618.02

GL# 9308
DESC. Cement in
51. "

ENTERED

ALLIED CEMENTING CO., LLC. 037054

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge, Ks

DATE <u>9-11-10</u>	SEC <u>36</u>	TWP. <u>34s</u>	RANGE <u>12W</u>	CALLED OUT <u>5:00 pm</u>	ON LOCATION <u>7:30 pm</u>	JOB START <u>11:30 am</u>	JOB FINISH <u>12:30 pm</u>
LEASE <u>Weg 2</u>		WELL # <u>4</u>		LOCATION <u>Medicine Lodge, Ks South</u>		COUNTY <u>Baker</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>to Rethel Snake Rd, 1/4 way, S.W. 1/4</u>			

CONTRACTOR Duke #2 OWNER Lotus Operating

TYPE OF JOB Production

HOLE SIZE 7 7/8 T.D. 5216'

CASING SIZE 5 1/2 DEPTH 5016'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 40'

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 123 bbls of fresh water

CEMENT AMOUNT ORDERED 30 sz 60:40:40/60-1
200 sz Class A BSC + 5# Kalsol
.5% FL160 + 1/4 # Floseal

COMMON	<u>A 18 sz</u>	@ <u>15.45</u>	<u>278</u>	<u>10</u>
POZMIX	<u>12 sz</u>	@ <u>8.00</u>	<u>96</u>	<u>00</u>
GEL	<u>1 sz</u>	@ <u>20.00</u>	<u>20</u>	<u>00</u>
CHLORIDE		@		
ASC	<u>200 sz</u>	@ <u>18.00</u>	<u>3720</u>	<u>00</u>
	<u>Kalsol 1000</u>	@ <u>8.90</u>	<u>890</u>	<u>00</u>
	<u>FL-160 94</u>	@ <u>13.00</u>	<u>1250</u>	<u>00</u>
	<u>Floseal 50</u>	@ <u>2.50</u>	<u>125</u>	<u>00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>255</u>	@ <u>2.40</u>	<u>612</u>	<u>00</u>
MILEAGE	<u>255 / 10 / 15</u>		<u>382</u>	<u>00</u>
			TOTAL	<u>7374</u>

EQUIPMENT

PUMP TRUCK CEMENTER Derin F

471-302 HELPER Ron G.

BULK TRUCK

364 DRIVER Jason T

BULK TRUCK

_____ DRIVER _____

REMARKS:

Pipe on bottom & broke circulation
mix 30 sz of cement for R&H hole
mix 200 sz of cement, shut down
wash pump & lines, Release plug, start
displacement, lift pressure @ 85
bbls, slow rate to 3 bpm @ 110 bbls
Bump plug @ 123 bbls 1000-1300 psi
Floesal 2. hold

SERVICE

DEPTH OF JOB 5016'

PUMP TRUCK CHARGE 2092

EXTRA FOOTAGE @ _____

MILEAGE 15 @ 7 = 105

MANIFOLD @ _____

Hess tends 1 @ _____

TOTAL 2197

CHARGE TO: Lotus Operating

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>5 1/2</u>			
1- Guide Shoe	@	<u>100</u>	<u>00</u>
1- PFU Insert	@	<u>112</u>	<u>00</u>
1- Basket	@	<u>161</u>	<u>00</u>
6- Centralizers	@ <u>32</u>	<u>193</u>	<u>00</u>



*Mark Parkinson, Governor
Thomas E. Wright, Chairman
Joseph F. Harkins, Commissioner
Ward Loyd, Commissioner*

December 27, 2010

Tim Hellman
Lotus Operating Company, L.L.C.
100 S MAIN STE 420
WICHITA, KS 67202-3737

Re: ACO1
API 15-007-23588-00-00
Wetz B 4
SE/4 Sec.36-34S-12W
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Tim Hellman

CONSERVATION DIVISION

Finney State Office Building, 130 S. Market, Room 2078, Wichita, KS 67202-3802
(316) 337-6200 • Fax: (316) 337-6211 • <http://kcc.ks.gov/>