



KANSAS CORPORATION COMMISSION 1109965
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 # 34576
Name: Henderson, Chris
Address 1: PO BOX 1477
Address 2: _____
City: PAWHUSKA State: OK Zip: 74056 + _____
Contact Person: Chris Henderson
Phone: (918) 287-2300
CONTRACTOR: License # 34458
Name: Long and Ware Oil, a General Partnership
Wellsite Geologist: Chris Henderson
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 #: _____

<u>2/21/2012</u>	<u>2/22/2012</u>	<u>2/23/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-019-27151-00-00

Spot Description: _____
SE SE SE SW Sec. 1 Twp. 34 S. R. 12 East West
286 Feet from North / South Line of Section
2826 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Chautauqua

Lease Name: Rising 'A' Well #: 1 SWD

Field Name: _____

Producing Formation: Arbuckle

Elevation: Ground: 802 Kelly Bushing: 0

Total Depth: 2120 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 40

feet depth to: 0 w/ 10 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 160 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Chris Henderson

Lease Name: Rising L License #: 34576

Quarter SW Sec. 8 Twp. 34 S. R. 13 East West

County: Chautauqua Permit #: unknown

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: 01/25/2013

1109965

Operator Name: Henderson, Chris Lease Name: Rising 'A' Well #: 1 SWD
 Sec. 1 Twp. 34 S. R. 12 East West County: Chautauqua

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: Attached	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum n/a
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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	8.625	28	40	Portland	10	
Production	6.75	4.5	9.5	1820	Portland	190	

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: <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 <i>(Explain)</i> _____
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 checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: 1820 2120
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Form	ACO1 - Well Completion
Operator	Henderson, Chris
Well Name	Rising 'A' 1 SWD
Doc ID	1109965

All Electric Logs Run

Gamma Ray
Neutron
Cement Bond
Completion

A0962

1/23/12

#248005



CEMENT FIELD TICKET AND TREATMENT REPORT

Customer	Clifts Henderson	State	County	Cheateau	Kansas	Cement Type	CLASS A
Job Type	Long String	Section	1	Excess (B)	\$0	Density	13.0
Customer Acct #	3493	TWP	34S	Water Required		Yield	1.75
Well No.	Rising A #1 SWD	RGE	12E	Slurry Weight		Slurry Volume	
Mailing Address		Formation		Displacement	28.9	Displacement PSI	600
City & State		Well Size	6 3/4	MIX PSI	200	Rate	4.3
Zip Code		Well Depth	1834				
Contact		Casing Size	4 1/2				
Phone		Casing Depth	1820				
Cell		Drill Pipe					
Dispatch Location	BARTLESVILLE	Tubing					

Code	Cement Pump Charges and Mileage	Quantity	Unit	Price per Unit	
9401	CEMENT PUMP (2 HOUR MAX)	1	2 HRS MAX	\$1,030.00	\$ 1,030.00
9408	EQUIPMENT MILEAGE (ONE-WAY)	35	PER MI	\$4.00	\$ 140.00
9407	MIN. DIAM DELIVERY (WITHIN 50 MILES)	1	PER LOAD	\$350.00	\$ 350.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
9402	FOOTAGE	1,820	PER FOOT	\$0.22	\$ 400.40
EQUIPMENT TOTAL					\$ 1,970.40

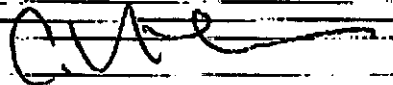
Code	Cement, Chemicals and Water	Quantity	Unit	Price per Unit	
1120A	THICK SET CEMENT (18 DWC 4% GEL 2% CAL, CLORIDE)	150	0	\$10.20	\$ 1,530.00
1107A	PHENOSEAL	80	0	\$1.29	\$ 103.20
1110A	FO. SEAL (50 # BK)	1,000	0	\$0.48	\$ 480.00
1118B	PREMIUM GELBENTONITE (50#)	150	0	\$0.21	\$ 31.50
1123	CITY WATER (PER 1000 GAL)	4	0	\$10.50	\$ 42.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
CHEMICAL TOTAL					\$ 4,312.00


Code	Water Transport	Quantity	Unit	Price per Unit	
5501C	WATER TRANSPORT (CEMENT)	4		\$112.00	\$ 448.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
TRANSPORT TOTAL					\$ 448.00

Code	Cement Floating Equipment (TAXABLE)	Quantity	Unit	Price per Unit	
0	Cement (Basket)		0	\$0.00	\$ 0.00
0	Centralizer		0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0	Flow Shoe		0	\$0.00	\$ 0.00
0	Flow Collars		0	\$0.00	\$ 0.00
0	Guide Shoe		0	\$0.00	\$ 0.00
0	Baffles and Fibber Plates		0	\$0.00	\$ 0.00
0	Packet Shoes		0	\$0.00	\$ 0.00
0	OV Tools		0	\$0.00	\$ 0.00
0	Ball Valves, Slippers, Clamps, Misc		0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0			0	\$0.00	\$ 0.00
0	Plugs and Ball Sealers		0	\$0.00	\$ 0.00
4404	4 1/2" RUNNER PLUG	1	PER UNIT	\$45.00	\$ 45.00
0	Downhole Tools		0	\$0.00	\$ 0.00
CEMENT FLOATING EQUIPMENT TOTAL					\$ 45.00

DRIVERS	DRIVER NAME
877	Kirk Sanders
398	John Ware
818	Ryan Stewart
13130	DRIVER SIGNATURE

0.30%	SUB TOTAL	\$ 6,125.70
	SALES TAX	\$ 375.40
	TOTAL	\$ 6,501.10
10%	(DISCOUNT)	\$ 700.70
	DISCOUNTED TOTAL	\$ 5,799.40

AUTHORIZATION: 
DATE: _____

TITLE: _____
SIGNATURE: 

ACCEPTED BY THE CUSTOMER, THESE TERMS, UNLESS SPECIFICALLY AMENDED BY WRITING ON THE FRONT OF THIS FORM OR IN THE CUSTOMER'S ACCOUNT AGREEMENTS, AS OUR OFFICE...