

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL RECEIVED
06/24/13
Form ACO-1
June 2009

JUN 28 2011

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE
KCC WICHITA

OPERATOR: License # 4699
Name: Phillips Oil Properties, Inc.
Address 1: 1822 S. Mead
Address 2:
City: Wichita State: KS Zip: 67211 +
Contact Person: Troy Phillips
Phone: (316) 265-7779
CONTRACTOR: License # 31539
Name: SAM'S Well Service
Wellsite Geologist: Troy Phillips
Purchaser: Plains

Designate Type of Completion:

- New Well
- Re-Entry
- Workover
- Oil
- Gas
- OG
- CM (Coal Bed Methane)
- Cathodic
- WSW
- D&A
- Other (Core, Expl., etc.):
- SWD
- ENHR
- GSW
- SIOW
- SIGW
- Temp. Abd.

If Workover/Re-entry: Old Well Info as follows:

Operator: Zenith Drilling Corp
Well Name: Miller B#3

Original Comp. Date: 01-24-1977 Original Total Depth: 3152

- 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 #:

05-9-11 Spud Date or Recompletion Date
05-19-11 Date Reached TD
05-23-11 Completion Date or Recompletion Date

API No. 15 - 035-21116-00-02

Spot Description:

SE NE NW Sec. 26 Twp. 33 S. R. 5 East West
4,290 Feet from North / South Line of Section
2,970 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE
- NW
- SE
- SW

County: Cowley

Lease Name: Miller Well #: B#3

Field Name: Albright

Producing Formation: Mississippian

Elevation: Ground: 1242 Kelly Bushing: 1247

Total Depth: 3152 Plug Back Total Depth: 3151

Amount of Surface Pipe Set and Cemented at: 209 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 #:

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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: [Signature] Title: GEOLOGIST Date: 6-24-11

KCC Office Use ONLY

- Letter of Confidentiality Received Date: 6/24/11 - 6/24/13
- Confidential Release Date:
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: [Signature] Date: 7-12-11

Operator Name: Phillips Oil Properties, Inc. Lease Name: Miller Well #: B#3
 Sec. 26 Twp. 33 S. R. 5 East West County: Cowley

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 checked="" 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 Top Datum Mississippian 3010 -1825
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CASING RECORD <input type="checkbox"/> New <input checked="" 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
Patch Production	7-7/8"	4 1/2"	9.5#	1125	60/40 poz	250	2% Calcium

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
	3078 to 3082 original perforations	250 Gal 15% mud acid	

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TUBING RECORD:	Size: <u>2 3/8"</u>	Set At: <u>3060</u>	Packer At: <u>3060</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>05-27-11</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	Water Bbls. <u>0</u>	Gas-Oil Ratio

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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3078-3082</u>
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REC'D MAY 20 2011



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 241406

Invoice Date: 05/18/2011 Terms: 0/0/30,n/30

Page 1

PHILLIP OIL PROPERTIES INC.
1822 S. MEAD
WICHITA KS 67211
() -

MILLER B3
30999
26-33-5
05-13-11
KS

MiB3

POSTED
5-23-11

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	250.00	11.9500	2987.50
1102	CALCIUM CHLORIDE (50#)	400.00	.7000	280.00
1118B	PREMIUM GEL / BENTONITE	1000.00	.2000	200.00
1110A	KOL SEAL (50# BAG)	750.00	.4400	330.00
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
446 CEMENT PUMP	1.00	975.00	975.00
446 EQUIPMENT MILEAGE (ONE WAY)	53.00	4.00	212.00
502 TON MILEAGE DELIVERY	556.50	1.26	701.19

PAID

CK. NO. 12945
DATE 5-26-11

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Parts:	3842.50	Freight:	.00	Tax:	261.29	AR	5991.98
Labor:	.00	Misc:	.00	Total:	5991.98	KCC	
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

OAKLEY, KS
785/672-2227

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLD, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 30999

LOCATION # 80 Eldorado

FOREMAN Jacob Storm

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT
CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																
5-13-11	6293	Miller B3	26	33	5	Cowley																
CUSTOMER Phillips oil properties			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>446</td> <td>Jeff</td> <td></td> <td></td> </tr> <tr> <td>502</td> <td>Jerid</td> <td></td> <td></td> </tr> <tr> <td>511</td> <td>Jacob</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	446	Jeff			502	Jerid			511	Jacob		
TRUCK #	DRIVER	TRUCK #					DRIVER															
446	Jeff																					
502	Jerid																					
511	Jacob																					
MAILING ADDRESS 1822 S Mead																						
CITY Wichita	STATE KS	ZIP CODE 67211																				

Safety meeting
J.S.
J.D.

JOB TYPE Liner B HOLE SIZE 2 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1143 DRILL PIPE _____ TUBING N/A OTHER _____
 SLURRY WEIGHT 13.5 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 40 ft
 DISPLACEMENT 16 bbl DISPLACEMENT PSI 300 MIX PSI 100 RATE 4 bpm

REMARKS: Safety meeting, brake circulation, mixed 250 sks 60/40 poz 4 1/2 gal 2 1/2 cc 3/4 Kol-seal, displaced with Rubber plug to 1103 circulating cement to surface.

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	975.00	975.00
5406	53	MILEAGE	4.00	212.00
5407A	53	ton mileage x 10.5 ton x	1.26	701.19
1131	250 sks	60/40 poz	11.95	2987.50
1102	400 lbs	calcium chloride	0.70	280.00
1118B	1000 lbs	gel	0.20	200.00
1110A	750 lbs	Kol-seal	0.44	330.00
4404	1	4 1/2 Rubber plug	45.00	45.00
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KCC				
			Subtotal	5730.69
			SALES TAX	261.29
			ESTIMATED TOTAL	5991.98

Ravin 9737

[Signature]

241406

AUTHORIZATION _____

TITLE _____

DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.