

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

* Corrected - Drilling Fluid Management Plan

Operator: License # 8061
 Name: Oil Producers Inc. of Kansas
 Address: 1710 Waterfront Parkway
 City/State/Zip: Wichita, KS 67206
 Purchaser: N/A
 Operator Contact Person: Lori Zehr
 Phone: (316) 681-0231
 Contractor Name: 5929
 License: Duke Drilling Co., Inc.
 Wellsite Geologist: Paul Gerlach
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10/08/2009	10/15/2009	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 119-21245-00-00
 County: Meade
 nw - nw - se - se Sec. 5 Twp. 35 S. R. 28 East West
 1066 feet from S / N (circle one) Line of Section
 1263 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: LeValley Well #: 1-5
 Field Name: Cimarron Bend
 Producing Formation: _____
 Elevation: Ground: 2441 Kelly Bushing: 2453
 Total Depth: 6300 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 1615 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 53760 ppm Fluid volume 480 bbls
 Dewatering method used Haul to SWD
 Location of fluid disposal if hauled offsite: _____
 Operator Name: Oil Producers, Inc. of Kansas
 Lease Name: Good B License No.: _____
 Quarter SE Sec. 19 Twp. 34 S. R. 31 East West
 County: Seward Docket No.: D-26668

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.

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: Chief Operating Officer Date: 11/25/13
 Subscribed and sworn to before me this 25 day of November, 2013
 Notary Public: [Signature]
 Date Commission Expires: May 5, 2014
 Notary Public - State of Kansas
 My Appt. Expires 5/5/14

KCC Office Use ONLY
 Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 KCC WICHITA
 Alt 1 - dlq - 12/4/13
 NOV 27 2013
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Operator Name: Oil Producers Inc. of Kansas Lease Name: LeValley Well #: 1-5
 Sec. 5 Twp. 35 S. R. 28 East West County: Meade

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 copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Log, Compensated Density/Neutron PE Log, Micro Log, Geological Report	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum Sample Name Top Datum See Note #1
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CASING RECORD							
				New	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		20"		43	ready mix	106	
Surface		8 5/8	24	1615	A-Con/Prem	500	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		Premium/Class C	150	

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth
	N/A			

TUBING RECORD		Size	Set At	Packer At	Liner Run	
N/A					Yes	No
Date of First, Resumed Production, SWD or Enhr.		Producing Method				
N/A		Flowing	Pumping	Gas Lift	Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	N/A	N/A				

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.)
 Other (Specify) _____

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