

ORIGINAL

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM**WELL HISTORY - DESCRIPTION OF WELL & LEASE**
 Form ACO-1
 September 1995
 Form Must Be Typed
Operator: License # 6471API No. 15 - 071-20846-0000Name: R. C. BANKSCounty: GreeleyAddress: P. O. Box 242C-N n W-1/4 Sec. 19 Twp. 17 S. R. 40 East WestCity/State/Zip: Midland, TX. 797021320' feet from S / N (circle one) Line of SectionPurchaser: Duke Energy1320' feet from E / W (circle one) Line of SectionOperator Contact Person: R. C. BanksPhone: (432) 682 8296Contractor: Name: Cheyenne Drilg.License: 33575Wellsite Geologist: Joe Broughe

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. _____5/20/06 5/22/06 9/28/06

Spud Date or Date Reached TD _____ Completion Date or Recompletion Date _____

Footages Calculated from Nearest Outside Section Corner:

 (circle one) NE SE NW SWLease Name: Chester Well #: 4Field Name: ByerleyProducing Formation: Winfield, Ft. RileyElevation: Ground: 3653 Kelly Bushing: 3659Total Depth: 3030 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at 273 FeetMultiple 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 100100 ppm Fluid volume 300 bblsDewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

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: R. C. Banks
 Title: Operator Date: 10-2-06
 Subscribed and sworn to before me this 20 day of Oct, 2006
 Notary Public
 STATE OF TEXAS
 My Comm. Exp. 09/02/2009

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: R. C. BANKS Lease Name: Chester Well #: 4
 Sec. 19 Twp. 17 S. R. 40 East West County: Greeley

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 (Attach Additional Sheets)	<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	Winfield	2879 757
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lower Winfield	2918 735
		Ft. Riley	2978 675
List All E. Logs Run:			
Dual Compensated Porosity			
Dual Induction			
Bond Log			

CASING RECORD <input 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 1/4	8 5/8	23	273	Common	175	3% gel
Production	7 7/8	4 1/2	10.5	3034	Lite	500	1/2 flow seal
					Class C	100	

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 checked="" type="checkbox"/> Plug Off Zone	1500	Lite & Common	300	1/4# flow seal & 3% cc			
	1200	Lite & Common	300/50	1/4# flow seal & 3% cc			
	Backside	Common	125	300# hulls & 4% gel			

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	2920-37, 2941-66, 2982-94	15% HCL & 100 gal. 15% plus 75 balls	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	2 3/8	2935				
Date of First, Resumed Production, SWD or Enhr. 9/28/06		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		5	90		

Disposition of Gas METHOD OF COMPLETION Production Interval

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