

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5042
Name: Edmiston Oil Company, Inc.
Address: 125 N. Market - Suite 1130
City/State/Zip: Wichita, Kansas 67202
Purchaser: _____
Operator Contact Person: John M. Callen
Phone: (316) 265-5241
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Max Lovley

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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 SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

05-06-03 05-12-03 6/13/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 095-21838-00-00
County: Kingman County, Kansas
NE NE NW Sec. 25 Twp. 29 S. R. 9 East West
430 feet from S / N (circle one) Line of Section
3130 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Lubbers "B" Well #: 2
Field Name: Willowdale SE

Producing Formation: _____
Elevation: Ground: 1655' Kelly Bushing: 1663'

Total Depth: 4020' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 304 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 400 bbls

Dewatering method used Remove & evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: Messenger Petroleum, Inc.

Lease Name: Nicholas SWD License No.: 4706

Quarter NE Sec. 20 Twp. 30 S. R. 8 East West

County: Kingman Docket No.: D25434

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: PRESIDENT Date: 7/11/2003
Subscribed and sworn to before me this 11 day of July
2003.
Notary Public: [Signature]
Date Commission Expires: 8/15/05

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Edmiston Oil Company, Inc. Lease Name: Lubbers "B" Well #: 2
 Sec. 25 Twp. 29 S. R. 9 East West County: Kingman County, Kansas

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 <input 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 <i>(Submit Copy)</i> List All E. Logs Run: <div style="text-align: center;"> Dual Compensated Porosity Log Dual Induction Log </div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Indian Cave</td> <td>2376</td> <td>-714</td> </tr> <tr> <td>Heebner Shale</td> <td>3313</td> <td>-1651</td> </tr> <tr> <td>Toronto LS</td> <td>3328</td> <td>-1666</td> </tr> <tr> <td>Lansing</td> <td>3537</td> <td>-1875</td> </tr> <tr> <td>Swope LS</td> <td>3915</td> <td>-2253</td> </tr> <tr> <td>Hertha LS</td> <td>3946</td> <td>-2284</td> </tr> <tr> <td>TD</td> <td>4024</td> <td>-2362</td> </tr> </table>	Name	Top	Datum	Indian Cave	2376	-714	Heebner Shale	3313	-1651	Toronto LS	3328	-1666	Lansing	3537	-1875	Swope LS	3915	-2253	Hertha LS	3946	-2284	TD	4024	-2362
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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	# Sacjs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	20#	304'	60/40 Poz	200	3%cc 2%gel
Production	7-7/8"	5-1/2"	14#	4018'	60/40 Poz	150	10%salt 2%gel

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
4	3950 - 3960	2,500 Gal. 15% HCL	

CUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8"	3950		
Date of First, Resumerd Production, SWD or Enhr. 6-12-03		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
	45	45	75	10,000:1 36

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) _____