

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

ORIGINAL

Operator: License # 33629
Name: Great Plains Energy, Inc.
Address: PO Box 292, 429 N. Linden
City/State/Zip: Wahoo/NE/68066
Purchaser: Eaglewing
Operator Contact Person: Dan Blankenau
Phone: (402) 277.5336
Contractor: Name: WW Drilling, LLC
License: 33575
Wellsite Geologist: Richard Bell
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: N/A
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. _____
8/26/06 9/3/06 10/26/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

RECEIVED
KANSAS CORPORATION COMMISSION
APR 05 2007
CONSERVATION DIVISION
WICHITA, KS

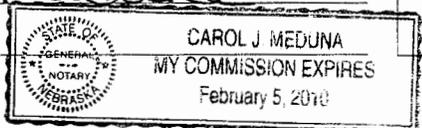
API No. 15 - 15-039-20986-0000
County: Decatur
NE NE SW SE Sec. 26 Twp. 4S S. R. 30 East West
1155 feet from (S) N (circle one) Line of Section
1550 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Sauvage Well #: 4
Field Name: Swede Hollow
Producing Formation: Toronto/LKC
Elevation: Ground: 2847' Kelly Bushing: 2852'
Total Depth: 4200' Plug Back Total Depth: 4193'
Amount of Surface Pipe Set and Cemented at 262 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2640 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 1000 ppm Fluid volume ~800 bbls
Dewatering method used Allow to evaporate then cover for farming.
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: [Signature]
Title: President Date: 3/30/07
Subscribed and sworn to before me this 2nd day of April
07
Notary Public: Carol J. Medina
Date Commission Expires: 2/5/10



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

104624

Side Two

Operator Name: Great Plains Energy, Inc. Lease Name: Sauvage Well #: 4
 Sec. 26 Twp. 4S S. R. 30 East West County: Decatur

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	2624	+228
Base	2659	+193
Topeka	3725	-873
Heebner	3892	-1040
Toronto	3926	-1074
Lansing	3940	-1088
BKC	4149	-1297

DIL, Micro, CD/NL, Frac Finder

RECEIVED
 KANSAS CORPORATION COMMISSION
 APR 05 2007

CONSERVATION DIVISION
 WICHTA 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
Surface	12 1/4"	8 5/8"	23	262	Common	175	3%cc, 2% gel
Production	7 7/8"	5 1/2"	15 1/2	4194	ASC	150	2% gel, 10% nacl, 2 gal KCl

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	2640/Surface	Lite	525	500 gal wtr2, 1/4 # flow seal

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
4	4088-4092 (LKC J)	250 gal 15% Mud acid, 1500 gal 15% NEFE	
4	4051-4057 (LKC H)	250 gal 15% Mud acid, 1500 gal 15% NEFE	
4	4010-4013 (LKC F)	250 gal 15% Mud acid, 1500 gal 15% NEFE	

TUBING RECORD	Size <u>2 7/8"</u>	Set At <u>4151'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	--------------------	---------------------	-----------	---

Date of First, Resumerd Production, SWD or Enhr. <u>11/12/06</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>105</u>	Gas Mcf	Water Bbls. <u>20</u>	Gas-Oil Ratio	Gravity
-----------------------------------	----------------------	---------	-----------------------	---------------	---------

Disposition of Gas: Vented Sold Used on Lease (If vented, Submit ACO-18.)
 METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled
 Production Interval: Other (Specify)