

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

**ORIGINAL**

Operator: License # 6470  
Name: Schankie Well Service, Inc.  
Address: 1006 SW Blvd, PO Box 397  
City/State/Zip: Madison, KS 66860  
Purchaser: SemGroup  
Operator Contact Person: Randall Schankie  
Phone: (620) 437-2595  
Contractor: Name: Rig 6 Drilling Co., Inc.  
License: 30567  
Wellsite Geologist: Dean Seeber

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. \_\_\_\_\_

<u>7-9-05</u>	<u>7-14-05</u>	<u>7-14-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 073-24011-0020  
County: Greenwood

N2 SE SWNW Sec. 5 Twp. 23 S. R. 11  East  West  
3100 feet from S N (circle one) Line of Section  
4290 feet from E W (circle one) Line of Section

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

Lease Name: Seeley Well #: 9

Field Name: Seeley-Wick

Producing Formation: Bartlesville

Elevation: Ground: 1203' Kelly Bushing: NA

Total Depth: 2023' Plug Back Total Depth: 2008'

Amount of Surface Pipe Set and Cemented at 100 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.

*ACT I WITHM 6-27-06*

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used Vacuum Truck

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: Randall Schankie, Sec

Title: Secretary Date: 6-22-06

Subscribed and sworn to before me this 22nd day of June

Notary Public: Carol R. Bolen

Date Commission Expires: 1-9-2009

**KCC Office Use ONLY**

NO Letter of Confidentiality Attached

If Denied, Yes  Date: \_\_\_\_\_

YES Wireline Log Received

YES Geologist Report Received

\_\_\_\_ UIC Distribution

**RECEIVED**

**JUN 23 2006**

**KCC WICHITA**

Carol R. Bolen  
NOTARY PUBLIC  
State of Kansas  
MY APPT. EXPIRES 1-9-2009

Operator Name: Schankie Well Service, Inc Lease Name: Seeley Well #: 9  
 Sec. 5 Twp. 23 S. R. 11  East  West County: Greenwood

**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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  <p style="text-align: center;">Gamma Ray-Neutron</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" 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>Cherokee</td> <td>1737</td> <td>-534</td> </tr> <tr> <td>Ardmore</td> <td>1816</td> <td>-613</td> </tr> <tr> <td>Bartlesville Sand</td> <td>1926</td> <td>-723</td> </tr> <tr> <td>Base Bartlesville</td> <td>1983</td> <td>-780</td> </tr> <tr> <td>RTD</td> <td>2023</td> <td>-820</td> </tr> </table>	Name	Top	Datum	Cherokee	1737	-534	Ardmore	1816	-613	Bartlesville Sand	1926	-723	Base Bartlesville	1983	-780	RTD	2023	-820
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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	# Sacs Used	Type and Percent Additives
Surface	NA	8 5/8"	NA	100'	Common	45	NA
Production	6 3/4"	4 1/2"	11.6#	2021'	Common	250	6% 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 (Amount and Kind of Material Used)	Depth
	1930'-1950' 11 shots	500 gal 15% HCL Acid	
	1956'-1966' 6 shots	10250# Sand Frac	
	1971'-1979' 5 shots		

<b>TUBING RECORD</b>		Size <u>2 3/8"</u> Set At <u>1973'</u> Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>5-31-06</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 <u>5</u> Bbls.	Gas <u>0</u> Mcf	Water <u>120</u> Bbls. Gas-Oil Ratio <u>NA</u> Gravity <u>40</u>

Disposition of Gas  Vented  Sold  Used on Lease *(If vented, Sumit ACO-18.)*

METHOD OF COMPLETION

Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval

CONSOLIDATED OIL WELL SERVICES, INC.  
 211 W. 14TH STREET, CHANUTE, KS 66720  
 620-431-9210 OR 800-467-8676

TICKET NUMBER 5491  
 LOCATION Eureka  
 FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET  
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-14-05	1309	Seeley #9	<b>ORIGINAL</b>	23S	11E	Greenwood
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Shankie Well Service			445	Rick		
MAILING ADDRESS			441	Larry		
P.O. Box 397			440	Justin		
CITY	STATE	ZIP CODE	436	Jason		
Madison	Ks	66860				

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 2023" CASING SIZE & WEIGHT 4 1/2" 116  
 CASING DEPTH 2020' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 13" - 14" SLURRY VOL 64 Bbl WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0'  
 DISPLACEMENT 31.5 Bbl DISPLACEMENT PSI 750 PSI MPPSI Pump Plug 1150 PSI RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Pump 10 Bbl ahead. Mixed 125 sks 60/40 Poz mix w/ 6% Gel, 1/4" Floccle Per/sk. Mixed 125 sks Regular Class A Cement w/ 2% Gel 1% Cacl<sub>2</sub>, + 4" Rel-Seal 1/4" Per/sk. Shut down wash out Pump of 1150 PSI. Release float w/ 31.5 Bbl fresh water. Final Pump Pressure 750 PSI. Pump Plug to 1150 PSI. Wait 2 min. Released Pressure. Float held. Good Cement returns to surface = 15 Bbl slurry. Job Complete. Rig down.

Note: Rotated Pipe during Job.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	76.00	76.00
5406	20	MILEAGE	2.50	50.00
1131	125 sks	60/40 Poz mix	8.00	1000.00
1184	13 sks	Gel 6%	6.63	86.19
1107	1 1/2 sks	Floccle 1/4" Per/sk	42.75	64.13
1104	125 sks	Regular class A Cement	9.75	1218.75
1184	5 sks	Gel 2%	6.63	33.15
1102	2 sks (200 lbs)	Cacl <sub>2</sub> 1%	11.00	22.00
1104	10 sks	Rel-Seal 4" Per/sk	16.90	169.00
5407A	11.5 Ton	20 miles - Bulk Truck	92	211.60
5502	3 hrs	80 lbsl Vac Truck	82.00	246.00
1123	3000 Gal	City Water	12.20	36.60
5891	1	Rental on Rotating head	50.00	50.00
4404	1	Tub Rubber Plug 4 1/2"	38.00	38.00
1156	1	4 1/2" float shoe w/ flopper	123.00	123.00
		SALES TAX		162.13
		ESTIMATED TOTAL		4395.60

RECEIVED  
 JUN 23 2006

KCC WICHITA

AUTHORIZATION Called by Cliff Shankie

TITLE 198303

DATE \_\_\_\_\_