

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: William Stout

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 Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____
10-7-05 10-7-05 10-13-05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 073-24023 -00-00
County: Greenwood
S 2 NW SWSE Sec. 21 Twp. 23 S. R. 11 East West
790 feet from S / N (circle one) Line of Section
2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Shull Well #: 4
Field Name: Seeley-Wick
Producing Formation: Bartlesville
Elevation: Ground: 1185' Kelly Bushing: NA
Total Depth: 2023' Plug Back Total Depth: 2007'
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 2021
feet depth to surface w/ 250 sx cmt.

Alt II WTM 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, 2006.

Notary Public: Carol R. Bolen
Date Commission Expires: 1-9-2009
CAROL R. BOLEN
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 1-9-2009

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
JUN 23 2006
KCC WICHITA

Operator Name: Schankie Well Service, Inc. Lease Name: Shull Well #: 4
 Sec. 21 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;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Ardmore</td> <td>1773</td> <td>-588</td> </tr> <tr> <td>Bartlesville Sand</td> <td>1882</td> <td>-697</td> </tr> <tr> <td>Base Bartlesville</td> <td>1985</td> <td>-800</td> </tr> <tr> <td>RTD</td> <td>2023</td> <td>-838</td> </tr> </tbody> </table>	Name	Top	Datum	Ardmore	1773	-588	Bartlesville Sand	1882	-697	Base Bartlesville	1985	-800	RTD	2023	-838
Name	Top	Datum														
Ardmore	1773	-588														
Bartlesville Sand	1882	-697														
Base Bartlesville	1985	-800														
RTD	2023	-838														

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	NA	8 5/8"	NA	40'	Common	15	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 <i>(Amount and Kind of Material Used)</i>	Depth
	1888' - 1898' 8 shots	500 gal 15% HCL Acid	
	1904' - 1912' 7 shots	10000# Sand Frac	

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		NA		NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumerd Production, SWD or Enhr.			Producing Method					
1-13-06			<input checked="" type="checkbox"/> Flowing <input 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			
	2	0	200	NA	40			

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 320-431-9210 OR 800-467-8676

ORIGINAL 07614
 TICKET NUMBER
 LOCATION Eureka
 FOREMAN Troy Strickler

**TREATMENT REPORT & FIELD TICKET
 CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
10-13-05	1309	Shull #4	21	23	11	GW	
CUSTOMER Shankie Well Service			Rig 6 Drly.	TRUCK #			DRIVER
MAILING ADDRESS P.O. Box 397				463	Alan		
CITY Madison				439	Justin		
STATE Ks.				440	Jim		
ZIP CODE 66860				437	Russ		
JOB TYPE	Longstring	HOLE SIZE	6 3/4	HOLE DEPTH	2023'	CASING SIZE & WEIGHT	4 1/2
CASING DEPTH	2021'	DRILL PIPE		TUBING		OTHER	ABTD 2015
SLURRY WEIGHT	13# 14.2#	SLURRY VOL	64 Bbls	WATER gal/sk	65 = 7.8°	CEMENT LEFT in CASING	6'
DISPLACEMENT	32 Bbl	DISPLACEMENT PSI	700 PSI	Bump Plug	1200 PSI	RATE	

REMARKS: Safety Meeting. Rig up to 4 1/2" casing. Break Circulation w/ 15 Bbl Fresh Water. Mixed 125 sks 60/40 Poz-mix Cement, 6% Gel, 1/4" Flocele @ 13# Per/sk yield 1.55 Tail in w/ 125 sks Regular Class "A" Cement, 2% Gel, 1% Cacl₂, + 4# Kol-Seal Per/sk. Washed out Pump + lines. Shut down. Released Plug. Displaced w/ 32 Bbl Fresh Water. Final Pump Pressure 700 PSI. Bump Plug to 1200 PSI. Wait 2 min. Released Pressure. Float held. Good Cement returns to surface = 18 Bbl Slurry to Prt. Job Complete. Rig down.

Note: Rotated Casing during Cementing Procedures.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	765.00	765.00	
5406	20	MILEAGE	3.00	60.00	
1131	125 sks	60/40 Poz-mix Cement	8.00	1000.00	
1118A	13 sks	Gel 6%	6.63	86.19	
1107	1 1/2 sks	Flocele 1/4" Per/sk	42.75	64.13	
1104	125 sks	Regular - Class A Cement	9.75	1218.75	
1118A	5 sks	Gel 2%	6.63	33.15	
1102	120#	Cacl ₂ 1%	.61	73.20	
1110 A	10 sks	Kol-Seal 4# Per/sk	16.90	169.00	
5407A	439 11.5 Ton	Ton Mileage - Bulk Trucks	1.00	230.00	
5502 C	437 3hrs	80 Bbl Vac Truck	87.00 Per/hr	261.00	
1123	3000 gal	City Water	12.20 Per/hr	36.60	
4201	1	4 1/2 Guide shoe	92.00	92.00	
4227	1	4 1/2 Insert - Flapper Valve	97.00	97.00	
4404	1	4 1/2 Top Rubber Plug	38.00	38.00	
5611	1	4 1/2 Rental - Rotating Head	50.00	50.00	
			6.37	SALES TAX	183.21
				ESTIMATED TOTAL	4457.23

RECEIVED
 JUN 23 2008

AUTHORIZATION Witnessed by Cliff Shankie TITLE _____ DATE _____