

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33097
 Name: Southern Star Central Gas Pipeline
 Address: 4700 Hwy. 56 P. O. Box 20010
 City/State/Zip: Owensboro, Kentucky 42304-0010
 Purchaser: _____
 Operator Contact Person: D. Mark Rouse
 Phone: (270) 852-4490
 Contractor: Name: Consolidated Oilwell Services Inc.
 License: 31440

Wellsite Geologist: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry Workover
 _____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
 _____ Gas _____ ENHR _____ SIGW
 _____ Dry Other (Core, WSW, Expl., Cathodic, etc) CSI

If Workover/Re-entry: Old Well Info as follows:
 Operator: Southern Star Central Gas Pipeline
 Well Name: McLouth # 17
 Original Comp. Date: 2/12/1953 Original Total Depth: 1366'
 _____ 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. ran 4.5" liner

<u>6/24/2005</u>	<u>6/24/2005</u>	
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 15-087-19029-00-01
 County: Leavenworth
SE NW NW SE Sec. 20 Twp. 9 S. R. 20 East West
2008' feet from S N (circle one) Line of Section
2018' feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: McLouth Gas Storage Well #: 17
 Field Name: McLouth Gas Storage
 Producing Formation: McLouth Sandstone
 Elevation: Ground: 987' Kelly Bushing: _____
 Total Depth: 1366' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at _____ 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 cm.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____ **RECEIVED**
 Lease Name: _____ **FEB 8 2006**
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ **KCC WICHITA**

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: D. Mark Rouse
 Title: Staff Geologist Date: 1/31/2006
 Subscribed and sworn to before me this 31st day of January,
20 06.
 Notary Public: Elizabeth A. Morris
 Date Commission Expires: 7/29/06

KCC Office Use ONLY

NO Letter of Confidentiality Received
 If Denied, Yes Date: _____
YES Wireline Log Received
NO Geologist Report Received
NO UIC Distribution



Operator Name: Southern Star Central Gas Pipeline Lease Name: McLouth Gas Storage Well #: 17
 Sec. 20 Twp. 9 S. R. 20 East West County: Leavenworth

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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

ORIGINAL

CASING RECORD <input checked="" 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"	10"	23	4'	Class A	3	
production	9"	7"	20	1357'	Class A	353	
liner	inside 7" casing	4.5"	10.5#	1359'	OWC	158	

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		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

5/14/05

CONSOLIDATED
OIL WELL
SERVICES, INC.
AN ENERGY COMPANY

REMIT TO
Consolidated Oil Well Services, Inc.
P.O. Box 493
Chanute, KS 66720

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 197921

Invoice Date: 06/29/2005 Terms: 0/30,n/30

Page 1

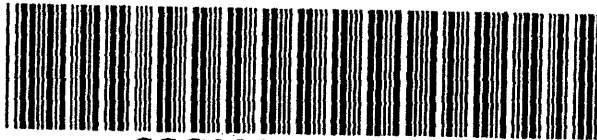
SOUTHERN STAR CENTRAL
19209 S.W MARYLAND ROAD BX 550
WELDA KS 66091
() -

McLOUTH 17
JOB # 37135
4076
06-24-05

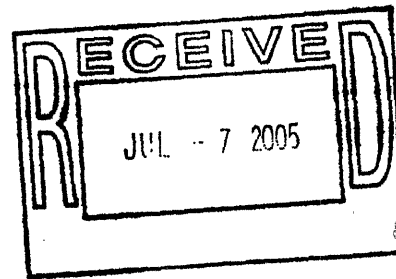
Part Number	Description	Qty	Unit Price	Total
L238	SILT SUSPENDER SS-630,ES	1.00	32.1500	32.15
L107	FLO-SEAL (25#)	2.00	42.7500	85.50
L123	CITY WATER	3400.00	.0122	41.48
L126	OIL WELL CEMENT	158.00	13.0000	2054.00
L404	4 1/2" RUBBER PLUG	1.00	38.0000	38.00

Description	Hours	Unit Price	Total
L22 TON MILEAGE DELIVERY	1.00	409.92	409.92
L68 CEMENT PUMP	1.00	765.00	765.00
EQUIPMENT MILEAGE (ONE WAY)	60.00	2.50	150.00
L68 CASING FOOTAGE	1368.00	.00	.00
L69 80 BBL VACUUM TRUCK (CEMENT)	3.50	82.00	287.00

Invoice # 0820511



SSC000000069021



RECEIVED
JUL 14 2006
KCC WICHITA

Parts:	2251.13	Freight:	.00	Tax:	139.79	AR	4002.84
Labor:	.00	Misc:	.00	Total:	4002.84		
Sublt:	.00	Supplies:	.00	Change:	.00		

igned _____ Date _____

BARTLESVILLE, OK P.O. Box 1453 74005 918/338-0808	EUREKA, KS 820 E. 7th 67045 620/583-7664	OTTAWA, KS 2631 So. Eisenhower Ave. 66067 785/242-4044	GILLETTE, WY 300 Enterprise Avenue 82716 307/686-4914	THAYER, KS 8655 Dorn Road 66776 620/839-5269
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