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

Operator: License #	API No. 15 - 09521889 -00-00
Name Key Gas Corp.	County: Kingman
155 N. Market Suite 900	SE.NE NW <sub>Sec.</sub> 36 Twp.29 S. R.8 [] East X West
City/State/Zip: Wichita, Kansas 67203	990 feet from S / N (circle one) Line of Section
Purchasar:	feet from E / W (circle one) Line of Section
Operator Contact Person: Rod Andersen	Footages Calculated from Nearest Outside Section Corner:
Phone: (_316) 265-2270	(circle one) NE SE NW SW
Contractor: Name: Forrest Energy	Lease Name: Schwartz Well #: 1
Contractor: Name: 33436	Field Name: Spivey
License: 33436 Wellsite Geologist: Rod Andersen	Producing Formation:
Wellsite Geologist: Rod Andersen	Elevation: Ground: 1545 Kelly Bushing: 1555
Designate Type of Completion:  New Well Re-Entry Workov	Total Depth: 4176 Plug Back Total Depth:
New Well Re-Entry Workov	Total Depth: 2275 Plug Back Total Depth. 200
Oil SWD SIOW Tempabel 5 3	Amount of Surface Pipe Set and Cemented at 300 Feet
Gas ENHR SIGW	Multiple Stage Cementing Collar Used?
X Dry Other (Core, WSW, Expl., Cathodic tc)	If yes, show depth setFeet
Designate Type of Completion:  X New Well Re-Entry Workov  Gas ENHR SIGW  X Dry Other (Core, WSW, Expl., Cathodic to)  If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from
Operator:	feet depth tosx cmt.  ALT I WHM 11-14-06
Well Name:	Drilling Fluid Management Plan
Original Comp. Date: Original Total Depth:	(Data must be collected from the Reserve Pit)
Deepening Re-perf Conv. to Enhr./SWD	Chloride content ppm Fluid volume bbls
Plug Back Plug Back Total Depth	Dewatering method used Evaporation
Commingled Docket No.	Location of fluid disposal if hauled offsite:
Dual Completion Docket No	
Other (SWD or Enhr.?) Docket No	Operator Name:
Drive Rice	Lease Name: License No.:
7/18/ <del>05</del> 6 8/4/04 8/5/04 Spud Date or Date Reached TD Completion Date or Recompletion Date	QuarterSecTwpS. REast West
Recompletion Date Recompletion Date	County: Docket No.:
	: 1
2 The state of the control of the co	
INSTRUCTIONS: An original and two copies of this form shall be filed with Kansas 67202, within 120 days of the spud date, recompletion, workove	the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita,
Kansas 67202, within 120 days of the spud date, recompletion, workove Information of side two of this form will be held confidential for a period of 1	2 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 regula herein are complete and correct to the best of my knowledge.	te the oil and gas industry have been fully compiled with and the statements
Signature: Mod Cuesar	KCC Office Use ONLY
Title: Geologist Date: 8/15/05	Letter of Confidentiality Received
Subscribed and sworn to before me this 15, day of 3EPT.	If Denied, Yes Date:
_	BONITA DANNER Log received
2005.	NOTARY PUBLIC STATE OF KANSAS IST Report Received
Notary Public: Bondo Danner	My Appt. Exp W. Dictribution
Date Commission Expires: 3-1208	

Operator Name: K		orp. □East Xwest		Schwar	tz	Well #:		
INSTRUCTIONS: Sh tested, time tool oper temperature, fluid rec	now important tops and closed, flowing overy, and flow rate	and base of formations and shut-in pressure es if gas to surface test final geological well sit	along with final above	all cores. Repor	rt all final copies I static level, hydr tra sheet if more	of drill stems ostatic press space is nee	tests giving interval ures, bottom hole ded. Attach copy of	
Drill Stem Tests Taker (Attach Additional S		X Yes No	X	Log Format	ion (Top), Depth	and Datum	Sample	
Samples Sent to Geo	logical Survey	X Yes No	X Yes No		Name		Datum	
Electrical Co.		Yes XNo	Y Yes No He		Topeka2Heebner31Lansing34		-1211 -1603 1845	
ist All E. Logs Run:			Mı	ssissipp	pian 41	148	-2593	
	al Induct al Porosi							
70 No 20 American September 1990 II Million 19			G RECORD No.	ew X Used	tion etc	Management and an analysis of the factors and	A 19 SOURCE AND A SOURCE AND ASSOCIATION ASSOCIATION AND ASSOCIATION ASSOCIATI	
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	
Surface	12 1/4	8 5/8	24	300	common	275	Common	
	1	ADDITIONA	L CEMENTING / SQL	EEZE RECORD		1		
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used		Type and Percent Additives			
Shots Per Foot PERFORATION RECORD - Br Specify Footage of Each Int			) - Bridge Plugs Set/Type ach Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) De			
UBING RECORD	Size	Set At	Packer At	Liner Run		phone and continuous way to be at a con-		
ate of First, Resumerd Pr	oduction, SWD or Ent	or. Producing Meth	nod Flowing	Pumping	Yes No	Otho	r (Explain)	
stimated Production Per 24 Hours	Oil Ba	ols. Gas	Mcf Water	Bbls	Thirting of the Control of the Contr	s-Oil Ratio	Gravity	
sposition of Gas	METHOD OF CO	MPLETION	and a state of the	Production Interva	1 - H	Command was a rich recommendation	THE PARTY IS A TOTAL PROPERTY OF THE PROPERTY OF THE PARTY OF THE PART	
Vented Sold (If vented, Submit	Used on Lease ACO-18.)	Open Hole Other (Specify	Perf. Du	ally Comp.	Commingled			



## 15095218890000.

FIELD ORDER

Nº 24744

BOX 438 • HAYSVILLE, KANSAS 67060 316-524-1225

		DATE	19	20 04
IS AUTHORIZ	ED BY:	Key GAS CORP	711(	
Address		City	State	
To Treat Well As Follows: I	ease	Chuartz Well No. 2 Customer	Order No	
Sec. Twp. Range	<del></del>	County KINGMIIN	State	<u> </u>
not to be held it implied, and no treatment is pay our invoicing de The undereig THIS ORDER MU	able for any dan representations able. There will partment in acc- aned represents STBE SIGNED	consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, nage that may accrue in connection with said service or treatment. Copeland Acid Service has have been relied on, as to what may be the results or effect of the servicing or treating said we like no discount allowed subsequent to such date. 6% interest will be charged after 60 days. To ordance with latest published price schedules.  himself to be duly authorized to sign this order for well owner or operator.	made no repre	sentation, expressed or ration of said service or
BEFORE WORK	S COMMENCED	Well Owner or Operator	Agent	· · ·
CODE	QUANTITY	DESCRIPTION	UNIT	AMOUNT
	50	Mucace Pump Truck	25%	12500
	1	Pump Charge		500 30
	7	WOODEN Plub		75 00
	275	(OMMON	725	1973 75
	9	CALCIUM CHIORIDE 350 CC	25-00	72(0)
		RECE!	/Fn	
		KANSAS CORPORATION CONTRACTOR CON		N
		SEP 1 5	2005	
		antal equal ed a	55.40104	
		CONSERVATION WICHITA,		
•	275	Bulk Charge	1.00	275-2
		Bulk Truck Miles 12.9 T × 50m = 645 TM	.85	27412
		Process License Fee onGallons		
		TOTAL BILLING		7467 93
manner u	nat the above nder the dire Representativ	e material has been accepted and used; that the above service was performed action, supervision and control of the owner, operator or his agent, whose signs are the control of the owner.	ed in a good inature appe	and workmanlike ars below.
Station		6B		
		Well Owner, Operate	or or Agent	
Remarks_ KENS #41801		NET 30 DAYS		



## TREATMENT REPORT

## 15095 21889000

Acid Stage No. ....

01-1	اما	D o.	ا ستشدا		Type Treatment: Amt.	Type Fluid		l'ounds of Sand
Date 8 5	3.4 (7)			). No	BkdownBbl. /Gal			
Company					Bbl. /Gal			•••••
Well Name &	No. La				Bbl./Gal	•••••		***************************************
Location			Field 🔾	iven	Bbl. /Gal	••••••••••••		
County.	indusin	)	State4	<u>`</u>	FlushBbl./Gal		<b></b>	***************************************
	9				Treated fromf	t. to	ft. No. 1	ít
Casing: Size	<del></del>	Type & Wt		Set atft.	fromf	t. to	ft. No. 1	ſt
Formation:			Perf	to	fromf	t. to	ft. No. 1	ít
Formation:		***************************************	Perf	to	Assessed Wickenson of City (Windows & Toronto)	3 77 . 1		<b>5</b> 3.4.4.5.4
Formation:			Perf	to	Actual Volume of Oil/Water to Los	a Hole;		Bbl./Gal.
Liner: Size	Type & Wt	t	Top atft	Bottom atft.	Pump Trucks. No. Used: Std. 200	5sp	Tw	'in
Cem	nented: Yes/No.	Perforated fr	om	ft. to <b>f</b> t.	Auxiliary Equipment 308		·····	
Tubing: Size &	e we HI I	DB KO	Swung at 11	50 n.	Packer:		Set at	
Per	forated from		ft. to	ft.	Auxiliary Tools		··· ······	
					Plugging or Sealing Materials: Type	160 sad	es 60-	40 22
Open Hole Siz	se	T.D	ft. P.1	3. toft.			Cals.	
					4	$\bigcirc$ 1		
Commany I	Representative	<b>.</b>			Treater Kenn	Kand		
	PRESS		Total Fluid					
a.m (p.m.	Tubing	Casing	Pumped		REMAR	K S		
	<u></u>			Rice Mas				
4:30			12007	Ling who	1101 - 350	1001	01 81	
230			101015/3	Rosin bibs	110 WIX 00 26	ices 10 isi	21- 2/N	RRY go down
•			30 BBB	Dizblass	SER OF AFTIN Guards	is water.	KNOCK	OA
			127 00.	00111:00	1027	1 00	1.	
:			10 BBb	Dail bibe	100, W/ 4 30 GAMO,	100 35 30	ices	
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				2 11 2	1831		00	
			108812	Deill bibe	350 mix4 GB C	son hole	<u>355596</u>	
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7 10			87 va	Rin Flow	Be back in Drille	spe OU	1411 9G	2 Stuks
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:			141-70-0	^			<del></del>	***
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