

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5192
Name: Shawmar Oil & Gas Company, Inc.
Address: P.O. Box 9
City/State/Zip: Marion, KS 66861
Purchaser: _____
Operator Contact Person: James M. Cloutier
Phone: (620) 382-2932
Contractor: Name: Shawmar Oil & Gas Company, Inc.
License: 5192
Wellsite Geologist: None
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. _____
04/28/05 05/18/05 05/27/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 017-20871-00-00
County: Chase
Sec. 26 Twp. 18 S. R. 6 East West
2490 feet from S / N (circle one) Line of Section
2660 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: LIPS Well #: 2-26
Field Name: Lipps (D)
Producing Formation: Admire
Elevation: Ground: 1408 Kelly Bushing: _____
Total Depth: 1500 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 201 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 cmft.

Drilling Fluid Management Plan ALT I WITH
(Data must be collected from the Reserve Pit) 4-23-07
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
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: July 26, 2005
Subscribed and sworn to before me this 26th day of July
2005
Notary Public: [Signature] **CAROL MAKOVEG**
NOTARY PUBLIC
Date Commission Expires: 03/01/08 **STATE OF KANSAS**

My Appt. Exp. 03/01/08

KCC Office Use ONLY

YES Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

CONFIDENTIAL

Side Two

ORIGINAL

Operator Name: Shawmar Oil & Gas Company, Inc. Lease Name: LIPS Well #: 2-26

Sec. 26 Twp. 18 S. R. 6 East West County: Chase

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

Admire **KCC** 391-397
AUG 0 1 2005

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Dual Induction;
Comp. Density-Neutron Hi-Resolution Density

CASING RECORD <input type="checkbox"/> New <input checked="" 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	9 7/8	7"	20#	205	Class A	75	210# CACiz-3%
Lonstring	5 1/2	2 7/8 tubing		930	thick set	105	KOL-Seal 8 sks.

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
4	391-397	250 gals. 71/2% HLL	391-397
4	822-828		

RECEIVED
AUG 0 4 2005
KCC WICHITA

TUBING RECORD	Size	Set At	Packer At	Liner Run
none				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. June 16, 2005 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	10			

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease (If vented, Submit ACO-18.) Open Hole Perf. Dually Comp. Commingled Other (Specify)

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

KCC
 AUG 31 2005
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TICKET NUMBER 3884
 LOCATION Eureka
 FOREMAN Steve Mead

TREATMENT REPORT & FIELD TICKET
 CEMENT

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ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-5-05	7665	Lips #2-26	26	185	6E	Chase
CUSTOMER Shawmar Oil + Gas Co.			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 9			444	Alan		
CITY Marion			442	Larry		
STATE KS		ZIP CODE				

JOB TYPE Surface HOLE SIZE 9 7/8 HOLE DEPTH 205' CASING SIZE & WEIGHT 7" 20"
 CASING DEPTH 201' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 7 1/2 bbls DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 7" casing. Break circulation with Fresh Water. Pump 5 bbls water 5 bbls dye water. mix 75 sks Reg Cement 3% Calc. 2% gel, 1/4 # Flocele. Displace with 7 1/2 bbls water Shut down close casing in. Good cement returns to surface Circulated 2 1/2 bbls cement. Job complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	590.00	590.00
5406	60 miles	MILEAGE	2.50	150.00
1104	75 sks	Class "A" Cement	9.75	731.25
1102	210 lbs	Calc 3%	.61	128.10
1118A	100 #	Gel 2%	6.63	663.00
1107	25 lbs	Flocele 1/4 # per/sk	42.75	42.75
5407A	353 tons	60 miles bulk track	.92	194.58
RECEIVED				
AUG 04 2005				
KCC WICHITA				
			SubTotal	1849.94
			SALES TAX	57.67
			ESTIMATED TOTAL	1907.61

AUTHORIZATION _____

TITLE _____

DATE 5-5-05

197058

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

KCC
 AUG 01 2005

TICKET NUMBER 3962
 LOCATION Eu. - ks
 FOREMAN Brad Butler

CONFIDENTIAL
 TREATMENT REPORT & FIELD TICKET

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY			
5-20-05	665	Lips # 2-26	26	18s	6E	Chase			
CUSTOMER Shawmat Oil & Gas CO.									
MAILING ADDRESS P.O. Box 9									
CITY Marion		STATE Ks.	ZIP CODE						
		TRUCK #		DRIVER		TRUCK #		DRIVER	
		446		SCOTT					
		442		ALAN					

JOB TYPE Logging HOLE SIZE 5 1/4" HOLE DEPTH 1500' CASING SIZE & WEIGHT _____
 CASING DEPTH 930' DRILL PIPE _____ TUBING 2 7/8" at 9.30' OTHER _____
 SLURRY WEIGHT 13.2 lb SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0'
 DISPLACEMENT 5 1/2 Bbls. DISPLACEMENT PSI 500 ~~MAX~~ PSI 1200 Landed Plug RATE 3 BPM

REMARKS: Safety Meeting: Rig up to 2 7/8" Tubing Break circulation with 15 Bbl. Fresh water Pumped 2 Bbl. Dye water. Mixed 105 SKs. Thick Set cement w/ 4" PPSK of KOI-SEAL @ 13.2 lb PPSK/GAL. Shutdown - washout pump & lines - Release Plug - Displace Plug with 5 1/2 Bbls. water. Final pumping @ 500 PSI - Bumped Plug to 1200 PSI - Close Tubing in with 700 PSI Good cement returns to Surface with 4 Bbl. slurry Job complete - Tear down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401	1	PUMP CHARGE	765.00	765.00	
5406	60	MILEAGE	2.50	150.00	
1126 A	105 SKs.	Thick Set cement	13.00	1365.00	
1110 A	8 SKs.	KOI-SEAL 4" PPSK	16.90	135.20	
5407 A	6 Ton	60 miles - Bulk Truck	.92	331.20	
RECEIVED					
4152	1	2 7/8" Float shoe	80.00	80.00	
4127	4	2 7/8" Centralizers	26.00	104.00	
4402	1	2 7/8" Top Rubber Plug	17.00	17.00	
				SALES TAX	107.18
				ESTIMATED TOTAL	3054.58

AUTHORIZATION _____ TITLE _____ DATE _____