

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC

ORIGINAL

Operator: License # 33366
Name: Charles D. Roye
Address: P.O. Box 191
City/State/Zip: Girard, KS 66743
Purchaser: Unimark
Operator Contact Person: Marvin J. Strobel
Phone: (620) 362-4906
Contractor: Name: L S Well Service
License: 33374

API No. 15 - 037-21725-00-00
County: Crawford
Sec. 27 Twp. 27 S. R. 23 East West
1320 feet from S (N) (circle one) Line of Section
1320 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: K.O'Brien Well #: 27-1
Field Name: Wildcat

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

Producing Formation: Riverton Coal
Elevation: Ground: 950' Kelly Bushing: _____
Total Depth: 611 Plug Back Total Depth: _____
Depth of Surface Pipe Set and Cemented at 21.6 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 611
feet depth to surf. w/ 112 sx cmt.

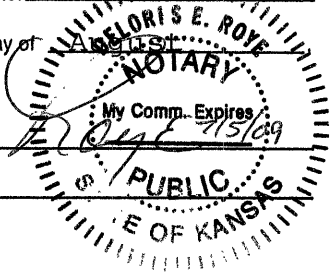
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
7/18/05 7/19/05 7/26/05
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) ACT II WITH 422-07
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used (air drilled)
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: Charles D. Roye
Title: Operator Date: 8/10/05
Subscribed and sworn to before me this 10 day of August
20 05
Notary Public: Deloris E. Roye
Date Commission Expires: 7/5/09



KCC Office Use ONLY

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

Operator Name: Charles D. Roye Lease Name: K.O'Brien Well #: 27-1
 Sec. 27 Twp. 27 S. R. 23 East West County: Crawford

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: <u>Dual Induction/Dual Porosity</u> <u>Temperature Log</u> <u>Density-Neutron Log</u> <u>Cement Bond</u> <u>Radioactivity Log</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <u>Summit/Mulky coal</u> <u>172'</u> <u>Squirrel Sand</u> <u>304'</u> <u>Bartlesville Sand</u> <u>424'</u> <u>Riverton Coal</u> <u>562'</u> <u>Miss. Chat</u> <u>602'</u> <u>RTD</u> <u>611'</u>
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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	# Sacks Used	Type and Percent Additives
surface	11"	8 5/8"		22'	portland	5	
production	6 3/4"	4 1/2"	10.5#	600'	OWC	112	

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
3	562' - 564'	500 gal. 15% HCL	562-4

TUBING RECORD	Size	Set At	Packer At	Linor Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD, or Enhr. <u>waiting on pipeline</u>	Producing Method <input checked="" 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 <u>0</u> Bbls.	Gas <u>25</u> Mcf	Water <u>5</u> 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

Production Interval Other (Specify) _____

L S Well Service, L.L.C.# 33374
 543 22000 ROAD
 CHERRYVALE, KANSAS 67335-8515
 620-328-4433 OFFICE

KCC
 AUG 12 2005
CONFIDENTIAL

ORIGINAL
 TICKET NUMBER 2005 0719
 LOCATION Crawford Co
 FOREMAN BL, KB

CONFIDENTIAL

CEMENT TREATMENT REPORT

DATE <u>7-22-05</u>	WELL NAME <u>OBRIEN 27-1</u>		
SECTION <u>27</u>	TOWNSHIP <u>27</u>	RANGE <u>23</u>	COUNTY <u>CR</u>
CUSTOMER <u>Galaxy</u>			
MAILING ADDRESS <u>P.O. Box 733</u>			
CITY <u>Stigler</u>			
STATE <u>OK</u>		ZIP CODE <u>74462</u>	
TIME ARRIVED ON LOCATION			

Hole	Pipe	Annual Volume in Linear Ft./Bl.	
6 3/4"	4 1/2"	40.5	<u>610</u>
6 1/2"	4 1/2"	46	
6 1/4"	2 1/2"	33.5	
5 1/4"	2 1/2"	53.5	
5 1/4"	2"	47	
5 1/2"	2 1/2"	41	
Tubing-Linear Ft./Bl.			
11"	8 5/8"	15	
10"	7"	24	
4 1/2"	10.5 lb.	63.1	<u>600</u>
2 1/2"		170	
2"		250	

WELL DATA	
HOLE SIZE	<u>6 3/4</u>
TOTAL DEPTH	<u>611</u>
CASING SIZE	<u>4.5</u>
CASING DEPTH	<u>600'</u>
PACKER DEPTH	
WIRE LINE READING BEFOI	
WIRE LINE READING AFTER	

RECEIVED
 AUG 15 2005

KCC WICHITA

TYPE OF TREATMENT
<input type="checkbox"/> SURFACE PIPE
<input checked="" type="checkbox"/> PRODUCTION CASING
<input type="checkbox"/> SQUEEZE CEMENT
<input type="checkbox"/> PLUG AND ABANDON
<input type="checkbox"/> PLUG BACK
<input type="checkbox"/> MISP. PUMP
<input type="checkbox"/> WASH DOWN
<input type="checkbox"/> OTHER

INSTRUCTIONS PRIOR TO JOB _____

AUTHORIZATION TO PROCEED	TITLE	DATE
HOOKED ONTO <u>4.5</u> *CASING. ESTABLISHED CIRCULATION WITH <u>6</u> BARRELS OF WATER, <u>1-Min</u> AHEAD, THEN BLENDED <u>112</u> SACKS OF <u>OWC</u> CEMENT, THEN DROPPED RUBBER PLUG, THEN PUMPED <u>9.5</u> BARRELS OF WATER.		

- LANDED PLUG ON BOTTOM AT 1500 PSI
- SHUT IN PRESSURE _____
- LOST CIRCULATION _____
- GOOD CEMENT RETURNS
- TOPPED OFF WELL WITH _____ SACKS
- SET FLOAT SHOE - SHUT IN


 (SIGNATURE)