

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32753
Name: Paul C. Carageannis DBA Seed Group
Address: P.O. Box 771189
City/State/Zip: Wichita, KS 67277-1189
Purchaser: Central Kansas Crude
Operator Contact Person: Paul Carageannis
Phone: (316) 807-1209
Contractor: Name: AA Drill-N
License: 32753
Wellsite Geologist: Paul C. Carageannis

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. _____

6/29/06 7/11/06 3/7/07
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 191-22472-00-00

County: Sumner

C SE SE NW Sec. 29 Twp. 34 S. R. 2 East West

2310 feet from S / (circle one) Line of Section

2310 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Wolf Well #: 2

Field Name: ASHTON SE

Producing Formation: Kansas City

Elevation: Ground: 1180 Kelly Bushing: 1183

Total Depth: 3857 Plug Back Total Depth: 3802

Amount of Surface Pipe Set and Cemented at 8 5/8 @ 252 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 cmt.

Drilling Fluid Management Plan ALTI WNW
(Data must be collected from the Reserve Pit) 3-7-07

Chloride content 150 mg/lppm Fluid volume 500 bbls

Dewatering method used let dry

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: _____

Title: _____ Date: 3/6/07

Subscribed and sworn to before me this 6th day of March

07

Notary Public: _____

Date Commission Expires: July 27 2008

KIMBERLY J. LOVE
Notary Public, State of Kansas
My Commission Expires 7-27-08

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
 Geologist Report Received **KANSAS CORPORATION COMMISSION**
 UIC Distribution **MAR 06 2007**
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Paul C. Carageannis Lease Name: Wolf Well #: 2
 Sec. 29 Twp. 34 S. R. 2 East West County: Sumner

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Kansas City	3026	(-1843)
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Marmaton	3208	(-2025)
List All E. Logs Run:		Mississippian	3498	(-2315)
		Simpson	3768	(-2585)
		LTD	3857	(-2674)

**Comp Density/Neutron
Dual Induction**

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	8 5/8	23#	252	class "A"	125	2%CA, 2%GEL
Production	7 7/8	4 1/2	10.5#	3855	thickset	200	10% GIL

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
4 spf	3167-3170	800 gal, 15% HCL/9,000#sand/225BBL	
4 spf	3155-3159	800 gal, 15% HCL/9,000#sand/225BBL	
4 spf	3064-3070	600 gal, 15% HCL	
4 spf	3026-3030	600 gal, 15% HCL	
4 spf	2828-2834	200 gal, 7 1/5% MCA	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8	3760	2901		
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
waiting on pumping unit			<input checked="" type="checkbox"/> Flowing <input checked="" 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	
	24 BOPD	none	24 BSWPD			

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) _____

ATED OIL WELL SERVICES, INC.
 X-884, CHANUTE, KS 66720
 431-9210 OR 800-467-8676

TICKET NUMBER 07242
 LOCATION Barthesville
 FOREMAN Tracy Williams

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-12-06	2685	Wolf #2	29	34.5	3E	Sumner
CUSTOMER Seed Group						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			492	Tim		
			460	Frank		

JOB TYPE LS HOLE SIZE 7 7/8 HOLE DEPTH 3857 CASING SIZE & WEIGHT 4 1/2 10.5
 CASING DEPTH 3857 DRILL PIPE _____ TUBING _____ OTHER insert 3818
 SLURRY WEIGHT 13.8 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 39' below insert
 DISPLACEMENT 61.5 DISPLACEMENT PSI 600 MIX PSI 0 RATE 5

REMARKS: On location 06:30 AM Started running casing at 09:00. Rigged up to cement at 12:30. Broke circulation & pumped 20 bbl spacer. Ran 200 sks of Thickset cement. Shutdown & washed up behind plug. Pumped plug to bottom & set insert. Shut in, left location at 2:30 PM

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Production Casing		800.00
5406	102	MILEAGE		321.30
5402	3857	Footage		655.69
5407	1128 Ton	Ton Mileage		1208.09
5609	6 hrs	Equipment Stand-by		912.00
1107A	120#	Phenaseal		120.00
1110	1000#	Gilsonite		460.00
1126A	200 sks	Thickset Cement		2930.00
4129	10	4 1/2" Centralizers		360.00
4201	1	4 1/2" Guide Shoe		100.00
4226	1	4 1/2" AFU Insert		140.00
4404	1	4 1/2" Rubber Plug		40.00
				6.3%
				SALES TAX
				ESTIMATED TOTAL
				8308.53

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 06 2007
 CONSERVATION DIVISION
 WICHITA, KS

207077

AUTHORIZATION _____

TITLE _____

DATE _____

WELL SERVICES, I

CHANUTE, KS 66720

9210 OR 800-467-8676

J.B. Conow
11/9/30

TICKET NUMBER

07220

LOCATION

AV

FOREMAN

Steve Johnson

TREATMENT REPORT & FIELD TICKET

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
<i>6-30-06</i>		<i>Wolf #2</i>	<i>29</i>	<i>24</i>	<i>2</i>	<i>sumner</i>
CUSTOMER			TRUCK #			
<i>Speed Laloup</i>			<i>419</i>			
MAILING ADDRESS			DRIVER			
			<i>LUKE</i>			
CITY			TRUCK #			
			<i>417-799</i>			
STATE			DRIVER			
ZIP CODE						

JOB TYPE *Surface* HOLE SIZE *12 1/4* HOLE DEPTH *260'* CASING SIZE & WEIGHT *8 3/8*
 CASING DEPTH *245'* DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT *14.7* SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING *20'-15'*
 DISPLACEMENT *15.3* DISPLACEMENT PSI *300-400* MIX PSI *200* RATE *5.0*

REMARKS: *Pumped 125 sk 2% Calcium 2% LFC cement displaced to 240'*

included cement to surface

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
<i>54015</i>	<i>1</i>	<i>PUMP CHARGE surface</i>		<i>620.00</i>
<i>5406</i>	<i>95</i>	<i>MILEAGE</i>		<i>299.25</i>
<i>5407A</i>	<i>6 TONS</i>	<i>TON Delivery</i>		<i>598.50</i>
<i>5402</i>	<i>219'</i>	<i>Footage</i>		<i>42.33</i>
<i>1104</i>	<i>11,250 #</i>	<i>CEMENT</i>		<i>1410.00</i>
<i>1102</i>	<i>250 #</i>	<i>Calcium Chloride</i>		<i>110.00</i>
<i>1118B</i>	<i>250 #</i>	<i>LFC</i>		<i>35.00</i>
RECEIVED KANSAS CORPORATION COMMISSION MAR 06 2007 CONSERVATION DIVISION WICHITA, KS				
		<i>INV. 7162</i>	<i>6907.38</i>	
		<i>INV. 7220</i>	<i>3266.20</i>	
		<i>Discount - 10%</i>	<i>- 1017.36</i>	
		<i>Total =</i>	<i>9156.22</i>	
			<i>6.5%</i>	<i>SALES TAX</i>
				<i>101.12</i>
			<i>ESTIMATED</i>	
			<i>TOTAL</i>	<i>3266.20</i>

PAD
check #
1375