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NOV 30 2005

KCC WICHITA CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

KCC

NOV 2 2005

Form ACO-1 September 1999 Form Must Be Typed

WELL COMPLETION FORM

CONFIDENTIAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6569
Name: Carmen Schmitt Inc.
Address: PO Box 47
City/State/Zip: Great Bend, Kansas 67530
Purchaser:
Operator Contact Person: Jacob Porter
Phone: (620) 793-5100
Contractor: Name: Sterling Drilling Company
License: 5142
Wellsite Geologist: Jacob Porter

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.

10/27/05 11/11/05 11-12-2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 119-21167-0000
County: Meade
N/2 NW SW Sec. 36 Twp. 33 S. R. 27 East West
2310' fsl feet from S / N (circle one) Line of Section
660' fwl feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Ediger Well #: 1-36
Field Name:

Producing Formation:
Elevation: Ground: 2463' Kelly Bushing: 2474'
Total Depth: 6100 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at 1453' set at 1460' 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.

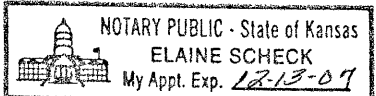
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 16000 ppm Fluid volume 1800 bbls
Dewatering method used evaporate and backfill

Location of fluid disposal if hauled offsite:
Operator Name:
Lease Name: License No.
Quarter Sec. Twp. S. R. East West
County:
KCC NOV 2 2005 CONFIDENTIAL

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: Jacob L. Porter
Title: Operations Manager Date: 11/28/05
Subscribed and sworn to before me this 28th day of November, 2005.
Notary Public: Elaine Schuck
Date Commission Expires: 12-13-07



KCC Office Use ONLY
YES Letter of Confidentiality Received
If Denied, Yes Date:
Wireline Log Received
Geologist Report Received
UIC Distribution

checkmark

X

CONFIDENTIAL

Side Two

RECEIVED

NOV 30 2005

ORIGINAL

Operator Name: Carmen Schmitt Inc.

Lease Name: Ediger

Sec. 36 Twp. 33 S. R. 27 East West

County: Meade

KCC WICHITA 1-36

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:

Dual Induction, Dual Compensated Porosity

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Heebner	4548	-2074
Stark	5225	-2751
Fort Scott	5536	-3062
Atoka	5790	-3316
Morrow	5853	-3379
Chester	5936	-3462

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#	1460'	common	800	all 800 sks w/ 3%cc
							550 sks w/ 1/4# flowseal/sk
							250 sks w/ 2% gel

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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method <input type="checkbox"/> Flowing <input 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

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

ALLIED CEMENTING CO., INC. 18462

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: Neosho City

DATE <u>11-12-05</u>	SEC. <u>36</u>	TWP. <u>33</u>	RANGE <u>27</u>	CALLED OUT <u>1:30am</u>	ON LOCATION <u>5:15 am</u>	JOB START <u>5:30am</u>	JOB FINISH <u>8:30am</u>
LEASE <u>Ediger</u>	WELL # <u>1-36</u>	LOCATION <u>Meade-South to curve</u>		COUNTY <u>Meade</u>	STATE <u>K.S.</u>		
OLD OR NEW (Circle one)			<u>7 East - just past east curve east into</u>				

CONTRACTOR Steering Only

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D.

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Carmen Schmitt

CEMENT AMOUNT ORDERED 130 sy 60/40 to 90 gel.

COMMON	<u>78</u>	@	<u>10.00</u>	<u>780.00</u>
POZMIX	<u>52</u>	@	<u>4.70</u>	<u>244.40</u>
GEL	<u>8</u>	@	<u>14.00</u>	<u>112.00</u>
CHLORIDE		@		
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>138</u>	@	<u>1.60</u>	<u>220.80</u>
MILEAGE	<u>55.6</u>			<u>138</u>
TOTAL				<u>1812.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER Jack

224 HELPER Jim

BULK TRUCK DRIVER Steve

311

BULK TRUCK DRIVER _____

REMARKS:

1st plug @ 1400 with 50 sy cement

2nd plug @ 600 with 40 sy cement

3rd plug @ 60' with 15 sy cement

Bathole 15 sy cement

Mous. Hole 10 sy cement

Thanks

CHARGE TO: Carmen Schmitt

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>665.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>55 Lib.</u>	@	<u>5.00</u>
		@	
		@	
		@	
TOTAL <u>940.00</u>			

PLUG & FLOAT EQUIPMENT

MANIFOLD		@	
		@	
		@	
		@	
		@	

TOTAL 0

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE W. C. Craig

W. C. CRAIG
PRINTED NAME

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

ALLIED CEMENTING CO., INC.

21701

RECEIVED

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

NOV 30 2005

SERVICE POINT:

OKLEY, KS

KCC WICHITA

DATE <u>10-29-05</u>	SEC. <u>36</u>	TWP. <u>33</u>	RANGE <u>27</u>	CALLED OUT	ON LOCATION <u>3:30 pm</u>	JOB START <u>5:45 pm</u>	JOB FINISH
LEASE <u>Edgee</u>	WELL# <u>1-36</u>		LOCATION <u>meade fs. 86.5 in</u>		COUNTY <u>meade</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Stirling Dals #2

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 1466'

CASING SIZE 8 5/8 23' DEPTH 1459 5/4

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 42 2/4

CEMENT LEFT IN CSG. 42 2/4

PERFS. _____

DISPLACEMENT 90.26 BALS

OWNER same

CEMENT

AMOUNT ORDERED 550 hits 30cc

114# Flo-seal

250 com 30cc - 20 gal

COMMON	<u>150</u>	@ <u>10⁰⁰</u>	<u>1500⁰⁰</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>14⁰⁰</u>	<u>42⁰⁰</u>
CHLORIDE	<u>5</u>	@ <u>38⁰⁰</u>	<u>190⁰⁰</u>
ASC		@	
<u>late</u>	<u>550</u>	@ <u>9³⁰</u>	<u>5115⁰⁰</u>
		@	
<u>Flo-seal</u>	<u>137</u>	@ <u>1⁷⁰</u>	<u>232⁹⁰</u>
		@	
		@	
		@	
		@	
		@ <u>1⁶⁰</u>	
HANDLING	<u>820</u>	@	<u>1312⁰⁰</u>
MILEAGE	<u>.0645K mile</u>		<u>2952⁰⁰</u>
TOTAL			<u>11343⁹⁰</u>

EQUIPMENT

PUMP TRUCK CEMENTER Fuzzy

191 HELPER Wayne

BULK TRUCK

218 DRIVER Larry

BULK TRUCK

389 DRIVER

353 - Jerry

REMARKS:

Cement did circulate

Plugs down @

Thanks

Fuzzy

+ crew

SERVICE

DEPTH OF JOB	<u>1459</u>		<u>744</u>
PUMP TRUCK CHARGE			<u>670⁰⁰</u>
EXTRA FOOTAGE	<u>1159</u>	@ <u>.55</u>	<u>637⁴⁵</u>
MILEAGE	<u>60</u>	@ <u>5⁰⁰</u>	<u>300⁰⁰</u>
MANIFOLD		@	
		@	
		@	
TOTAL			<u>1607⁴⁵</u>

CHARGE TO: Carmen Schmitt

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>8 5/8</u>	<u>1- 8 5/8 rubber plug</u>	<u>105⁰⁰</u>
	<u>Texas Patt G. Shoe</u>	@ <u>supplied</u>
	<u>Insert</u>	@ <u>by</u>
	<u>2- Cent</u>	@ <u>Customer</u>
	<u>1- Basket</u>	@
TOTAL		<u>105⁰⁰</u>

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TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Steven Craig

PRINTED NAME _____