

Operator Name: IA Operating, Inc. Lease Name: Jaqueline Well #: 8-1
 Sec. 8 Twp. 14 S. R. 20 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Geologist's Well Report, Dual Induction Log, Microresistivity Log, Dual Compensated Porosity Log,	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1483'</td> <td>+700</td> </tr> <tr> <td>Topeka</td> <td>3194'</td> <td>-1011</td> </tr> <tr> <td>Heeber Shale</td> <td>3433'</td> <td>-1250</td> </tr> <tr> <td>Toronto</td> <td>3454'</td> <td>-1271</td> </tr> <tr> <td>Lansing</td> <td>3472'</td> <td>-1289</td> </tr> <tr> <td>Arbuckle</td> <td>3831'</td> <td>-1648</td> </tr> <tr> <td>Total Depth</td> <td>3914'</td> <td>-1731</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	1483'	+700	Topeka	3194'	-1011	Heeber Shale	3433'	-1250	Toronto	3454'	-1271	Lansing	3472'	-1289	Arbuckle	3831'	-1648	Total Depth	3914'	-1731
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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 Casing	12 1/4"	8 5/8"	23#	235'	Common	165	3% cc, 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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone		60/40 Poz	225	6% gel, 1/4 FLO_SEAL

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 _____

RECEIVED
 SEP 1 0 2005
 KCC WICHITA

ALLIED CEMENTING CO., INC. 20043

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: Oakley

DATE <u>8-23-05</u>	SEC. <u>8</u>	TWP. <u>14^s</u>	RANGE <u>20^w</u>	CALLED OUT	ON LOCATION <u>6:45 AM</u>	JOB START <u>7:15 AM</u>	JOB FINISH <u>10:45 AM</u>
LEASEE <u>Jacqueline</u>		WELL # <u>8-1</u>		LOCATION <u>Ellis 65-6W-N.S.</u>		COUNTY <u>Ellis</u>	STATE <u>Kan</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR MunFin Dals Co #16

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 3915'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 XH DEPTH 3800'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT

AMOUNT ORDERED 225-69/40 pur

6% Cel, 1/4" Flo-Seal

COMMON	<u>135</u> SKS	@	<u>8.70</u>	<u>1,174.50</u>
POZMIX	<u>90</u> SKS	@	<u>4.70</u>	<u>423.00</u>
GEL	<u>11</u> SKS	@	<u>14.00</u>	<u>154.00</u>
CHLORIDE		@		
ASC		@		
	<u>Flo-Seal 56#</u>	@	<u>1.70</u>	<u>95.20</u>
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>238</u> SKS	@	<u>1.60</u>	<u>380.80</u>
MILEAGE	<u>64</u> per SK/mile			<u>642.60</u>
TOTAL				<u>2,870.10</u>

EQUIPMENT

PUMP TRUCK CEMENTER Walt

102 HELPER _____

BULK TRUCK

315 DRIVER Jarrod

BULK TRUCK

_____ DRIVER _____

RECEIVED

SEP 1 2005

KCC WICHITA

REMARKS:

<u>25</u> SKS	<u>2</u>	<u>3800'</u>
<u>25</u> SKS	<u>2</u>	<u>1500'</u>
<u>100</u> SKS	<u>2</u>	<u>850'</u>
<u>40</u> SKS	<u>2</u>	<u>280'</u>
<u>10</u> SKS	<u>2</u>	<u>40'</u>
<u>10</u> SKS	<u>in</u>	<u>M.H.</u>
<u>15</u> SKS	<u>in</u>	<u>R.H.</u>

Thank You

CHARGE TO: I. A. Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>750.00</u>
EXTRA FOOTAGE	@	
MILEAGE	<u>45-mile</u>	@ <u>5.00</u> <u>225.00</u>
MANIFOLD	@	
	@	
	@	
TOTAL		<u>975.00</u>

PLUG & FLOAT EQUIPMENT

	<u>8 5/8</u>	
<u>1 - D.H. Plug</u>	@	<u>35.00</u>
	@	
	@	
	@	
	@	
TOTAL		<u>35.00</u>

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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Andy Dunkel

Andy Dunkel
PRINTED NAME