

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

RECEIVED  
KANSAS CORPORATION COMMISSION  
Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

23 2007

7/20/08

Operator: License # 32912  
Name: Carroll Energy, LLC  
Address: 200 Arco Place - Suite 230 - Box 149  
City/State/Zip: Independence, KS 67301  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Tim Carroll  
Phone: (620) 332-1600  
Contractor: Name: L & S Well Service  
License: 33374  
Wellsite Geologist: \_\_\_\_\_

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API No. 15 - 15-133-26892-00-00  
15-133-26892-00-00

County: Neosho  
C. NW. NW. NE Sec. 2 Twp. 27 S. R. 20 E.  East  West  
360 feet from S / N (circle one) Line of Section  
2280 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one)  NE  SE  NW  SW  
Lease Name: GOFF DON Well #: 2-C1

Field Name: HUMBOLDT-CHANUTE  
Producing Formation: Cherokee Coals

Elevation: Ground: 995 Kelly Bushing: \_\_\_\_\_  
Total Depth: 925 Plug Back Total Depth: 910

Amount of Surface Pipe Set and Cemented at 22.5 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.

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

KCC  
JUL 20 2007  
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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. \_\_\_\_\_

4/20/2007 4/21/2007 4/27/2007  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
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: Vice Operating Manager Date: 7/20/2007

Subscribed and sworn to before me this 20 day of July,  
20 07

Notary Public: Chelsea L Carr  
Date Commission Expires: 3-28-2011

**CHELSEA L. CARR**  
Notary Public - State of Kansas  
My Appt. Expires 3-28-2011

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