

Note: Well intended as "Kircher" #5-9-16-25
Land changed ownership

ORIGINAL

UPDATED / REVISED

8/24/05

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

(N 38* 40.358', W 94* 39.224')

Operator: License # 32294
Name: Osborn Energy, L.L.C.
Address: 24850 Farley 102' N of:
City/State/Zip: Bucyrus, Kansas 66013
Purchaser: Akawa Natural Gas, L.L.C.
Operator Contact Person: Steve Allee
Phone: (913) 533-9900
Contractor: Name: Susie Glaze dba Glaze Drilling Co.
License: 5885
Wellsite Geologist: (s) Rex Ashlock
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. 195,304-C (C-28,554)
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
6/17/2005 8/16/05 8/18/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

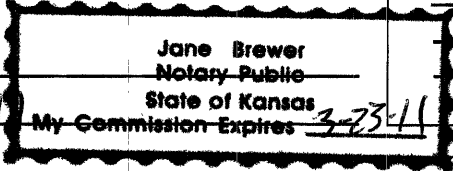
API No. 15 - 121-28081 - 00-00
County: Miami
SE SW NW Sec. 9 Twp. 16 S. R. 25 East West
2208 feet from S / N (circle one) Line of Section
990 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Abney Well #: 5-9-16-25
Field Name: Louisburg
Producing Formation: (s) South Mound, Summit, & Mulky
Elevation: Ground: 1075 Kelly Bushing: -----
Total Depth: 620' Plug Back Total Depth: -----
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set None Feet
If Alternate II completion, cement circulated from 468'
feet depth to Surface w/ 155 sx cmt.

Drilling Fluid Management Plan ALT II WNM
(Data must be collected from the Reserve Pit) 5-4-07
Chloride content N/A ppm Fluid volume 500+/- bbls
Dewatering method used evaporation
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]
For Osborn Energy, L.L.C.
Title: Agent Date: Apr 25, 2007
Subscribed and sworn to before me this 25th day of April,
2007
Notary Public: [Signature]
Date Commission Expires: 3-23-2011
My Commission Expires 3-23-11



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
APR 30 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Osborn Energy, L.L.C. Lease Name: Abney Well #: 5-9-16-25
 Sec. 9 Twp. 16 S. R. 25 East West County: Miami

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 (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken Yes <input checked="" type="checkbox"/> No Electric Log Run Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run: None	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log Name</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">Sample Datum</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum			
Log Name	Formation (Top), Depth and Datum	Sample Datum					

Driller's log attached

CASING RECORD New <input type="checkbox"/> Used <input checked="" type="checkbox"/>							
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 1/2"	10 1/2"	NA	20'	Portland	6	None
Production	8 3/4"	5 1/2"	15.50	468'	Portland	155	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
None	None	None	

TUBING RECORD	Size Will run 2 3/8" tubing and set at 505' +/-	Set At None	Packer At None	Liner Run <input checked="" type="checkbox"/> Yes 4 1/2" perf'd liner from 453-620
Date of First, Resumed Production, SWD or Enhr.		Producing Method		
		Flowing <input type="checkbox"/>	Pumping <input checked="" type="checkbox"/>	Gas Lift <input type="checkbox"/>
		Other (Explain) None		
Estimated Production Per 24 Hours	Oil Bbls. None	Gas Mcf NA	Water Bbls. NA	Gas-Oil Ratio None

Disposition of Gas	METHOD OF COMPLETION
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled
<input type="checkbox"/> Other (Specify) _____	

Gas to be sold as soon as gas line in place.

468-620 RECEIVED
KANSAS CORPORATION COMMISSION

APR 30 2007

CONSERVATION DIVISION
WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 4051
 LOCATION Ottawa
 FOREMAN Alan Mado

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8.18.05	2642	Abney #5-9-16-25	9	16	25	M
CUSTOMER Canary Resources			TRUCK #			
MAILING ADDRESS % Osborn Energy			DRIVER		TRUCK #	
CITY			DRIVER		TRUCK #	
STATE			DRIVER		TRUCK #	
ZIP CODE			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	
			DRIVER		TRUCK #	

JOB TYPE fill up HOLE SIZE 9 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT 3 1/2
 CASING DEPTH 4165 DRILL PIPE _____ TUBING 1" OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE 2 BPM

REMARKS: Established rate. Mixed & pumped 29 gal down
1" casing followed by 1555x Portland "A", 29 gal
circulated cement to surface pulled 1" out & topped
off hole. 1555x total.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE #368		765.00
5406	35	MILEAGE #368		87.50
5407	min	non mileage #122		240.00
				53.04
1118 B	8	premium gel		1482.00
1104	152			
PAID #4431979108				
OVER PAID BY \$3116				
RECEIVED				
KANSAS CORPORATION COMMISSION				
APR 30 2007				
CONSERVATION DIVISION				
WICHITA, KS				2627.54
SALES TAX				100.54
ESTIMATED TOTAL				2728.08

AUTHORIZATION _____ TITLE 199145 Alan Mado DATE 2728