

JUL 15 2005

Form ACO-1
September 1999
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

CONSERVATION DIVISION
WICHITA, KS

WELL HISTORY - DESCRIPTION OF WELL & LEASE
CONFIDENTIAL

Operator: License # 3532
Name: CMX, Inc.
Address: 1551 N. Waterfront Parkway, Suite 150
City/State/Zip: Wichita, KS 67206
Purchaser: Lumen Energy
Operator Contact Person: Douglas H. McGinness II
Phone: (316) 269-9052
Contractor: Name: Duke Drilling Co., Inc.
License: 5929

KCC

JUL 14 2005

CONFIDENTIAL

Wellsite Geologist: Ken LeBlanc
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

<u>4/5/05</u>	<u>4/13/05</u>	<u>5/16/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22870-0000
County: Barber
C NE SE Sec. 9 Twp. 30 S. R. 11 East West
1980 feet from (S) N (circle one) Line of Section
660 feet from (E) W (circle one) Line of Section

ORIGINAL

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Connors Trust Well #: 1

Field Name: Harding
Producing Formation: Tarkio Sand
Elevation: Ground: 1820' Kelly Bushing: 1830'
Total Depth: 3930' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 332 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) **ALTI WHM 7/17/07**
Chloride content _____ ppm Fluid volume 320 bbls

Dewatering method used Haul off
Location of fluid disposal if hauled offsite: _____

Operator Name: Bemco
Lease Name: Mac License No.: 32613
Quarter _____ Sec. 7 Twp. 32 S. R. 11 East West
County: Barber Docket No.: CD-78217

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: President Date: 7/11/05

Subscribed and sworn to before me this 11th day of July, 2005.

Notary Public: Donna L. May-Murray

Date Commission Expires: 2/7/08

KCC Office Use ONLY
483
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

DONNA L. MAY-MURRAY
Notary Public - State of Kansas
My Appt. Expires 2/7/08

JUL 15 2005

CONFIDENTIAL

Side Two

Operator Name: CMX, Inc. Lease Name: Connors Trust Well #: 1
 Sec. 9 Twp. 30 S. R. 11 East West County: Barber CONSERVATION DIVISION
 WICHITA, KS

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:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Red Eagle	2607	-780
Indian Cave Sst	2745	-918
Stotler	2924	-1097
Tarkio Sand	2934	-1107
Topeka	3363	-1536
Oread	3621	-1794
Heebner	3679	-1852
Lansing	3878	-2051

Bond log/DI/Density/Geo

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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	12-1/4"	8-5/8"	23#	332'	60/40 Pozmix	300	3% cc, 2% gel
Production	7-7/8"	4-1/2"	10.5#	3929'	Class H	300	10% salt, 10% gip

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
4	2636'-2643'	None	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		None			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
5/26/05		<input checked="" 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
		250			

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.

PO. BOX 34
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

CONFIDENTIAL

ORIGINAL

 * I N V O I C E *

Invoice Number: 096529

Invoice Date: 04/19/05

RECEIVED
 KANSAS CORPORATION COMMISSION

KCC
 JUL 14 2005

JUL 1

CONSERVATION DIVISION
 WICHITA KS

Sold CMX, Inc.
 To: 1026 Union Center
 Wichita, KS
 67202

CONFIDENTIAL

Cust I.D.....: CMX
 P.O. Number...: Conners TR 1-9
 P.O. Date.....: 04/19/05

Due Date.: 05/19/05

Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common "H"	325.00	SKS	10.0000	3250.00	T
FL-160	244.00	LBS	8.4000	2049.60	T
GypSeal	31.00	SKS	18.2500	565.75	T
Gas Block	183.00	LBS	7.0000	1281.00	T
Salt	35.00	SKS	7.5000	262.50	T
KolSeal	1950.00	LBS	0.6000	1170.00	T
Mud Clean	500.00	GAL	1.0000	500.00	T
ClaPro	6.00	GAL	22.9000	137.40	T
Handling	435.00	SKS	1.5000	652.50	E
Mileage (20)	20.00	MILE	23.9300	478.60	E
435 sks @\$.05.5 per sk per mi					
Prod. casing	1.00	JOB	1260.0000	1260.00	E
Mileage pmp trk	20.00	MILE	4.5000	90.00	E
Head Rental	1.00	PER	75.0000	75.00	E
AFU Guide Shoe	1.00	EACH	125.0000	125.00	T
Latch Down	1.00	EACH	300.0000	300.00	T
Baskets	3.00	EACH	116.0000	348.00	T
Turbolizers	4.00	EACH	55.0000	220.00	T

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$1276.53
 ONLY if paid within 30 days from Invoice Date

Subtotal: 12765.35
 Tax.....: 643.18
 Payments: 0.00
 Total....: 13408.53

CONFIDENTIAL

ALLIED CEMENTING CO., INC.

20396

ORIGINAL

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Medicine Lodge

DATE <u>4-13-05</u>	SEC. <u>9</u>	TWP. <u>30S</u>	RANGE <u>11W</u>	CALLED OUT <u>7:00</u>	ON LOCATION <u>8:30</u>	JOB START <u>11:18 am</u>	JOB FINISH <u>2:22 pm</u>
CONCRETE TRUST LEASE		WELL # <u>1-9</u>	LOCATION <u>42 & ISABEL RD, 15, 1E</u>		COUNTY <u>CANDLER</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1/2 S, W INTO</u>				

CONTRACTOR DUKE S
 TYPE OF JOB PRODUCTION CASING
 HOLE SIZE 7 7/8 T.D. 3930
 CASING SIZE 4 1/2 DEPTH 3932
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH 3930
 TOOL DEPTH
 PRES. MAX 1650 MINIMUM 100
 MEAS. LINE SHOE JOINT 37.60
 CEMENT LEFT IN CSG. 37.60
 PERFS.
 DISPLACEMENT 63 1/2 bbl. 2% KCL

OWNER CMX, INC.

CEMENT
 AMOUNT ORDERED 325 SX H, 10% GYP, 10% SALT, 6* KCL SEAL, 18% FL-160, .6% GAS BLOCK, 6 gal. KCL, 500 GAL. MUD CLEAN

EQUIPMENT
 PC CEMENTER BILL MEADCO
#368-265 HELPER DAVID WEST
 BULK TRUCK
#363 DRIVER LARRY GOLDBERRY
 BULK TRUCK
 # DRIVER

COMMON	<u>325 H</u>	@	<u>10.00</u>	<u>3250.00</u>
POZMIX		@		
GEL		@		
CHLORIDE		@		
ASC		@		
FL-160	<u>244 #</u>	@	<u>8.40</u>	<u>2049.60</u>
Gypseal	<u>31</u>	@	<u>18.25</u>	<u>565.75</u>
Gas Block	<u>183 #</u>	@	<u>2.00</u>	<u>1281.00</u>
Salt	<u>35</u>	@	<u>7.50</u>	<u>262.50</u>
Kal Seal	<u>1950 #</u>	@	<u>.60</u>	<u>1170.00</u>
Mud Clean	<u>500 gal.</u>	@	<u>1.00</u>	<u>500.00</u>
Clapro	<u>6 gal.</u>	@	<u>22.90</u>	<u>137.40</u>
HANDLING	<u>435</u>	@	<u>1.50</u>	<u>652.50</u>
MILEAGE	<u>20 x 4.35 x .055</u>			<u>478.60</u>
TOTAL				<u>10347.35</u>

REMARKS:

PIPE ON BOTTOM, BREAK CIRCULATION, PUMP 300 GAL, MUD CLEAN, PLUG RAT AND MOUSE, PUMP 300 SX H + 10% GYP + 10% SALT + 6* KCL SEAL + 18% FL-160 + .6% GAS BLOCK, STOP PUMPS, LASH PUMP AND LINES, RELEASE ALL, START DISPLACEMENT WITH 2% KCL WATER, SLOW RATE, BUMP PLUG, FLOAT HEZD

SERVICE

DEPTH OF JOB	<u>3932'</u>		
PUMP TRUCK CHARGE			<u>1260.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>20</u>	@	<u>4.50</u> <u>90.00</u>
MANIFOLD HEAD RENT		@	<u>75.00</u> <u>75.00</u>
		@	
		@	
TOTAL <u>1425.00</u>			

CHARGE TO: CMX, INC.
 STREET _____
 CITY _____ STATE _____

RECEIVED
 KANSAS CORPORATION COMMISSION
 JUL 15 2005

CONSERVATION DIVISION
 WICHITA, KS

PLUG & FLOAT EQUIPMENT

<u>4 1/2"</u>			
1 AFU GUIDE SHOES	@	<u>125.00</u>	<u>125.00</u>
1 LATCH DOWN PLUG	@	<u>300.00</u>	<u>300.00</u>
3 BASKETS	@	<u>116.00</u>	<u>348.00</u>
4 TUGO LIZOALS	@	<u>55.00</u>	<u>220.00</u>
	@		
TOTAL <u>993.00</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 ~~1425.00~~
 DISCOUNT ~~1425.00~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING

SIGNATURE Alan Vratil

Alan Vratil
 PRINTED NAME

ALLIED CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566

CONFIDENTIAL

ORIGINAL

* I N V O I C E *

Invoice Number: 096490

Invoice Date: 04/13/05

Sold CMX, Inc.
To: 1026 Union Center
Wichita, KS
67202

RECEIVED
KANSAS CORPORATION COMMISSION
JUL 15 2005
CONSERVATION DIVISION
WICHITA, KS

Cust. I.D.: CMX
P.O. Number...: Conners TR #1
P.O. Date....: 04/13/05

Due Date.: 05/13/05

Terms....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	180.00	SKS	8.3000	1494.00	T
Pozmix	120.00	SKS	4.5000	540.00	T
Gel	6.00	SKS	13.0000	78.00	T
Chloride	9.00	SKS	36.0000	324.00	T
Handling	315.00	SKS	1.5000	472.50	E
Mileage (20)	20.00	MILE	17.3300	346.60	E
315 sks @ \$.05.5 per sk per mi					
Surface	1.00	JOB	625.0000	625.00	E
Extra Footage	32.00	PER	0.5500	17.60	E
Mileage pmp trk	20.00	MILE	4.5000	90.00	E
TWP	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 404.27
ONLY if paid within 30 days from Invoice Date

Subtotal:	4042.70
Tax.....:	156.93
Payments:	0.00
Total....:	4199.63

CONFIDENTIAL

ALLIED CEMENTING CO., INC.

ORIGINAL

14415

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Mr Bond
4-6-05
JOB START 1:00AM JOB FINISH 1:30AM
COUNTY Barber STATE K

DATE <u>4-6-05</u>	SEC <u>9</u>	TWP. <u>30</u>	RANGE <u>11</u>	CALLED OUT <u>7:00 PM</u>	ON LOCATION <u>10:30 PM</u>
LEASE <u>Conners Trust</u>	WELL # <u>1</u>	LOCATION <u>Isabel Rd + 42 - 13, 1E, 25</u>			<u>W/into</u>
OLD OR <u>NEW</u> (Circle one)					

CONTRACTOR Dike #5
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4" T.D. 335'
 CASING SIZE 8 5/8 New 23# DEPTH 332'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 20 1/4 bbls

OWNER Same
 CEMENT AMOUNT ORDERED 300 lb 60/40 390 cc
2 3/4 gal

EQUIPMENT
 PUMP TRUCK # 181 CEMENTER Turn D
 HELPER Don Nimitt
 BULK TRUCK # 344-188 DRIVER Don August
 BULK TRUCK # _____ DRIVER _____

COMMON <u>130 gal</u>	@ <u>8.30</u>	<u>1,494.00</u>
POZMIX <u>120 gal</u>	@ <u>4.50</u>	<u>540.00</u>
GEL <u>6 gal</u>	@ <u>13.00</u>	<u>78.00</u>
CHLORIDE <u>7 gal</u>	@ <u>36.00</u>	<u>324.00</u>
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>315 gal</u>	@ <u>1.50</u>	<u>472.50</u>
MILEAGE <u>315 MI SS 20</u>		<u>346.60</u>
		TOTAL <u>3255.10</u>

REMARKS:

Ran 332' of 8 5/8" cas. Broke circulation.
Mixed 300 lb 60/40 390 cc, 2 3/4 gal
Released plug. Displaced with fresh
H₂O.
Cement did circulate
(Cement in cellar)
1 hour

SERVICE

DEPTH OF JOB <u>332'</u>		
PUMP TRUCK CHARGE		<u>625.00</u>
EXTRA FOOTAGE <u>32</u>	@ <u>55</u>	<u>17.60</u>
MILEAGE <u>20</u>	@ <u>4.50</u>	<u>90.00</u>
PLUG 1- <u>8 5/8 Twp</u>	@ <u>55.00</u>	<u>55.00</u>
_____	@ _____	_____
_____	@ _____	_____
		TOTAL <u>787.60</u>

CHARGE TO: CMX Inc.
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
 KANSAS CORPORATION COMMISSION
 JUL 15 2005
 CONSERVATION DIVISION
 WICHITA, KS

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 [Signature]

[Signature]
 PRINTED NAME