

**CONFIDENTIAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 5144  
Name: Mull Drilling Company, Inc.  
Address: P.O. Box 2758  
City/State/Zip: Wichita KS 67201-2758  
Purchaser: N/A  
Operator Contact Person: Mark Shreve  
Phone: (316) 264-6366  
Contractor: Name: WW Drilling, LLC  
License: 33575  
Wellsite Geologist: Kevin Kessler

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. \_\_\_\_\_

4/26 /06 5/4/06 5/4/06  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 135-24494-00-00  
County: Ness  
NE NW SE NW Sec. 32 Twp. 16 S. R. 23  East  West  
1471 feet from S (N) (circle one) Line of Section  
1750 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE (NW) SW  
Lease Name: Blocksome Well #: 1-32  
Field Name: Wildcat

Producing Formation: N/A  
Elevation: Ground: 2462' Kelly Bushing: 2467'  
Total Depth: 4580' Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at 228 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.

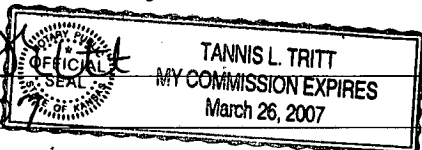
**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit) *ALT II PEA a Hm*  
*7-17-07*  
Chloride content 29,000 ppm Fluid volume 975 bbls  
Dewatering method used Evaporation  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ 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: \_\_\_\_\_  
Title: President/COO Date: 6/8/06

Subscribed and sworn to before me this 8th day of June  
20 06  
Notary Public: Tannis L. Tritt  
Date Commission Expires: 3-26-07



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

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Operator Name: Mull Drilling Company, Inc. Lease Name: Blocksome Well #: 1-32  
 Sec. 32 Twp. 16 S. R. 23  East  West County: Ness

**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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(Submit Copy)</i><br><br>List All E. Logs Run:<br><br>ELI: CNL/CDL PE; DIL; Micro & Sonic | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br>Name Top Datum<br><br>See Attachment "A" |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|

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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 | # Sacjs Used | Type and Percent Additives |
| Surface                                                                             | 12 1/4"           | 8 5/8"                    | 20#               | 228'          | 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<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |
|                                                                                                                                                                  |                  |                |             |                            |

| 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)          |       |
|                |                                             |  |                                             | Depth |
|                |                                             |  |                                             |       |
|                |                                             |  |                                             |       |
|                |                                             |  |                                             |       |

|                                                  |           |                                                                                                                                                               |             |               |                                                                    |
|--------------------------------------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------|--------------------------------------------------------------------|
| 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                 |                               | METHOD OF COMPLETION                     |                                     | Production Interval            |                                       |
| <input type="checkbox"/> Vented    | <input type="checkbox"/> Sold | <input type="checkbox"/> Used on Lease   | <input type="checkbox"/> Open Hole  | <input type="checkbox"/> Perf. | <input type="checkbox"/> Dually Comp. |
| <i>(If vented, Submit ACO-18.)</i> |                               | <input type="checkbox"/> Other (Specify) | <input type="checkbox"/> Commingled |                                |                                       |

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**ATTACHMENT TO ACO-1  
Well Completion Form**

**Mull Drilling Company, Inc.  
Blocksome #1-32  
NE NW SE NW 32-16S-23W  
Ness County, Kansas  
API #: 15-135-24494**

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**LOG TOPS**

| <b>FORMATION</b>   | <b>DEPTH</b> | <b>SUBSEA</b> |
|--------------------|--------------|---------------|
| Anhydrite          | 1812         | (+ 655)       |
| Base Anhydrite     | 1846         | (+ 621)       |
| Heebner Shale      | 3865         | (- 1398)      |
| Lansing            | 3906         | (- 1439)      |
| Pawnee             | 4306         | (- 1839)      |
| Fort Scott         | 4393         | (- 1926)      |
| Cherokee Shale     | 4417         | (- 1950)      |
| Cherokee Sandstone | 4482         | (- 2015)      |
| Mississippian      | 4548         | (- 2081)      |
| RTD                | 4580         | (- 2113)      |
| LTD                | 4584         | (- 2117)      |

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# ALLIED CEMENTING CO., INC.

23571

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

SERVICE POINT:

Near city

|                                |                |                    |                                            |                          |                           |                         |                          |
|--------------------------------|----------------|--------------------|--------------------------------------------|--------------------------|---------------------------|-------------------------|--------------------------|
| DATE <u>5-4-06</u>             | SEC. <u>32</u> | TWP. <u>16</u>     | RANGE <u>23</u>                            | CALLED OUT <u>4:00am</u> | ON LOCATION <u>5:15am</u> | JOB START <u>5:20am</u> | JOB FINISH <u>8:15am</u> |
| LEASE <u>Blockson</u>          |                | WELL # <u>1-32</u> | LOCATION <u>Near city 11 W 1/2 E 1/4 S</u> |                          | COUNTY <u>Abco</u>        | STATE <u>KS</u>         |                          |
| OLD OR <u>NEW</u> (Circle one) |                |                    |                                            |                          |                           |                         |                          |

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CONTRACTOR W-43 Only #2

TYPE OF JOB Rotary Aug

HOLE SIZE 7 7/8 T.D. 4580

CASING SIZE 8 7/8 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT AMOUNT ORDERED

265 6 7/8 6 7/8

1/4 = 720 Seal

|                 |            |   |              |                |
|-----------------|------------|---|--------------|----------------|
| COMMON          | <u>159</u> | @ | <u>9.60</u>  | <u>1526.40</u> |
| POZMIX          | <u>106</u> | @ | <u>5.20</u>  | <u>551.20</u>  |
| GEL             | <u>14</u>  | @ | <u>15.00</u> | <u>210.00</u>  |
| CHLORIDE        |            | @ |              |                |
| ASC             |            | @ |              |                |
| <u>720 Seal</u> | <u>66</u>  | @ | <u>18.00</u> | <u>1134.00</u> |

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|          |            |   |              |                |
|----------|------------|---|--------------|----------------|
| HANDLING | <u>281</u> | @ | <u>1.70</u>  | <u>477.70</u>  |
| MILEAGE  | <u>281</u> | @ | <u>16-07</u> | <u>314.72</u>  |
| TOTAL    |            |   |              | <u>3234.82</u> |

**EQUIPMENT**

PUMP TRUCK CEMENTER Mike

# 224 HELPER J. Williams

BULK TRUCK

# 342 DRIVER Steve

BULK TRUCK

# DRIVER

**REMARKS:**

|           |             |
|-----------|-------------|
| <u>50</u> | <u>1860</u> |
| <u>80</u> | <u>1140</u> |
| <u>50</u> | <u>720</u>  |
| <u>40</u> | <u>240</u>  |
| <u>20</u> | <u>60</u>   |
| <u>15</u> | <u>RH</u>   |
| <u>10</u> | <u>MH</u>   |

Thanks

**SERVICE**

DEPTH OF JOB 1860

PUMP TRUCK CHARGE 730.00

EXTRA FOOTAGE @

MILEAGE 16 @ 500 8000

MANIFOLD @

@

@

TOTAL 8100

**PLUG & FLOAT EQUIPMENT**

@

@

@

@

@

TOTAL

CHARGE TO: Mull Only

STREET

CITY STATE ZIP

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

*[Handwritten Signature]*

PRINTED NAME