

Owwo

For KCC Use: Effective Date: 6-7-08 District # 4 SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1 October 2007 Form must be Typed Form must be Signed All blanks must be Filled

NOTICE OF INTENT TO DRILL Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date: June 30 2008 month day year

OPERATOR: License# 33778 Name: Shoreline Energy Partners, LLC Address 1: 453 S. Webb Rd #100 Address 2: City: Wichita State: KS Zip: 67207 Contact Person: Hi Lewis Phone: (316) 214-1738 CONTRACTOR: License# 33755 Name: Quality Plus Oilfield Services, LLC

Spot Description: ne4 - sw4 - se4 - Sec. 29 Twp. 5 S. R. 20 990 feet from N / S Line of Section 1,650 feet from E / W Line of Section

Is SECTION: Regular Irregular? County: Phillips Lease Name: Noel Well #: 4 Field Name: Ray Is this a Prorated / Spaced Field? Yes No Target Formation(s): Reagan Sand

Well Drilled For: Oil Gas Seismic Other Well Class: Enh Rec Storage Disposal Infield Pool Ext Wildcat Other Type Equipment: Mud Rotary Air Rotary Cable

Nearest Lease or unit boundary line (in footage): 990' Ground Surface Elevation: 2,206 feet MSL Water well within one-quarter mile: Yes No Public water supply well within one mile: Yes No Depth to bottom of fresh water: 120' Depth to bottom of usable water: 1,000' Surface Pipe by Alternate: I II Length of Surface Pipe Planned to be set: 198' Length of Conductor Pipe (if any): Projected Total Depth: 3,620' Formation at Total Depth: Reagan Sand

If OWWO: old well information as follows: Operator: OXY USA, Inc. Well Name: Noel #4 Original Completion Date: 9/15/1948 Original Total Depth: 3,614'

Water Source for Drilling Operations: Well Farm Pond Other: Lease Salt Water DWR Permit #: Will Cores be taken? Yes No

Directional, Deviated or Horizontal wellbore? Yes No If Yes, true vertical depth: Bottom Hole Location: KCC DKT #:

AFFIDAVIT

RECEIVED KANSAS CORPORATION COMMISSION

MAY 30 2008

CONSERVATION DIVISION WICHITA, KS

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. It is agreed that the following minimum requirements will be met:

- 1. Notify the appropriate district office prior to spudding of well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within 120 DAYS of spud date.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5-21-08 Signature of Operator or Agent: Hi Lewis Title: President

For KCC Use ONLY API # 15 - 147-19114-00-02 Conductor pipe required None feet Minimum surface pipe required 198 feet per ALT. I II Approved by: [Signature] This authorization expires: 6-2-09 Spud date: Agent:

Remember to: File Drill Pit Application (form CDP-1) with Intent to Drill; File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days); Obtain written approval before disposing or injecting salt water. Well Not Drilled - Permit Expired Date: Signature of Operator or Agent:

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - 147-19114-00-02
 Operator: Shoreline Energy Partners, LLC
 Lease: Noel
 Well Number: 4
 Field: Ray
 Number of Acres attributable to well: _____
 QTR/QTR/QTR/QTR of acreage: ne4 - sw4 - se4 - _____

Location of Well: County: Phillips
 990 feet from N / S Line of Section
 1,650 feet from E / W Line of Section
 Sec. 29 Twp. 5 S. R. 20 E W

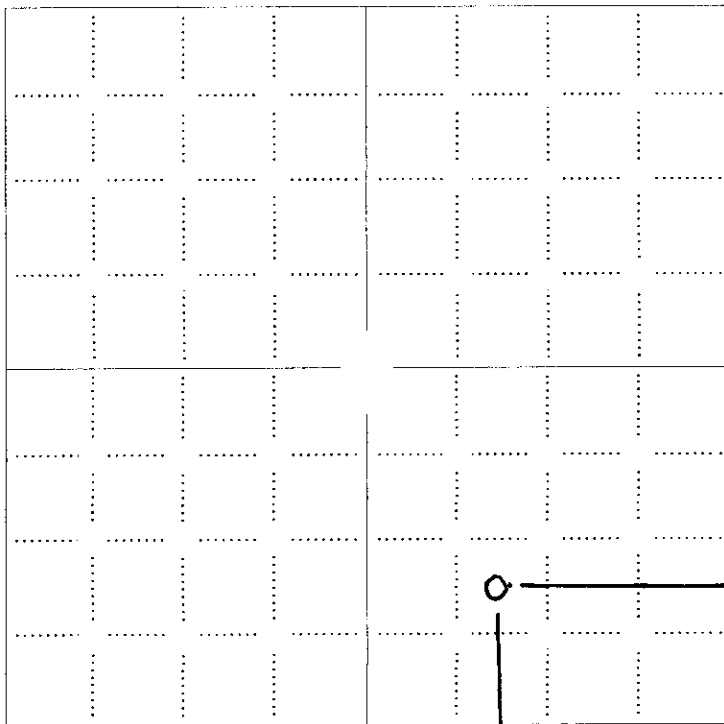
Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

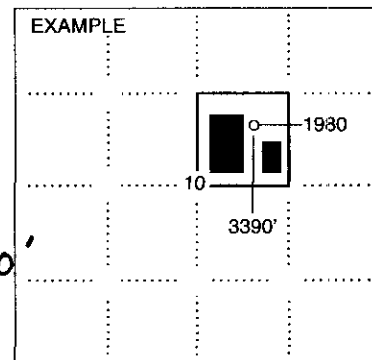
*(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)*



NOTE: In all cases locate the spot of the proposed drilling location.

990'

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAY 30 2008
 CONSERVATION DIVISION
 WICHITA, KS



SEWARD CO.


In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form GDP-1
April 2004
Form must be Typed

Submit in Duplicate

| | | |
|---|---|--|
| Operator Name: Shoreline Energy Partners, LLC | | License Number: 33778 |
| Operator Address: 453 S. Webb Rd. #100, Wichita, KS 67207 | | |
| Contact Person: Hi Lewis | | Phone Number: (316) 214-1738 |
| Lease Name & Well No.: Noel #4 | | Pit Location (QQQQ): ne4 sw4 se4 |
| Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small> | Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 120 (bbls) | Sec. 29 Twp. 5 R. 20 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 990 Feet from <input type="checkbox"/> North <input checked="" type="checkbox"/> South Line of Section 1,650 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Phillips County |
| Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small> |
| Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Artificial Liner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | How is the pit lined if a plastic liner is not used? |
| Pit dimensions (all but working pits): 15 Length (feet) 10 Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: 5 (feet) <input type="checkbox"/> No Pit | | |
| If the pit is lined give a brief description of the liner material, thickness and installation procedure. Plastic, 6 mm, dig pit & install before filling with water | | Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. Gauge fluid level twice daily |
| Distance to nearest water well within one-mile of pit N/A feet Depth of water well _____ feet | Depth to shallowest fresh water 110 feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input checked="" type="checkbox"/> KDWR | |
| Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No | Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: salt water Number of working pits to be utilized: 1 Abandonment procedure: haul fluids to disposal Drill pits must be closed within 365 days of spud date. | |
| I hereby certify that the above statements are true and correct to the best of my knowledge and belief. | | RECEIVED KANSAS CORPORATION COMMISSION |
| 5-21-2008 Date |  Signature of Applicant or Agent | MAY 30 2008 CONSERVATION DIVISION WICHITA, KS |
| KCC OFFICE USE ONLY Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS <input type="checkbox"/> | | |
| Date Received: 5/30/08 Permit Number: _____ Permit Date: 5/30/08 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |

15-147-19114-00-02

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

STATE OF KANSAS -
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, KS 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

15-147-19114-00-01

API NUMBER 15-N/A
LEASE NAME Noel A
WELL NUMBER 4

TYPE OR PRINT
NOTICE: Fill out completely
and return to
Cons. Div. Office within
30 days.

990 Ft. from S Section Line
1650 Ft. from E Section Line
SEC. 29 TWP. 5S RGE. 20 (X) or (W)

LEASE OPERATOR OXY USA Inc.
ADDRESS P. O. Box 26100
PHONE# (405) 749-2309 Operators License #5447

COUNTY Phillips
Date Well Completed 9/15/48
Plugging Commenced 11/3/94
Plugging Completed 11/3/94

Character of Well Oil
(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on _____ (date)
by Carl Goodrow (KCC District Agent's name).

Is ACO-1 filed? No If not, is well log attached? No
Producing Formation Arbuckle Depth to Top 3596 Bottom 3606 T.D. 3614

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

| Formation | Content | From | To | Size | Put in | Pulled Out |
|-----------|---------|------|------|--------|--------|------------|
| Arbuckle | Oil | 3596 | 3606 | 8 5/8" | 198' | |
| | | | | 5 1/2" | 3610' | |
| | | | | | | |
| | | | | | | |

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set.

Perfed @ 1525' & 920' Mixed & pumped 50 sks 60/40 POZ w/10% added gel 1/4# Flocele & 100 # hulls down ann. Shut in press 100#. Mixed & pumped 50sks 60/40 POZ 10% gel 1/4# Flocele & 100# hulls. followed by 125 sks gel, followed by 125 sks 60/40 POZ 10% gel 1/4# Flocele w/250# hulls. Shut in press 300# & holding.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor J. W. Gibson Well Service License No. 5866
Address 505 W. Commercial, Logan KS 67646
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: OXY USA Inc.

STATE OF OKLAHOMA COUNTY OF OKLAHOMA, ss.

Jerry Ledlow (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) [Signature]
(Address) P. O. Box 26100, OKC, OK 73126-0100

SUBSCRIBED AND SWORN TO before me this 7th day of November, 19 94

Jerry L. Ledlow
Notary Public

My Commission Expires: 8-21-96

RECEIVED
STATE CORPORATION COMMISSION
11-10-94
NOV 10 1994 Form CP-4
Revised 05-88

CONSERVATION DIVISION