

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4567
Name: D.E. Exploration, Inc.
Address: P.O. Box 128
City/State/Zip: Wellsville, KS 66092
Purchaser: Plain's Marketing, L.P.
Operator Contact Person: Douglas G. Evans, President
Phone: (785) 882-4057
Contractor: Name: Finney Drilling Company
License: 5989
Wellsite Geologist: None

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. _____

7/20/04 7/23/04 7/23/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031-22,023-0000
County: Coffey
NE SE SW SE Sec. 33 Twp. 22 S. R. 16 East West
600' feet from S N (circle one) Line of Section
1350' feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Johnson Well #: RI-2
Field Name: Neosho Falls-LeRoy

Producing Formation: Squirrel
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 1055' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at 42.05' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1045.0'
feet depth to Top w/ 139 sx cmt.

Drilling Fluid Management Plan As per WPA 8-20-07
(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: Douglas G. Evans
Title: President Date: September 27, 2004

Subscribed and sworn to before me this 28th day of September,
20 04.

Notary Public: Stacy J. Thyer

Date Commission Expires: 3-31-2007

NOTARY PUBLIC
STATE OF KANSAS
STACY J. THYER
My Appt. Exp. 3-31-07

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: D.E. Exploration, Inc. Lease Name: Johnson Well #: RI-2
 Sec. 33 Twp. 22 S. R. 16 East West County: Coffey

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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	11 5/8"	7"	19	42.05'	Special	42	Service Co.
Production	5 5/8"	2 7/8"	6.5	1045.0'	Special	139	Service Co.

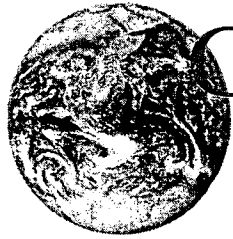
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
21	1018.0'-1028.0'	2" DML RTG	1018.0'
			1028.0'

TUBING RECORD		Size 2 7/8"	Set At 1045.0'	Packer At No	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. NA			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

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.)
 Other (Specify) _____



CONSOLIDATED OIL WELL SERVICES, INC.

AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8676

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RECEIVED
KANSAS CORPORATION COMMISSION

JUL 09 2007

CONSERVATION DIVISION
WICHITA, KS

INVOICE DATE	INVOICE NO.
07/23/04	00191493

TERMS: Net 30 Days

A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

CONSOLIDATED OIL WELL SERVICES
3667 PAYSPIHERE CIRCLE
CHICAGO IL 60674

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D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.			
2355	0306	20	JOHNSON RI-2	07/20/2004	238			
ITEM NUMBER	DESCRIPTION			UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE	
5401S	CEMENT PUMP (SURFACE PIPE)			1.0000	550.0000	EA	550.00	
5406	MILEAGE CHARGE			45.0000	.0000	EA	.00	
5402	CASING FOOTAGE			42.0000	.0000	EA	.00	
5407A	TON MILEAGE DELIVERY			1.0000	65.0300	MI	65.03	
1110	GILSONITE (50#)			4.0000	20.3500	SK	81.40	
1111	GRANULATED SALT (80#)			100.0000	.2600	LB	26.00	
1118	PREMIUM GEL			1.0000	12.4000	SK	12.40	
1124	50/50 POZ CEMENT MIX			35.0000	6.9000	SK	241.50	
1102	CALCIUM CHLORIDE (50#)			1.0000	35.7000	SK	35.70	
5502C	80 VACUUM TRUCK (CEMENT)			1.5000	78.0000	HR	117.00	

PAID
8-9-04
#2570
\$10,074.99

GROSS INVOICE	TAX
1129.03	21.04

ORIGINAL INVOICE

PLEASE PAY
1150.07

KS-031-22023-0000



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AN INFINITY COMPANY

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RECEIVED
KANSAS CORPORATION COMMISSION

INVOICE DATE	INVOICE NO.
07/27/04	00191615

JUL 09 2007

CONSERVATION DIVISION
WICHITA, KS

TERMS: Net 30 Days
A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

CONSOLIDATED OIL WELL SERVICES
3667 PAYSHERE CIRCLE
CHICAGO IL 60674

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D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
2355	0448	20	JOHNSON RI-2	07/23/2004	241		
ITEM NUMBER	DESCRIPTION			UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401	CEMENT PUMPER			1.0000	710.0000	EA	710.00
5406	MILEAGE CHARGE			45.0000	2.3500	EA	105.75
1118	PREMIUM GEL			5.0000	12.4000	SK	62.00
4402	2 1/2" RUBBER PLUG			1.0000	15.0000	EA	15.00
1111	GRANULATED SALT (80#)			313.0000	2600	LB	81.38
1110	GILSONITE (50#)			13.0000	20.3500	SK	264.55
1124	50/50 POZ CEMENT MIX			111.0000	6.9000	SK	765.90
5407	BULK CEMENT DELIVERY/MIN BULK DEL			1.0000	225.0000	EA	225.00
5502C	80 VACUUM TRUCK (CEMENT)			3.0000	78.0000	HR	234.00
1401	HE 100 POLYMER			2.5000	36.7500	GA	91.88

PAID
16-9-04
#2570
\$10,074.99

GROSS INVOICE 2555.46	TAX 67.88
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ORIGINAL INVOICE

PLEASE PAY 2623.34
