

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: Plains Marketing
Operator Contact Person: Mark Shreve
Phone: (316) 264-6366
Contractor: Name: WW Drilling, LLC
License: 33575

Wellsite Geologist: Roger Martin
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. _____
3/27/06 4/7/06 4/19/06
Spud Date or Date Reached TD Completion Date or Recompletion Date

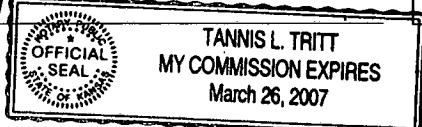
API No. 15 - 135-24372-00-00
County: Ness
Ap W/2 NW NE Sec. 8 Twp. 16 S. R. 26 East West
650 feet from S N (circle one) Line of Section
2108 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Johnson Well #: 1-8
Field Name: Wildcat
Producing Formation: Fort Scott and LKC "J"
Elevation: Ground: 2632' Kelly Bushing: 2637'
Total Depth: 4637' Plug Back Total Depth: 4577'
Amount of Surface Pipe Set and Cemented at 234 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2075 Feet
If Alternate II completion, cement circulated from 2075'
feet depth to surface w/ 240 sx cm.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *Alt II water 7-24-07*
Chloride content 14,700 ppm Fluid volume 590 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: 7/21/06
Subscribed and sworn to before me this 21st day of July,
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: Johnson Well #: 1-8
 Sec. 8 Twp. 16 S. R. 26 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 <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: ELI: CDL/CNL w/PE; DIL/Sonic & Micro Peak Wireline: Dual Spaced Cement Bond Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attachment "A"
--	--

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#	234'	Common	165	2% gel, 3% cc
Production	7 7/8"	4 1/2"	10.5#	4626'	SMD	180	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface-2075'	SMD	240	1/4# floseal

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>		Depth
4	4424' - 4429'	250 gal 15% MCA + 1000 gal 15% NEFE		
4	4149' - 4153'	250 gal 15% MCA		

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>4504'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>4/19/06</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. <u>100</u>	Gas Mcf <u>0</u>	Water Bbls. <u>7</u>	Gas-Oil Ratio <u>N/A</u>	Gravity <u>39.8</u>

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 _____

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

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**Mull Drilling Company, Inc.
Johnson #1-8
NW/4 NE/4 8-16S-26W
Ness County, Kansas
API #: 15-135-24372**

LOG TOPS

FORMATION	DEPTH	SUBSEA
Anhydrite	2057	+ 580
B/Anhydrite	2090	+ 547
Heebner	3883	- 1246
Toronto	3904	- 1267
Lansing	3924	- 1287
Stark	4167	- 1530
L/KC	4220	- 1583
Pawnee	4365	- 1728
Ft. Scott	4424	- 1787
Cherokee	4450	- 1813
B/Penn LS	4494	- 1857
Mississippian	4512	- 1875
RTD/LTD	4637	- 2000

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CHARGE TO: **MULL D&B, Co. INC.** **KCC**
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____ **JUL 21 2006**
CONFIDENTIAL

TICKET No 10025



PAGE 1 OF 2

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SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1-8	LEASE JOHNSON	COUNTY/PARISH NESS	STATE KS	CITY	DATE 4-7-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR WLD D&B	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATED	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 4 1/2" LOGGING	WELL PERMIT NO.	WELL LOCATION UTDA, 6-2W, 3W, WS		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
575		1			MILEAGE # 104	40	MT		4.00	160.00
578		1			PUMP SERVICE	1	JOB	4630	FT	1250.00
280		1			FROCHECK 21	1000	GAL		2.00	2000.00
400		1			GUARD SHOE	1	EA	4 1/2"	90.00	90.00
402		1			CONTRACTORS - REGULAR	2	EA		50.00	100.00
403		1			CEMENT BASKET	2	EA		230.00	460.00
404		1			PORT COUPLER TOAST # 62	1	EA	2064	FT	1950.00
409		1			TURBOLADERS	13	EA		62.00	806.00
410		1			TOP PLUG	1	EA		90.00	90.00
413		1			RODWALL SCALERS	22	EA		35.00	770.00
415		1			INSERT FLOTT COUPLER W/FOLLOW	1	EA		225.00	225.00
416		1			BOTTOM PLUG	1	EA		90.00	90.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x *Lony E. Smith*
 DATE SIGNED **4-7-06** TIME SIGNED **1400**
 AM PM

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#1	7991.00
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				#2	3396.90
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Subtotal	11,386.90
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		TAX ness 5.3%	495.95
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	11,882.85

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. This document hereby acknowledges receipt of materials and services. This document is valid only if signed by the customer.

SWIFT OPERATOR *Wayne Wilson* APPROVAL _____

Thank You!

04/18/2006 11:49 FAX 7197678994 MDC-CHEV_WELLS_CO MDC WICHITA 001/003

JOB LOG

SWIFT Services, Inc.

DATE 4-7-06 PAGE NO. 1

CUSTOMER: MOLL DRUG CO, INC. WELL NO: 1-8 LEASE: JOHNSON JOB TYPE: 4 1/2" LONGSTRUNG TICKET NO: 10025

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1400							WELL LOCATED
	1645							START 4 1/2" CASING TO WELL
								TD- 4637 SET# 4630
								TP- 4630 4 1/2" / FT 10.5
								ST- 42.17 R
								CONDUITS - 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 61 R
								CUT BSET - 3, 62
								POST COLLAR # 2064 TOP JT # 62
	1900							DEEP BALL - CALCULATE ROTATE
	2040	6	5			400		PUMP SPACER "
	2041	6	24			400		AMP FLOCHECK 21 "
	2045	6	5			400		AMP SPACER "
	2050							RELEASE BOTTOM PLUG
	2055		4 1/2					PLUG RH - MH
	2100	5	22			300		MAX CONCT - LD - 40 SWS @ 11.2 PPG "
		5	40			200		TL - 140 SWS @ 14.0 PPG
	2116							WASH OUT AMP - LINES
	2118							RELEASE TOP PLUG
	2120	6 1/2	0					RESPLACE PLUG "
		6 1/2	63			700		SHUT OFF ROTATING
	2130	6	72.9			1400		PLUG DOWN
	2132					OK		RELEASE PSE - HEAD
								WASH-UP MUCK
	2230							JOB COMPLETE

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THANK YOU
 WANN, DUSTY, ROB



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 10025

CUSTOMER: MULL DRUG. Co. INC
WELL: JOHNSON 1-8
DATE: 4-7-06
PAGE: 2 OF 2

LINE NO.	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	TOTAL	TAXES	AMOUNT
330	SWIFT MULIE-QULSITY STANDARD	200 SWS	1				2409.00
276	FLOCELE	50 LBS	1				62.50
290	D-ADR	2 GAL	1				64.00
419	ROADWEG HEAD RENTAL	1 JOB	1				250.00
581	SERVICE CHARGE	CUBIC FEET	1		200		220.00
583	TOTAL WEIGHT	LOADED MILES	1		19970	40	399.40
							3395.90

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CHARGE TO: **KCC**
 ADDRESS: **WELL DRUG. G. EX**
JUL 21 2006
 CITY, STATE, ZIP CODE: **CONFIDENTIAL**

TICKET No **10058**

PAGE **1** OF **1**

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SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1-8	LEASE JOHN	COUNTY/PARISH NESS	STATE Ks	CITY	DATE 4-12-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR CoTools	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATED	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE CEMENT PORT COLLAR	WELL PERMIT NO.	WELL LOCATION WELL 15-2W, 3, WS		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			U/M			
575		1			MILEAGE # 104	40	ME		4.00	160.00
577		1			PUMP SERVICE	1	JOB		800.00	800.00
105		1			PORT COLLAR OPENING TOOL	1	JOB		400.00	400.00
320		1			SWIFT MULT-DENSITY STAMPS	240	SKS		12.00	2880.00
276		1			FLOCELE	75	UBS		1.25	93.75
581		1			SERVICE CHARGE CSMAT	300	SKS		1.10	330.00
583		1			DAMAGE	2990.5	US	598.10	1.00	598.10
290		1			D-AIR	2	GAL		32.00	64.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*
 DATE SIGNED: **4-12-06** TIME SIGNED: **1300**

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	5325.85
				7.5% TAX	182.20
				TOTAL	5508.05

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES. This customer is hereby accepting the materials and services shown on this invoice.

SWIFT OPERATOR: **WADE WASON** APPROVAL: _____

Thank You!

04/20/2006 08:47 FAX 7197678994 MDC-CHEV_WELLS.CO MDC WICHITA 001/007

SWIFT Services, Inc.

DATE **4-2-06** PAGE NO. **1**

JOB LOG

CUSTOMER **MULL DRILG. Co. INC** WELL NO. **1-8** LEASE **JOHNSON** JOB TYPE **CEMENT PORT COLLAR** TICKET NO. **10058**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS/HR)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1230							OJ LOCATION
								TUB - 2 3/8 CSO - 4 1/2 PORT COLLAR - 2064'
	1320				✓		1000	PRE TEST GASING - HELD
	1325	3	2	✓		-400		PRE-PORT COLLAR - TEST RATE
	1330	4 1/2	133	✓		450		MIX CEMENT - 240 SKS SAND 1/4" FLOCC
	1405	3	7	✓		600		DISPENSE CEMENT
	1410				✓		1000	CLOSE PORT COLLAR - PRE TEST - HELD
								CIRCULATE 10 SES CEMENT TO PORT
	1420	3	20		✓		400	RUN 4 STS - CIRCULATE CLEAN
								WASH UP TOWER
								PULL TOOL
	1500							JOB COMPLETE

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THANK YOU
WAVE, DUSTY, BART

ALLIED CEMENTING CO., INC.

23550

Federal Tax I.D. KCC

JUL 21 2006

SERVICE POINT: Mass City

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

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DATE <u>3-27-06</u>	SEC. <u>8</u>	TWP. <u>16</u>	RANGE <u>26</u>	CALLED OUT <u>3:30pm</u>	ON LOCATION <u>5:30pm</u>	JOB START <u>6:50pm</u>	JOB FINISH <u>7:15pm</u>
LEASE <u>Johnson</u>		WELL # <u>1-8</u>	LOCATION <u>Utica 2w 3w 1/2w</u>		COUNTY <u>Mass</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR W-W Oreg #2

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 235

CASING SIZE 8 7/8 DEPTH 233

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 14 1/4

OWNER _____

CEMENT AMOUNT ORDERED

165 150 Com 3 1/2cc 2 1/2" dia

COMMON	<u>165</u>	@	<u>9.00</u>	<u>1845.00</u>
POZMIX		@		
GEL	<u>3 Ad.</u>	@	<u>15.00</u>	<u>45.00</u>
CHLORIDE	<u>5 Ad.</u>	@	<u>42.00</u>	<u>210.00</u>
ASC		@		

EQUIPMENT

PUMP TRUCK CEMENTER Mike

224 HELPER J. W. Wynn

BULK TRUCK

357 DRIVER Terry

BULK TRUCK

_____ DRIVER _____

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HANDLING 173.00 @ 1.90 294.10

MILEAGE 32 173.44 387.52

TOTAL 2521.62

REMARKS:

used 20#

case 8 7/8 casing pump

mix cement, clean pump 14 1/4 BBL

case and case

Thanks

SERVICE

DEPTH OF JOB 233

PUMP TRUCK CHARGE 735.00

EXTRA FOOTAGE @ _____

MILEAGE 32 @ 5.00 160.00

MANIFOLD @ _____

TOTAL 895.00

PLUG & FLOAT EQUIPMENT

8 7/8 top wood @ 5.00 55.00

TOTAL 55.00

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 Bill Wynn

Bill Wynn
PRINTED NAME