

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 # 33685
 Name: Jesseph Oil Well Ser.
 Address: 22963 Reno Rd.
 City/State/Zip: Buffalo, Ks. 66717
 Purchaser: Crude Marketing
 Operator Contact Person: Henry Jesseph
 Phone: (620) 537-2003
 Contractor: Name: MOKAT
 License: 5831
 Wellsite Geologist: None
 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. _____
1-18-08 1-22-08 1-28-08
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 001-29686-0000
 County: Allen
NENWSESW Sec. 17 Twp. 26 S. R. 18 East West
1155' feet from (S) N (circle one) Line of Section
3465' feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Barnett Well #: B-3
 Field Name: Humbolt
 Producing Formation: Squirrel
 Elevation: Ground: 1000' Kelly Bushing: _____
 Total Depth 875' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 35' Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from Top 860
 feet depth to 875' surface w/ 106142 sx cmt.
Alt 2 - Dlg 5/30/08
 Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used Drilled with air
 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: Henry Jesseph
 Title: Owner Date: 3-13-08
 Subscribed and sworn to before me this 13th day of March
 20 08
 Notary Public: Kathy L Ross
 Date Commission Expires: _____



KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION
MAR 17 2008

Operator Name: Jesseph Oil Well Ser. Lease Name: Barnett Well #: B-3
 Sec. 17 Twp 26 S. R. 18 East West County: Allen

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 (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run: Drillers Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name <u>Squirel</u> Top <u>667'</u> Datum <u>685'</u>
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CASING RECORD <input 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	8 5/8"	& 7"	30	35'	Portland	20	None
Long String	6 1/4"	2 7/8"		860'	Portland	106	50/50 Poz

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
	Not Done Yet		

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

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 15929
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/23/08		Barnett # B-3	17	26	18	AL
CUSTOMER Joseph D. Wall Sor			TRUCK #			
MAILING ADDRESS 22963 Reno Rd			DRIVER		TRUCK #	
CITY Buffalo			DRIVER		TRUCK #	
STATE KS			DRIVER		TRUCK #	
ZIP CODE 66717			DRIVER		TRUCK #	
			DRIVER		TRUCK #	

JOB TYPE hang string HOLE SIZE 6 1/4 HOLE DEPTH 875' CASING SIZE & WEIGHT 2 7/8 10 RD
 CASING DEPTH 860' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug
 DISPLACEMENT 5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Check casing depth w/ wireline. Mix Pump 200# Premium Gel Flush. Mix Pump 142 sks 50/50 Por Mix Cement 2% Gel. Cement to surface. Flush pump & lines clean. Displace 2 1/2" rubber plug to casing TD w/ 5 BBL Fresh water. Pressure to 650# PSI & Shut in casing.

Fred Mader

WOKAT Digs

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 3	PUMP CHARGE Cement Pump	368	875 ⁰⁰
5406	1/3 of 65mi	MILEAGE Pump Truck	368	74 ²⁵
5407A.70	4.536 Ton	Ton Mileage	#515	336 ¹²
5407A	1.428 Ton	Ton Mileage	#237	105 ⁸¹
5501C	2 hrs	Transport	505/7106	208 ⁰⁰
1124.70	106 sks	50/50 Por Mix Cement		985 ⁸⁰
1124	33 sks	50/50 Por Mix Cement		306 ⁹⁰
1118B.70	182 #	Premium Gel		29 ¹²
4118B 1118B	257 #	Premium Gel		41 ¹²
4402	1	2 1/2" Rubber Plug		21 ⁰⁰
		Sub Total		2983 ⁰²
		Tax @ 6.3%		87 ¹⁹
		Total		3070 ⁸¹
		SALES TAX ESTIMATED TOTAL		

*Paid 1/29/08
 ch # 5971
 JM*

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 KANSAS CORPORATION COMMISSION
 MAR 17 2008
 CONSERVATION DIVISION
 WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 15929
 LOCATION Ottawa KS
 FOREMAN Fred Maden

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1/28/08		Barnett # B-3	17	26	18	AL
CUSTOMER Jesseph D. I. Wall Sr			TRUCK #			
MAILING ADDRESS 22963 Reno Rd			DRIVER		TRUCK #	
CITY	STATE	ZIP CODE	506	Fred	505/7106	Ken
Buffalo	KS	66717	368	Bill		
			515	Jer Bau (Eureka)		
			237	Brian		

JOB TYPE Long string HOLE SIZE 6 1/4 HOLE DEPTH 825' CASING SIZE & WEIGHT 2 7/8 10 RD
 CASING DEPTH 860' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug
 DISPLACEMENT 5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 B Pm

REMARKS: Check casing depth w/ wireline. Mix + Pump 200# Premium Gel Flush. Mix + Pump 142 sks 50/50 Poz Mix Cement 2% Gel. Cement to surface. Flush pump + lines clean. Displace 2 1/2" rubber plug to casing TD w/ 5 BBL Fresh water. Pressure to 650# PSI & Shut in casing.

Fred Maden

WILLIAMS DING

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5401	1 of 3	PUMP CHARGE Cement Pump	368	875 ⁰⁰
5406	1/2 of 65mi	MILEAGE Pump Truck	368	74 ²⁵
5407A.70	4.536 Ton	Ton Mileage	#515	336 ¹²
5407A	1.428 Ton	Ton Mileage	#237	105 ⁸¹
5501C	2 hrs	Transport	505/7106	208 ⁰⁰
1124.70	106 sks	50/50 Poz Mix Cement		985 ⁸⁰
1124	33 sks	50/50 Poz Mix Cement		306 ⁹⁰
1118B.70	182 #	Premium Gel		29 ¹²
4418B 1118B	257 #	Premium Gel		41 ¹²
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 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 15929
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

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CUSTOMER Joseph D. Wall Sor			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 22963 Reno Rd			506 Fred 505/7106 Ken			
CITY STATE ZIP CODE Buffalo KS 66717			368 Bill			
			515 Jer Bau (Eureka)			
			237 Brian			

JOB TYPE Long string HOLE SIZE 6 1/4 HOLE DEPTH 875' CASING SIZE & WEIGHT 2 7/8 10 RD
 CASING DEPTH 860' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug
 DISPLACEMENT 5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

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