

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 # 9722
Name: G & J Oil Company, Inc.
Address: P. O. Box 188
City/State/Zip: Caney, KS 67333
Purchaser: CMT
Operator Contact Person: Gene Nunneley
Phone: (620) 252-9700
Contractor: Name: Finney Drilling Company
License: 5959 5989
Wellsite Geologist: Sam Nunneley

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
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. _____

3/17/2008	3/19/2008	3/19/2008
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-31545-0000
County: Montgomery
SW SW NE Sec. 1 Twp. 34 S. R. 14 East West
2145 feet from S (N circle one) Line of Section
3145 feet from E (W circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Meadows Well #: 08-02
Field Name: Wayside-Havana
Producing Formation: Wayside
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 705 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 23.75 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 700
feet depth to Surface w/ 87 sx cmt.

Drilling Fluid Management Plan Air II NCR 7-29-08
(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 207B, 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: Sam Nunneley
Title: Geologist Date: 7-9-08
Subscribed and sworn to before me this 9th day of July
2008
Notary Public: [Signature]
Date of Commission Expires: 5-21-10

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
KANSAS CORPORATION COMMISSION
 Geologist Report Received
 UIC Distribution **JUL 11 2008**

CONSERVATION DIVISION
WICHITA, KS

Operator Name: G & J Oil Company, Inc. Lease Name: Meadows Well #: 08-02
 Sec. 1 Twp. 34 S. R. 14 East West County: Montgomery

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name core	Top 626-646	Datum
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2nd core	660.5	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Gamma Ray Neutron - See attached		
List All E. Logs Run:				

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	12 1/4	.7	21	23.75	I	10	service company	
Production	5 5/8	2 7/8	6.5	700	I	87	Service Company	

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 <i>(Amount and Kind of Material Used)</i>	Depth

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TUBING RECORD	Size 1"	Set At 695	Packer At none	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 5-23-2008	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. 2	Gas Mcf	Water Bbls. 25	Gas-Oil Ratio 0:2 Gravity 30

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



CONSOLIDATED
OIL WELL
SERVICES, LLC

P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 39027

LOCATION Bartlesville

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
5-22-08		MENDOCOS 4052		1	34S	14E	116, KS.	WATSTONE
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5101	2nd well	PUMP CHARGE FRC Pump		1,690.00
5100	2nd well	Blender		870.00
5111	2nd well	Fine Van		575.00
1231	175 lbs.	FRC GEL	GA 400	618.75
1205	18 gals	PURIFIER	SP 107	67.25
1275	300 gals	15% HCl Acid		420.00
1219	1/4 gal	New Formaldehyde	W# 314	15.90
1244	1/2 gal	4A Sol	CS 150	17.50
	2 hrs	Acid Delivery		264.00
5604	1 well	24 FRC VALVE RENT		80.00
5115	1 well	Ball Injector		95.00
4326	55 gals	7/8" BALL SCREWERS		129.25
		BLENDING & HANDLING		
5101	35 miles	TON-MILES		300.00
		STAND BY TIME		
		MILEAGE		
55611	2 1/2 hrs	WATER TRANSPORTS		260.00
		VACUUM TRUCKS		
2102	5,200 lbs.	FRAC SAND	14/10	1,092.00
		CEMENT		
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		SALES TAX	5.3%	6.85

Ravin 2790

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WICHITA, KS

ESTIMATED TOTAL \$6,521.83

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN

Scott Stephenson

CUSTOMER or AGENT (PLEASE PRINT)

DATE May 22, 2008

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

TICKET NUMBER 40106
 FIELD TICKET REF # 39022
 LOCATION B'ville
 FOREMAN Smith

TREATMENT REPORT
 FRAC & ACID

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
5-22-08		NE 1/4 Sec 15 T10S R2E	1	34S	11E	NE, KS.

CUSTOMER
 G & J Oil Co
 MAILING ADDRESS
 7th St
 well
 CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
578/7-105	Walt		
776	Dustin		
423	Scott		
314	Robert		
521	Mark		
578/7-101	Thomas		

WELL DATA

CASING SIZE 2 7/8"	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	33 clusts
Wayside	16-55 (200)
	154-100 (73)

TYPE OF TREATMENT
 Ann. Fract. + Sand Pack

CHEMICALS

200 gal 15% HCl	Breaker
Non-Catalytic	
1/2" SGA	
21 # 5-1	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
Pressure Test					3200 #	BREAKDOWN 1520 #
Clamped and 1/2 LL	50 gal	30 bpm				START PRESSURE 1045 #
Breakdown					1520 #	END PRESSURE 755 #
Flow	25 gal	4 bpm	15 balls	710	150-2500 #	BALL OFF PRESS 750-3800 #
Flushback + Wash		4 bpm			335-315 #	ROCK SALT PRESS 745-820 #
Knocked off balls						ISIP 273 #
Pressure Test					3000 #	5 MIN 16 #
Prod.		15 bpm			1145-740 #	10 MIN -
Prody	61 gal	20 bpm	50 lbs	2000 12/20	740-745 #	15 MIN -
			5 balls		745-760 #	MIN RATE 4 bpm
			1 lb	1000 12/20	710-785 #	MAX RATE 20 bpm
			5 balls		735-820 #	DISPLACEMENT 3.2 bbl
			5 balls	2000 12/20	870-765 #	
Flush					765-755 #	

REMARKS:
 152 bbl 20' over 10' ann. fract. 15% HCl w/ prod. breaker + 1/2" SGA 55 balls

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER

11699

LOCATION *Beulah*

FOREMAN *Bob*

TREATMENT REPORT & FIELD TICKET

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-25-08	200	Meadows # 8-02		34 S	24 E	Mont
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			418	Raymond		
CITY			STATE	ZIP CODE		

JOB TYPE *5 3/4* HOLE SIZE *5 3/4* HOLE DEPTH *210* CASING SIZE & WEIGHT *2 1/2*

CASING DEPTH *668* DRILL PIPE TUBING OTHER

SLURRY WEIGHT *11.5* SLURRY VOL *11.5* WATER gal/sk *11.5* CEMENT LEFT in CASING *0*

DISPLACEMENT *4* DISPLACEMENT PSI *11.5* MIX PSI *11.5* RATE *11.5*

REMARKS: *2 gal of cement slurry in well. Cement slurry pumped. 20 lbs cement slurry pumped. Cement slurry pumped. Cement slurry pumped.*

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SERVICE CONDITIONS

ACCOUNTY CODE	QUANTITY OF UNITS	DESCRIPTION OF SERVICES or PRODUCT	UNIT PRICE	TOTAL
5407		PUMP CHARGE		180.00
N/A		MILEAGE		N/C
5402		200 lbs cement	118.66	118.66
5405		200 lbs cement	500.00	500.00
1126A		200 lbs cement	225.00	225.00
1102B		200 lbs cement	225.00	225.00
1110		200 lbs cement	225.00	225.00
1118B		200 lbs cement	16.00	16.00
4402		200 lbs cement	42.00	42.00

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ESTIMATED TOTAL \$2612.28

AUTHORIZATION *[Signature]* TITLE _____ DATE _____