

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32887
Name: Endeavor Energy Resources, LP
Address: PO Box 40
City/State/Zip: Delaware, OK 74027
Purchaser: NA
Operator Contact Person: Joe Driskill
Phone: (918) 467-3111
Contractor: Name: Well Refined Drilling
License: 33072
Wellsite Geologist: NA
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: NA
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. _____
4-8-08 4-9-08 5-22-08
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 099-24322-0000
County: Labette
SW SW SE Sec. 26 Twp. 33 S. R. 17 East West
330 feet from (S) / N (circle one) Line of Section
2310 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SF) NW SW
Lease Name: Harshaw Trust Well #: 26-3
Field Name: Cherokee Basin Coal Area
Producing Formation: Riverton Coal
Elevation: Ground: 772.7' Kelly Bushing: _____
Total Depth: 955 Plug Back Total Depth: 951
Amount of Surface Pipe Set and Cemented at 20' 1" Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 951
feet depth to surface w/ 110 sx cmt.

Drilling Fluid Management Plan Air II NCR 8-20-08
(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 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: Joe Driskill
Title: Operations Superintendent Date: 8-5-08

Subscribed and sworn to before me this 5 day of August, 2008.

Notary Public: Stephanie Lakey
Date Commission Expires: April 18, 2009

STEPHANIE LAKEY
NOTARY PUBLIC-STATE OF OKLAHOMA
NOWATA COUNTY
MY COMMISSION EXPIRES APRIL 18, 2009
COMMISSION # 05003715

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
AUG 07 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Endeavor Energy Resources, LP Lease Name: Harshaw Trust Well #: 26-3
 Sec. 26 Twp. 33 S. R. 17 East West County: Labette

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 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: Compensated Density / Neutron Dual Induction Gamma Ray / Neutron, CBL	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Oswego Lime</td> <td>341</td> <td>432</td> </tr> <tr> <td>Riverton</td> <td>880</td> <td>107</td> </tr> <tr> <td>Mississippi</td> <td>892</td> <td>-119</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Oswego Lime	341	432	Riverton	880	107	Mississippi	892	-119
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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	12.250	8.625	24#	20' 1"	Portland	5	
Production	6.750	4.5	11.6	951	Class A	110	

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
2	881 - 882.5	500 gal 15% HCL		882.5
		40 bbl 1% KCL water		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2.375	905		
Date of First, Resumerd Production, SWD or Enhr. Waiting on Pipeline		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
		na	na	

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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

RECEIVED
KANSAS CORPORATION COMMISSION
AUG 07 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 11759

LOCATION Buckson, Mo

FOREMAN Jason Bell

TREATMENT REPORT & FIELD TICKET
CEMENT

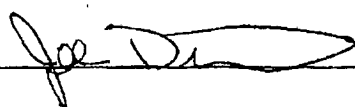
DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-11-08	2520	Harshaw Test 86-3				Lab.
CUSTOMER <u>Endevor</u>			TRUCK #			
MAILING ADDRESS			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						

JOB TYPE L.S. HOLE SIZE 6 3/4 HOLE DEPTH 955 CASING SIZE & WEIGHT 4 1/2 116
 CASING DEPTH 951 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.0 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 14.7 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran 4 hrs of gel established circulation ran 110 Sbs of Newfield mix. Shut down washed up behind plug. Pumped displaced and set shoe. Knocked loose and washed up.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		875.00
5406	50	MILEAGE		172.50
5407	1	Bulk track		300.00
5402	951	Footage		180.69
5501c	3 hrs	Transport		312.00
1104	10340 #	Class A	*	1447.6
1110	1100 #	Gilsonite	*	550.00
1111	250 #	Salt	*	77.50
1107a	80 #	Pheno	*	87.20
1118b	400 #	Gel	*	64.00
4404	1	4 1/2 Rubber	*	42.00
1123	5040 gal	City water	*	67.13
RECEIVED KANSAS CORPORATION COMMISSION				
AUG 07 2008				
CONSERVATION DIVISION WICHITA, KS				
				SALES TAX <u>132.92</u>
				ESTIMATED TOTAL <u>4328.49</u>

AUTHORIZATION



TITLE

221224

DATE