

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 # 33677
 Name: Canary Operating Corporation
 Address: 7230 W. 162nd Street, Suite A
 City/State/Zip: Stilwell, KS 66085
 Purchaser: Canary Pipeline, Inc.
 Operator Contact Person: Steve Allee
 Phone: (913) 239-8960
 Contractor: Name: Canary Drilling, Inc.
 License: 33799
 Wellsite Geologist: Rex R. Ashlock
 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. _____

<u>6/21/07</u>	<u>6/25/07</u>	<u>6/26/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 121-28397-00-00
 County: Miami
 SE NE NW Sec. 18 Twp. 16 S. R. 25 East West
990 feet from S / N (circle one) Line of Section
2400 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Deer Well #: 12-18-16-25
 Field Name: Paola-Rantoul
 Producing Formation: Lexington, Summit, & Mulky
 Elevation: Ground: 1064 Kelly Bushing: _____
 Total Depth: 664 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 510.81
 feet depth to surface w/ 109 sx cmt.
 Drilling Fluid Management Plan ALT II W/HW-12-10-07
 (Data must be collected from the Reserve Pit)
 Chloride content NA ppm Fluid volume 60+/- 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.

Canary Operating Corporation
 Signature: By: [Signature]
 Title: VP Date: 6/28/07
 Subscribed and sworn to before me this _____ day of _____
20 07
 Notary Public: [Signature]
 Date Commission Expires: 1/10/2009

KCC Office Use ONLY

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

REX R. ASHLOCK
 Notary Public - State of Kansas
 My Appt. Exp. 1/10/09

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 KANSAS CORPORATION COMMISSION
 JUL 05 2007
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: **Canary Operating Corporation** Lease Name: **Deer** Well #: **12-18-16-25**
 Sec. **18** Twp. **16** S. R. **25** East West County: **Miami**

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
DL missed place, will send at a later date.

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	13 1/2"	10 3/4"	32	20'	Common	10	None
Production	9 7/8"	7"	17	510.81	Portland	109	2% CaCl ₂ 2% Gel

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
None	Open hole completed from 510.81 to 664'	None	
		160' +/- of 4 1/2" perf'd liner to be run	

TUBING RECORD	Size Set At	Packer At	Liner Run	Week of July 1st
	1" to be set at 615' +/-	None	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First Resumered Production, SWD or Enhr.	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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio Gravity
	None	NA	NA	None

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) _____

To be sold

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 WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 15499

LOCATION Ottawa

FOREMAN Alan Madey

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-26-07	2642	Deer # 12	18	16	25	Mi

CUSTOMER
Canary
MAILING ADDRESS
7230 West 162nd Ste A
CITY
Stilwell STATE
KS ZIP CODE
66085

TRUCK #	DRIVER	TRUCK #	DRIVER
516	Alan M		
495	Gary K		
369	Gary A		
237	Ben H		

JOB TYPE long string HOLE SIZE 9 HOLE DEPTH 512.5 CASING SIZE & WEIGHT 7"
CASING DEPTH 510.5 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 20.4 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 bpm

REMARKS: Established circulation. Mixed & pumped 200# gel to condition hole. Mixed & pumped 15 bbl dye followed by 114 ex Portland "A" 2% gel, 2% calcium. Circulated dye to surface. Displaced casing with 20.4 bbl water, leaving some cement in casing. Circulated cement to surface. Closed valve.

Alan Madey

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	495	840.00
5406	40	MILEAGE	495	13200
5402	510'	Casing footage	495	N/C
5407	10 min	ten miles		385.00
5502	2 1/2	80 gal		335.00

1102	228#	calcium		152.76
11045	109.5x 109.5x	Portland "A"		1329.80
1118 B	428# 428#	gel		64.20

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WICHITA, KS

SALES TAX
ESTIMATED
TOTAL

6.56