

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

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 Operating, 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>8/27/07</u>	<u>9/10/07</u>	<u>9/10/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - ~~12-20402~~ 15-121-20396-000
County: Miami
NW NW NW Sec. 18 Twp. 16 S. R. 25 East West
330 feet from S / N (circle one) Line of Section
330 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 #: 8-18-16-25
Field Name: Paola-Rantoul?
Producing Formation: Lexington, Summit, & Mulky
Elevation: Ground: 1010 Kelly Bushing: _____
Total Depth: 679 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 488
feet depth to surface w/ 95 sx crnt.


Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) ACT I WITH
Chloride content NA ppm Fluid volume 30+/- 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: COO Date: 9-28-07
Subscribed and sworn to before me this 28th day of September
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

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 01 2007
CONSERVATION DIVISION
WICHITA, KS

Operator Name: **Canary Operating Corporation** Lease Name: **Deer** Well #: **8-18-16-25**
 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
Base Ks City 264
South Mound 408
Anna Shale (Lexington) 494
Summit 534
Mulky 555

(9/13/07) Ran GR-N w/ CCL, mailed same along w/ DL 9/26/07

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"	NA	20	Reg.	10	None
Production	9 7/8"	7"	17.00	488	Portland	95	2% Gel. 2% CaCl ₂

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
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 488' to 679'	None	
		201.10' of 4 1/2" steel, perf'd liner, not cmt'd	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		1"	to be set at 620'+/-	None	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
W.O. gas, electric, & wtr lines		<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
	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

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 01 2007

CONSERVATION DIVISION
 WASHINGTON

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
 WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
 September 1999
 Form Must Be Typed

ORIGINAL

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 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 Operating, Inc.
 License: 33799
 Wellsite Geologist: Rex R. Ashlock
 Designate Type of Completion:
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 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. _____
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<u>8/27/07</u>	<u>9/10/07</u>	<u>9/10/07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - ~~121-28462-0000~~ 15-121-28396-0000
 County: Miami
 NW NW NW Sec. 18 Twp. 16 S. R. 25 East West
330 feet from S / N (circle one) Line of Section
330 feet from E / N (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Deer Well #: 8-18-16-25
 Field Name: Paola-Rantoul?
 Producing Formation: Lexington, Summit, & Mulky
 Elevation: Ground: 1010 Kelly Bushing: _____
 Total Depth: 679 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 488
 feet depth to surface w/ 95 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content NA ppm Fluid volume 30+/- 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.: _____

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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: 9/10/07
 Subscribed and sworn to before me this 10th day of September
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

RECEIVED
 KANSAS CORPORATION COMMISSION
 SEP 12 2007
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: **Canary Operating Corporation** Lease Name: **Deer** Well #: **8-18-16-25**
 Sec. **18** Twp. **16** S. R. **25** East West County: **Miami**

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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: **None as of Form date**

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

Will send E-log at a later date
Will send Driller's Log in 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"	NA	20	Reg.	10	None
Production	9 7/8"	7"	17.00	488	Portland	95	2% Gel. 2% CaCl ₂

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 488' to 679'	None	
		201.10' of 4 1/2" steel, perf'd liner, not cmt'd	

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		1"	to be set at 620'+/-	None	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
W.O. gas, electric, & wtr lines		<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. Duality Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

To be sold

RECEIVED
 KANSAS CORPORATION COMMISSION

SEP 12 2007

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 15619
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/6/07	2642	Deer # 8	18	16	25	M1

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


TRUCK #	DRIVER	TRUCK #	DRIVER
506	Fred		
368	Bill		
369	Gary		
237	Jason		

JOB TYPE Long string HOLE SIZE 7 7/8 HOLE DEPTH 490' CASING SIZE & WEIGHT 7"
 CASING DEPTH 4880 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 20.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish Circulation Mix + Pump 200# Premium Gel
Flush. Mix + Pump 12 BBL Tall tale dye Mix + Pump
99 sks Class A Cement 2% Gel 2% Calcium Chloride
Displace 7" casing clean w/ 19.5 BBL Fresh water
Shut in casing.

Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Cement Pump</u>	368	840.00
5406	40 mi	MILEAGE <u>Pump Truck</u>	368	132.00
5407	Minimum	<u>Tax Mileage</u>	237	285.00
5502C	3 hrs	<u>80 BBL Vac Truck</u>	369	270.00
1102/5	9.5 sks	<u>Class A Portland Cement</u>		1159.00
1118B	386 #	<u>Premium Gel</u>		572.00
1102	186 #	<u>Calcium Chloride</u>		124.62
		<u>Sub Total</u>		2868.52
		<u>Tax @ 6.55%</u>		87.87
		RECEIVED KANSAS CORPORATION COMMISSION SEP 12 2007 CONSERVATION DIVISION SALES TAX WIC ESTIMATED TOTAL		2956.39

AUTHORIZATION 

TITLE _____ DATE _____