

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5146
Name: Rains & Williamson Oil Co., Inc.
Address: 220 W. Douglas, Suite 110
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Juanita Green
Phone: (316) 265-9686
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: James C. Musgrove

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. _____

<u>9/29/07</u>	<u>10/8/07</u>	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 135-24701-00-00
County: Ness
110° E NE SW SW Sec. 15 Twp. 16 S. R. 21 East West
990 feet from N (circle one) Line of Section
1100 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Ryan Well #: 3-15
Field Name: Kranz SW
Producing Formation: _____
Elevation: Ground: 2331' Kelly Bushing: 2336'
Total Depth: 4305' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 251' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *ALT II W/HR 12-13-07*
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: Juanita M. Green
Title: President Date: 10/11/07
Subscribed and sworn to before me this 11th day of October
20 07.
Notary Public: Patricia A. Thome
Date Commission Expires: 6-18-09

KCC Office Use ONLY

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

RECEIVED
NOV 19 2007

PATRICIA A. THOME
Notary Public - State of Kansas
My Appt. Expires 6-18-09

KCC WICHITA

Operator Name: Rains & Williamson Oil Co., Inc. Lease Name: Ryan Well #: 3-15
 Sec. 15 Twp. 16 S. R. 21 East West County: Ness

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Borehole Compensated Sonic Log Dual Compensated Porosity Log Dual Induction Log Microresistivity Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attached
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------

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"	8 5/8"	23#	251'	Common	175	2% gel, 3% cc

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

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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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Production Interval Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

FORMATION TOPS	LOG	SAMPLES
anhydrite	1627	+709 3rd Cherokee Sand 4250 - 1914
Heebner	3708	-1372
Toronto	3730	-1394 Mississippian 4281 - 1945
Lansing	3751	-1415 RTD 114305 - 1969
Base Kansas City	4033	-1697 LTD 4308 - 1972
Marmaton	4062	-1726
Pawnee	4098	-1762
Pawnee Sand	4173	-1837
FT. Scott	4188	-1852
1st Cherokee Sand	4200	-1864
2nd Cherokee Sand	4223	-1887

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ALLIED CEMENTING CO., INC.

30895

Federal Tax I.D. XXXXXXXXXX

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

HR.

DATE <u>9-30-07</u>	SEC <u>15</u>	TWP <u>16</u>	RANGE <u>21</u>	CALLED OUT <u>8:00 PM</u>	ON LOCATION <u>11:30 PM</u>	JOB START <u>2:30 AM</u>	JOB FINISH <u>3:00 AM</u>
LEASE <u>Ryan</u>	WELL # <u>3-15</u>	LOCATION <u>McCracken 4N TO curve</u>			COUNTY <u>Ness</u>	STATE <u>K.S.</u>	
OLD OR <u>NEW</u> (Circle one)			<u>SW to Rd "2189" 1/2 N E15</u>				

CONTRACTOR Murfin Rig 24

TYPE OF JOB Surface

HOLE SIZE 12 1/2 T.D. 251 ft

CASING SIZE 8 3/8 DEPTH 251 ft

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15 ft

PERFS. _____

DISPLACEMENT 15 bbl

OWNER _____

CEMENT AMOUNT ORDERED 175 # Common

32cc 22 gal

COMMON	<u>175 #</u>	@	<u>11.10</u>	<u>1942.50</u>
POZMIX		@		
GEL	<u>3 #</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>S #</u>	@	<u>46.60</u>	<u>233.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>183 #</u>	@	<u>1.90</u>	<u>347.70</u>
MILEAGE	<u>183.44</u>	@	<u>09 30</u>	<u>494.10</u>
TOTAL				<u>3067.25</u>

EQUIPMENT

PUMP TRUCK # 181 CEMENTER Mike m.
HELPER Randy P.

BULK TRUCK # 342 DRIVER Tyler

BULK TRUCK # _____ DRIVER _____

REMARKS:

Circulate the Hole with Rig
Mud pump
Mix Cement + Release Plug
Displace plug Down with water

Cement did circulate
to surface

SERVICE

DEPTH OF JOB	<u>251 ft</u>			
PUMP TRUCK CHARGE				<u>815.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>30</u>	@	<u>6.00</u>	<u>180.00</u>
MANIFOLD		@		
<u>Head Rent</u> ✓		@	<u>100.00</u>	<u>100.00</u>
		@		
TOTAL				<u>1095.00</u>

CHARGE TO: Rains + Williamson

STREET _____

CITY _____ STATE _____ ZIP _____

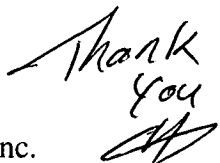
PLUG & FLOAT EQUIPMENT

<u>1-88</u>	<u>Wooden plug</u>	@	<u>60.00</u>	<u>60.00</u>
		@		
		@		
		@		
TOTAL				<u>60.00</u>

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Thank you 

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Anthony Martini
Great Job Guys

Anthony Martini
PRINTED NAME

ALLIED CEMENTING CO., INC.

30361

Federal Tax I.D. XXXXXXXXXX

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Great Bend

DATE <u>10-8-07</u>	SEC. <u>15</u>	TWP. <u>16</u>	RANGE <u>21</u>	CALLED OUT <u>12:00 AM</u>	ON LOCATION <u>2:00 AM</u>	JOB START <u>5:00 PM</u>	JOB FINISH <u>6:00 PM</u>
LEASE <u>Ryan</u>	WELL # <u>3-15</u>	LOCATION <u>McCracken north to curve</u>			COUNTY <u>Texas</u>	STATE <u>Kansas</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>Swest to GG road 1 1/2 north</u>				

CONTRACTOR Murfin #24
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 4305'
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1700'
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER Rains & Williamson Oil Co. Inc.

CEMENT
 AMOUNT ORDERED 245 ox 60/40 4% Gel
1/4" flo seal per ox

COMMON	<u>147</u>	@	<u>11.10</u>	<u>1631.70</u>
POZMIX	<u>98</u>	@	<u>6.20</u>	<u>607.60</u>
GEL	<u>10</u>	@	<u>16.65</u>	<u>166.50</u>
CHLORIDE		@		
ASC		@		
FLO-SEAL	<u>61</u>	@	<u>2.00</u>	<u>122.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>257</u>	@	<u>1.90</u>	<u>488.30</u>
MILEAGE	<u>30.9</u>	@	<u>257</u>	<u>693.90</u>
TOTAL				<u>3710.00</u>

EQUIPMENT

H.B.
 PUMP TRUCK CEMENTER J.D. Freising
 #181 HELPER Randy Pray
 BULK TRUCK DRIVER Kevin Weighous
 BULK TRUCK # _____ DRIVER _____

REMARKS:

<u>1st</u>	<u>1700'</u>	<u>50 ox</u>
<u>2nd</u>	<u>950'</u>	<u>80 ox</u>
<u>3rd</u>	<u>550'</u>	<u>30 ox</u>
<u>4th</u>	<u>280'</u>	<u>50 ox</u>
<u>5th</u>	<u>60'</u>	<u>20 ox</u>
<u>15 ox in rat hole</u>		

SERVICE

DEPTH OF JOB	<u>1700'</u>		
PUMP TRUCK CHARGE			<u>815.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>30</u>	@	<u>6.00</u>
MANIFOLD		@	
		@	
		@	

CHARGE TO: Rains & Williamson Oil Co.
 STREET 220 West Douglas Suite 110
 CITY Wichita STATE Kansas ZIP 67202

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 NOV 19 2007

TOTAL 995.00

PLUS WICHITA
 K&G WICHITA
 K&G WICHITA
 K&G WICHITA

OCT 12 2007

Approved by CM

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE X Anthony Martin
great job in the mud

X Anthony Martin
 PRINTED NAME

Thank you!

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

TOTAL 0