

APR 23 2007

ORIGINAL

CONSERVATION DIVISION
WICHITA, KS

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5046
Name: RAYMOND OIL COMPANY, INC.
Address: P. O. BOX 48788
City/State/Zip: WICHITA, KS 67201
Purchaser: _____
Operator Contact Person: CLARKE SANDBERG
Phone: (316) 267-4214 EXT 109
Contractor: Name: L. D. DRILLING, INC.
License: 6039

Wellsite Geologist: KIM SHOEMAKER
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. _____
1/29/07 2/09/07 3/22/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 101-21981-0000
County: LANE
SW SE SW Sec. 5 Twp. 17 S. R. 29 East West
600 feet from (S) N (circle one) Line of Section
1640 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: MUNSELL Well #: 1
Field Name: Wildcat
Producing Formation: Myric Station
Elevation: Ground: 2819' Kelly Bushing: 2824'
Total Depth: 4625' Plug Back Total Depth: 4620
Amount of Surface Pipe Set and Cemented at 259 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2200 Feet
If Alternate II completion, cement circulated from 2200
feet depth to surface w/ 450 sx cmt.

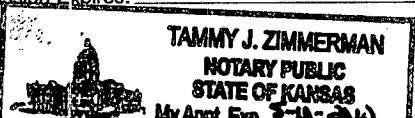
Drilling Fluid Management Plan Alt II KGR 12/12/07
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ 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: [Signature]
Title: Geologist Date: 4/13/2007
Subscribed and sworn to before me this 13 day of April,
20 07.
Notary Public: Tammy J. Zimmerman [Signature]
Date Commission Expires: May 19, 2010

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



Operator Name: RAYMOND OIL COMPANY, INC. Lease Name: MUNSELL Well #: 1
 Sec. 5 Twp. 17 S. R. 29 East West County: LANE

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: ELI- Rad. Guard w/ SP	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td style="text-align: center;">2207</td> <td style="text-align: center;">+617</td> </tr> <tr> <td>Heebner Sh</td> <td style="text-align: center;">3904</td> <td style="text-align: center;">-1080</td> </tr> <tr> <td>Stark Sh</td> <td style="text-align: center;">4197</td> <td style="text-align: center;">-1373</td> </tr> <tr> <td>Cher SH</td> <td style="text-align: center;">4469</td> <td style="text-align: center;">-1645</td> </tr> <tr> <td>Miss</td> <td style="text-align: center;">4558</td> <td style="text-align: center;">-1734</td> </tr> <tr> <td>Total Depth</td> <td style="text-align: center;">4623</td> <td></td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	2207	+617	Heebner Sh	3904	-1080	Stark Sh	4197	-1373	Cher SH	4469	-1645	Miss	4558	-1734	Total Depth	4623	
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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	12 1/4"	8 5/8"	24#	259'	60/40 POZMIX	185	2%GEL 3%CC 1/4#CF
PRODUCTION	7 7/8"	5 1/2"	14#	4618'	60/40 POZMIX	200	7.5%SALT 2%GEL
TOP SIDE					65/35 POZMIX	450	6%GEL 1/4# FLOSEAL

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
2 Shots/ft	4428-4434	500 gals 15% N.E.	
RECEIVED KANSAS CORPORATION COMMISSION APR 23 2007 CONSERVATION DIVISION WICHITA, KS			

TUBING RECORD	Size 2"	Set At 4534'	Packer At No	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. April 9, 2007		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. 90	Gas Mcl	Water Bbls. 30	Gas-Oil Ratio Gravity

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION Production Interval

(If vented, Submit ACO-18.)

ALLIED CEMENTING CO., INC.

26579

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

SERVICE POINT: MB

DATE <u>2-10-07</u>	SEC. <u>5</u>	TWP. <u>17e</u>	RANGE <u>29e</u>	CALLED OUT	ON LOCATION	JOB START <u>4:00 AM</u>	JOB FINISH <u>3:00 AM</u>
LEASE <u>Munsell</u>	WELL # <u>1</u>	LOCATION <u>Dighton 9W 90 Sued hat hane</u>			COUNTY <u>hane</u>	STATE <u>K.S.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		<u>5W 9throw Sued hat N/S</u>					

CONTRACTOR L.D. Drilling Rig 1

TYPE OF JOB Two stage Top Stage

HOLE SIZE _____ T.D. 46.25 ft

CASING SIZE 5 1/2 DEPTH 2200 ft

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL 5 Stage Collar DEPTH 2200 ft

PRES. MAX 400# to open

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 59 bbl

OWNER _____

CEMENT AMOUNT ORDERED 450 65 62 gal

1/4" floreal pipe

COMMON	@	_____	_____
POZMIX	@	_____	_____
GEL	@	_____	_____
CHLORIDE	@	_____	_____
ASC	@	_____	_____
<u>Lite</u>	@	<u>450 gal</u>	<u>13.20 6165.00</u>
<u>Flo Seal</u>	@	<u>113 #</u>	<u>2.00 226.00</u>
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
HANDLING	@	<u>477 gal</u>	<u>1.90 906.30</u>
MILEAGE	@	<u>477 gal 09</u>	<u>45 1931.85</u>
TOTAL			<u>9229.15</u>

REMARKS:

Open tool at Circulate Hole
Then mix Cement & wash up
Displace plug Down
1500# Plug Down
Float did hold

SERVICE

DEPTH OF JOB	<u>2200 ft</u>		
PUMP TRUCK CHARGE			<u>955.00</u>
EXTRA FOOTAGE	@	_____	_____
MILEAGE	<u>45</u>	@	<u>6.00 NC</u>
MANIFOLD	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
TOTAL			<u>955.00</u>

CHARGE TO: Raymond oil

STREET _____

CITY _____ STATE _____ ZIP _____

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 Art Schenker

PLUG & FLOAT EQUIPMENT RECEIVED

KANSAS CORPORATION COMMISSION

APR 23 2007

CONSERVATION DIVISION

WICHITA, KS

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

ALLIED CEMENTING CO., INC.

26578

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

SERVICE POINT: 2103.

2-10-07

DATE <u>2-9-07</u>	SEC <u>5</u>	TWP. <u>17s</u>	RANGE <u>29 W</u>	CALLED OUT <u>-</u>	ON LOCATION <u>7:30 PM</u>	JOB START <u>2 AM</u>	JOB FINISH <u>3:30 AM</u>
LEASE <u>Munselh</u>	WELL# <u>1</u>	LOCATION <u>Dighton 9N To Lane Co.</u>			COUNTY <u>Lane</u>	STATE <u>K.S.</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)		Feed hot w/ throw sand hot 5w N/3					

CONTRACTOR L. D. Drilling Rig #1 Bottom

TYPE OF JOB Production Two Stage ~~1~~ Stage

HOLE SIZE _____ T.D. 4625 ft

CASING SIZE 5 1/2 DEPTH 4628 ft

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL Stage Collar DEPTH 22 00 ft

PRES. MAX 900* MINIMUM _____

MEAS. LINE _____ SHOE JOINT 29.37

CEMENT LEFT IN CSG. 29.37

PERFS. _____

DISPLACEMENT 112.9 bbl

CEMENT	AMOUNT ORDERED	<u>200 60/40 7 1/2 salt</u>
		<u>22 gal</u>
		<u>500 gal w/FA</u>
COMMON	<u>120 gal.</u>	@ <u>12.20</u> <u>1464.00</u>
POZMIX	<u>80 gal</u>	@ <u>6.10</u> <u>488.00</u>
GEL	<u>4 gal</u>	@ <u>16.65</u> <u>66.60</u>
CHLORIDE		@ _____
ASC		@ _____
SALT	<u>7 gal.</u>	@ <u>19.20</u> <u>134.40</u>
ASTUSH	<u>500 GAL</u>	@ <u>1.00</u> <u>500.00</u>
		@ _____
		@ _____
		@ _____
		@ _____
		@ _____
HANDLING	<u>211 gal.</u>	@ <u>1.90</u> <u>400.90</u>
MILEAGE	<u>211 gal. 09</u>	<u>45</u> <u>824.55</u>
		TOTAL <u>3908.45</u>

EQUIPMENT

PUMP TRUCK CEMENTER Mike M.

224 HELPER Jim W.

BULK TRUCK

357 DRIVER Don D.

BULK TRUCK

341 DRIVER Kevin D.

REMARKS:

Circulate hole with Rig mud
Pump mix mud flush + Plug Set
Hole mix Cement wash up +
Release Plug Displace plug
Down with water + mud
900* shut in
Float did hold.

CHARGE TO: Raymond oil

STREET _____

CITY _____ STATE _____ ZIP _____

Thank
you
CHD

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.

SERVICE

DEPTH OF JOB	<u>4628 ft</u>	
PUMP TRUCK CHARGE		<u>1675.00</u>
EXTRA FOOTAGE	@ _____	
MILEAGE	<u>45</u>	@ <u>6.00</u> <u>270.00</u>
MANIFOLD	@ _____	
<u>HEAD RENT</u>	@ <u>100.00</u>	<u>100.00</u>
RECEIVED	@ _____	
KANSAS CORPORATION COMMISSION		
APR 23 2007		TOTAL <u>2045.00</u>

CONSERVATION DIVISION
WICHITA, KS & FLOAT EQUIPMENT

<u>1-5 1/2 Guide shoe</u>	<u>160.00</u>	<u>160.00</u>
<u>1-5 1/2 hatch Down Plug</u>	<u>350.00</u>	<u>350.00</u>
<u>1-5 1/2 Stage Collar</u>	@ <u>350.00</u>	<u>350.00</u>
<u>1-5 1/2 Basket</u>	@ <u>150.00</u>	<u>150.00</u>
<u>7-5/8 Centralizer</u>	@ <u>50.00</u>	<u>350.00</u>
	@ _____	
		TOTAL <u>4535.00</u>

SIGNATURE Carl Schonenberger

PRINTED NAME _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS