

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

ORIGINAL

Operator: License # 7076
Name: BLACK DIAMOND OIL, INC
Address: P.O. BOX 641
City/State/Zip: HAYS, KS 67601
Purchaser: NCRA
Operator Contact Person: KENNETH VEHIGE
Phone: (785) 625-5891
Contractor: Name: ANDERSON DRILLING
License: 33237
Wellsite Geologist: Tony Richardson

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>7-2-05</u>	<u>7-10-05</u>	<u>7-30-05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 065-23079-00-00
County: GRAHAM
S2 NW NE NW Sec. 5 Twp. 8 S. R. 24 East West
480 feet from S (circle one) Line of Section
1650 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: TEEL Well #: 1
Field Name: DRIPPING SPRINGS EAST

Producing Formation: KANSAS CITY
Elevation: Ground: 2362 Kelly Bushing: 2367

Total Depth: 3880 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 217 Feet

Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2107 Feet

If Alternate II completion, cement circulated from 2107
feet depth to Surface w/ 210 sx cmt.

Drilling Fluid Management Plan *ALT II W/H*
(Data must be collected from the Reserve Pit) *12-14-07*
Chloride content 4000 ppm Fluid volume 200 bbls
Dewatering method used Air Dry

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: Owner Date: 9-13-05
Subscribed and sworn to before me this 13th day of September,
20 05.

Notary Public: Verda M. Brin
Date Commission Expires: 7-18-07
VERDA M. BRIN
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 7-18-07

KCC Office Use ONLY
NO Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
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Operator Name: **BLACK DIAMOND OIL, INC** Lease Name: **TEEL** Well #: **1**
 Sec. **5** Twp. **8** S. R. **24** East West County: **GRAHAM**

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: **RA Guard**

<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample		
Name	Top	Datum
Anhydrite	2048	+319
Topeka	3396	-1029
Heebner	3600	-1233
Lansing KC	3633	-1266

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	200'	217	COM	160	3%CC,2%GEL
Production	7-7/8	4-1/2		3975			

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2107- Surface	SMD	210	

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
4	3798-3801	500 gals McAcid (each)	
4	3814-3818	1500 gals 28%	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8	3820	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
7/24/05	<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
	20	0	100		35

Disposition of Gas: Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

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DRILLER'S WELL LOG

BLACK DIAMOND OIL, INC.
TEEL - 1
NW/4 5-8-24W
Graham Co., KS

Spud Date: July 2, 2005
Completion Date: June 30, 2005

Elevation: 2362' G.L.

DEPTH

0 - 222 Shale & Sand
222 - 930 Shale & Sand
930 - 1395 Shale & Sand
1395 - 2048 Shale & Sand
2048 - 2082 Anhydrite
2082 - 2220 Shale
2220 - 2779 Shale
2779 - 3010 Shale
3010 - 3170 Shale
3170 - 3332 Shale
3332 - 3558 Shale
3558 - 3678 Lime
3678 - 3718 Lime
3718 - 3778 Lime
3778 - 3880 Lime
3880 R.T.D..

Surface Pipe: Set 212 feet of 8 5/8" casing @ 217 feet
With 160 sacks of COM, 3% CC, 2% Gel

STATE OF KANSAS)
)ss:
COUNTY OF GRAHAM)

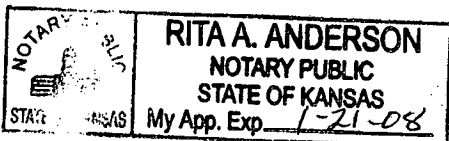
Andy Anderson of lawful age, does swear and states that the facts and statements herein are true and correct to the best of his knowledge.


Andy Anderson

Subscribed and sworn to before me this 11th day of July, 2005.

My commission expires:
January 21, 2008


Rita A. Anderson



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JOB LOG

SWIFT Services, Inc.

DATE 7-21-05 PAGE NO. 7

CUSTOMER Black Diamond Oil Co WELL NO. #1 LEASE Teel JOB TYPE Cement Part Lollar TICKET NO. 8521

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							on loc set up Trks 2 3/8 X 4 1/2 X ²¹⁰⁷ 2056 P.C.
	1050					1000		Locate P.C. Test Csg Open P.C.
	1110	2.5	3			250		injection rate
	1115	3.5	0			400		start cement 210sk SMD
		3.5	108/0			500		end cement/start displacement
	1150		8			300		cement displaced
								close P.C.
	1155					800		Test Csg run 3jts
	1205	3	0					reverse out
	1210		15					hole clean
								210sk SMD circ 20sk to pit
								High Packer Shane Vetro Richard T Services to Richard Landa
								Thank you
								Nick, Dan, & Rob

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CHARGE TO: *Black Diamond Oil Co*
 ADDRESS:
 CITY, STATE, ZIP CODE:

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TICKET No 8521
 PAGE 1 OF 1

WELL/PROJECT NO. *#1* LEASE *Teel* COUNTY/PARISH *Graham* STATE *Ks* CITY DATE *7-21-05* OWNER *Same*
 WELL TYPE *oil* WELL CATEGORY *Development* JOB PURPOSE *Cement Port Collar*
 CONTRACTOR *Chitos Well Service* RIG NAME/NO. SHIPPED VIA *2 ft* DELIVERED TO *Locations* ORDER NO.
 INVOICE INSTRUCTIONS:

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE <i>#103</i>	70	mi			4.00	280.00
578		1			Pump Charge Part Collar	1	ea			1250.00	1250.00
330		2			SMD Cement	210	skts			10.50	2205.00
276		2			Flocele	75	"			1.00	75.00
581		2			Cement Service Charge	300	skts			1.10	330.00
583		2			Drayage	1029.11	TM			1.00	1029.11

LEGAL TERMS: Customer hereby acknowledges and agrees to terms and conditions on the reverse side hereof which include, are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

SIGNED: *Shane Vetro* TIME SIGNED: *7-21-05*
Richard Park TIME SIGNED: *1245*

A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				5169	"
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Graham	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TAX	5.55%
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	5295.65

ALLIED CEMENTING CO., INC. 20012

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

SERVICE POINT:
Oakley

DATE <u>7-3-05</u>	SEC. <u>5</u>	TWP. <u>8^s</u>	RANGE <u>24^w</u>	CALLED OUT	ON LOCATION <u>10:00 AM</u>	JOB START <u>11:00</u>	JOB FINISH <u>11:15</u>
LEASE <u>Teel</u>	WELL # <u>1</u>	LOCATION <u>Hill City 9W-2N-14E</u>			COUNTY <u>Abraham</u>	STATE <u>Kan</u>	
OLD OR NEW (Circle one)				<u>S.S.</u>			

CONTRACTOR A+A Drils Co.

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 222'

CASING SIZE 8 5/8 DEPTH 219'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT 13 1/4 BBL

EQUIPMENT

OWNER Same

CEMENT AMOUNT ORDERED 160 sks com
3% CC - 2% CC

COMMON	<u>160 sks</u>	@	<u>10⁰⁰</u>	<u>1,600⁰⁰</u>
POZMIX		@		
GEL	<u>3 sks</u>	@	<u>14⁰⁰</u>	<u>42⁰⁰</u>
CHLORIDE	<u>5 sks</u>	@	<u>38⁰⁰</u>	<u>190⁰⁰</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>168 sks</u>	@	<u>160</u>	<u>26880</u>
MILEAGE	<u>64 pm sks</u>	@		<u>68544</u>
TOTAL				<u>2,78624</u>

PUMP TRUCK CEMENTER Walt

191 HELPER Wayne

BULK TRUCK

377 DRIVER Lunnio

BULK TRUCK

DRIVER

REMARKS:

Remount Drill Core

Thank You

CHARGE TO: Black Diamond Oil

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 670⁰⁰

EXTRA FOOTAGE @ _____

MILEAGE 68 miles @ 5⁰⁰ 340⁰⁰

MANIFOLD @ _____

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TOTAL 1,010⁰⁰

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PLUG & FLOAT EQUIPMENT

8 SKS

1- Surface Plug @ 55⁰⁰

@ _____

@ _____

@ _____

@ _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment
and furnish cementer and helper to assist owner or



CHARGE TO: Black Diamond Oil Co.
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

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 TICKET No 8507
 PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>Hays, KS</u> 2. <u>Ness City, KS</u> 3. 4.	WELL/PROJECT NO. <u>#1</u>	LEASE <u>Teel</u>	COUNTY/PARISH <u>Graham</u>	STATE <u>KS</u>	CITY	DATE <u>7-9-05</u>	OWNER <u>Sumc</u>
	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>A + A Drilling</u>	RIG NAME/NO.	SHIPPED VIA <u>HT</u>	DELIVERED TO <u>Location</u>	ORDER NO.	
	WELL TYPE <u>oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Concret Logging</u>	WELL PERMIT NO.	WELL LOCATION		
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #103	70	mi			4.00	280.00
578		1			Pump charge logging	1	ea	3880	'	1250.00	1250.00
281		1			Mud Flash	500	gal			75	375.00
221		1			KCL	2	gal			25.00	50.00
410		1			Guide Shoe	1	ea	4 1/2	"	80.00	50.00
401		1			insert float valve w/ fill tube	1	ea			110.00	110.00
402		1			Centralizers	6	ea			45.00	270.00
403		1			Baskets	2	ea			140.00	280.00
410		1			Top Plug	1	ea			70.00	70.00
404		1			Port Collar	1	ea			1600.00	1600.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X [Signature]
 DATE SIGNED 7-10-05 TIME SIGNED 6:45 A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				4365.00	
WE UNDERSTOOD AND MET YOUR NEEDS?				page 2	2574.57
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					6939.57
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Nick Korbe APPROVAL

Thank You!