

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 # 5786
Name: McGown Drilling, Inc.
Address: P.O. Box 299
City/State/Zip: Mound City, KS 66056
Purchaser: _____
Operator Contact Person: Doug McGown
Phone: (913) 795-2258
Contractor: Name: McGown Drilling, Inc.
License: 5786
Wellsite Geologist: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Avail.
 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. _____

07-20-05	07-20-05	07-28-05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 23102 ~~011-23042-00-00~~

County: Bourbon
NE NW NE Sec. 22 Twp. 24 S. R. 25 East West
330 feet from S (circle one) Line of Section
1650 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Hill Well #: 2-22

Field Name: _____
Producing Formation: Burgess

Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 389' 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 370
feet depth to surface w/ 50 sx cmt.

Drilling Fluid Management Plan Air II NCR 8-14-08
(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.: _____

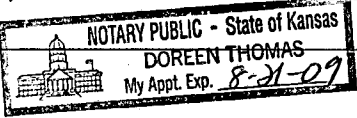
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: President Date: 8-18-05

Subscribed and sworn to before me this 18 day of August,
20 05.

Notary Public: [Signature]
Date Commission Expires: _____



KCC Office Use ONLY

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

Operator Name: McGown Drilling, Inc. Lease Name: Hill Well #: 2-22
 Sec. 22 Twp. 24 S. R. 25 East West County: Bourbon

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attached Sheet
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	8 3/4	6 1/2	8	20	Portland	5	none
Long String	6 1/8	2 3/8	4.5	370	Portland	50	none

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				

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Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type			Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		

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 checked="" 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 Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

HILL

#2-22

DEPTH

FORMATION

0-2'

Topsoil

2-13'

Shale

13-33'

Lime

33-37'

Shale

37-46'

Lime

46-133'

Shale

133-135'

Lime

135-245'

Shale

245-252'

Sand

252-265'

Shale

265-279'

Sand

279-319'

Shale

319-340'

Sand

340-346'

Shale

346-347'

Coal

347-356'

Shale

356-357'

Coal

357-379'

Sand

379-380'

Coal

380-389'

Shale

389'

Top Mississippi

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Big Sugar Lumber



"Everything To Build Your Home"

∞ ∞ TWO LOCATIONS ∞ ∞

Dolt center
 1005 CLARK STREET
 FORT SCOTT, KANSAS 66701
 (620) 223-5279
 FAX (620) 223-1505

411 MAIN STREET
 MOUND CITY, KANSAS 66056
 (913) 795-2210
 FAX (913) 795-2194

BIG SUGAR LUMBER-MOUND CITY
 WORKING HARD TO SERVE YOU BETTER!

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCES	TERMS	CLERK	DATE	TIME
325550				DUE 5TH OF MONTH	TL	7/28/05	9:52

SOLD TO

SHIP TO

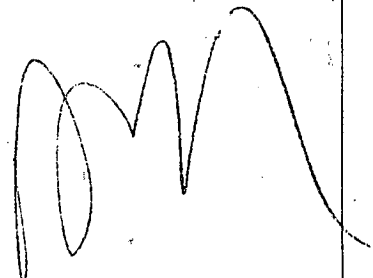
DOUG MCGOWN
 P.O. BOX 334
 MOUND CITY KS 66056

To Hammond
 Blacktop North 1
 mile + 1/2 mile East
 on South side
 9:30 A m Friday

TERMS: 565
 90 TOM LIKELY
 TAX : 031 KANSAS STATE TAX

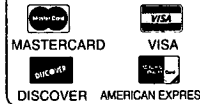
DO# 121753

 * INVOICE *

QUANTITY SHIPPED	QUANTITY ORDERED	U/M	ITEM NUMBER	DESCRIPTION	SUGG	NUMBER OF UNITS	BIG SUGAR PRICE	EXTENSION	
50		DG	CPDC	PORLAND CEMENT	7.19	50	6.47 /B5/	323.50	
50		EA	CPDM	POST SET FLY ASH 75#	3.29	50	2.96 /EA	148.00	
2		EA	CPDP	QUIKRETE PALLETS		2	12.50 /EA	25.00	
1		EA	90	DELIVERY CHARGE		1	25.00 /EA	25.00	
									
						** AMOUNT CHARGED TO STORE ACCOUNT **	554.35	TAXABLE	521.50
							NON-TAXABLE	0.00	
							SUBTOTAL	521.50	
							TAX AMOUNT	32.85	
							TOTAL AMOUNT	554.35	

CREDIT DISCLOSURE: ACCOUNTS NOT PAID IN FULL IN 30 DAYS AFTER BILLING DATE ABOVE ARE SUBJECT TO SERVICE CHARGE COMPUTED BEFORE DEDUCTING CURRENT PAYMENTS AND/OR CREDITS APPEARING ON MONTHLY STATEMENT. KANSAS LIEN RIGHT LAWS APPLY ON MATERIAL PURCHASED FOR YOUR HOME. SERVICE CHARGE IS 1.5% PER MONTH (ALL RETURNS MUST BE ACCOMPANIED BY TICKET.) 20% RESTOCKING CHARGE ON NON-STOCK RETURN ITEMS.

We accept the following credit cards



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