

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33019
Name: Rosewood Resources, Inc.
Address: 2711 N. Haskell Ave., Suite 2800, LB 22
City/State/Zip: Dallas, TX 75201
Purchaser: _____
Operator Contact Person: Tom Roelfs
Phone: (970) 324-1686
Contractor: Name: Advanced Drilling Technologies LLC
License: 33532
Wellsite Geologist: Steven VonFeldt

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>10/20/2006</u>	<u>10/22/2006</u>	<u>10/23/2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 181-20443-0000
County: Sherman
NW SE NE SW Sec. 29 Twp. 7S S. R. 39 East West
1807 feet from (S) N (circle one) Line of Section
2013 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Leonard Well #: 23-29

Field Name: Goodland
Producing Formation: Niobrara
Elevation: Ground: 3602' Kelly Bushing: 3614'

Total Depth: 1315' Plug Back Total Depth: 1268'
Amount of Surface Pipe Set and Cemented at 380' csg @ 393 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.

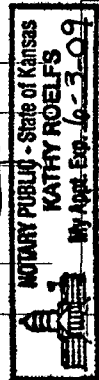
Drilling Fluid Management Plan ATI NHG 30-08
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 200 bbls
Dewatering method used Evaporation

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.

Signature: Jannell Gevel
Title: Production Asst. Date: 2-16-07
Subscribed and sworn to before me this 19 day of February
20 07.
Notary Public: Kathy Roelfs
Date Commission Expires: 6-30-09



KCC Office Use ONLY

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

RECEIVED

MAR 02 2007

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Operator Name: Rosewood Resources, Inc. Lease Name: Leonard Well #: 23-29
 Sec. 29 Twp. 7S S. R. 39 East West County: Sherman

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Platform Express Resistivity, Porosity, Density ML-GR	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"><input checked="" type="checkbox"/> Log</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;"><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Niobrara</td> <td>1032'</td> <td>KB</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Niobrara	1032'	KB
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample								
Name	Top	Datum								
Niobrara	1032'	KB								

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	9 1/2"	7"	17#	393'	Neat	100'	
Production	6 1/4"	4 1/2"	10.5#	1267.81'	Neat	65	2% cal.

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
2	1036' to 1074'	Frac w/48,060 of Mavfoam & 100,180#	
		16/30 Badger sand scf N2	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumerd Production, SWD or Enhr. 2/8/2007		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		
	none	21					

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 _____

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SCHAAL DRILLING, CO.
PO BOX 416
BURLINGTON, CO. 80807
719-346-8032
FIELD REPORT
SURFACE CASING, DRILLING AND CEMENTING

DRILLING DATE 10-20-06

WELL NAME & LEASE # Leonard 23-29

MOVE IN, RIG UP, DIG PITS ETC. DATE 10-20-06 TIME 12:00 AM PM

SPUD TIME 12:30 AM PM SHALE DEPTH 300 TIME 1:45 AM PM

HOLE DIA. 9 1/2 FROM 0 TO 383 TD TIME 2:30 AM PM

CIRCULATE, T.O.O.H., SET 380.00 FT CASING 393.00 KB FT DEPTH

9 JOINTS 7 OD #/FT 14 15.5 17 20 23

PUMP 100 SAC CEMENT 575 GAL DISP. CIRC. 4 BBL TO PIT

PLUG DOWN TIME 3:45 AM PM DATE 10-20-06

CEMENT LEFT IN CSG: 50 FT
CENTRALIZER 1

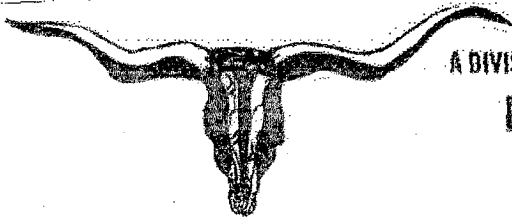
TYPE: PORTLAND CEMENT I/II ASTM C 150
CEMENT COST \$ 1574.09

ELEVATION 3602
+12KB 3614

PIPE TALLY

1. 42.37
2. 42.38
3. 42.30
4. 41.88
5. 42.31
6. 42.37
7. 41.66
8. 42.34
9. 42.39
10.
11.
12.
13.
14.
TOTAL 380.00

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A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80759
Phone: 970-848-0799 Fax: 970-848-0799

**FIELD SERVICE TICKET
AND INVOICE**

DATE 10-23-06 TICKET NO. 0864

DATE OF JOB	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.
CUSTOMER <u>RRT</u>		LEASE <u>Leonard 23-29</u>	WELL NO.				
ADDRESS		COUNTY	STATE				
CITY	STATE	SERVICE CREW <u>MACE-UAN-Jorge</u>					
AUTHORIZED BY	EQUIPMENT						
TYPE JOB: <u>Longhorn</u>	DEPTH FT.	CEMENT DATA: BULK <input type="checkbox"/>	SAND DATA: SACKS <input type="checkbox"/>	TRUCK CALLED		DATE AM TIME	
SIZE HOLE: <u>6 1/8</u>	DEPTH FT.	SACKS <u>65</u>	BRAND <u>A</u>	TYPE <u>1-11</u>	% GEL	ARRIVED AT JOB	
SIZE & WT. CASTING <u>4 1/2 1000</u>	DEPTH FT.	ADMIXES			START OPERATION		
SIZE & WT. D PIPE OR TUBING	DEPTH FT.	WEIGHT OF SLURRY: <u>198</u>			LBS. / GAL. <u>6.285</u>	FINISH OPERATION	
TOP PLUGS	TYPE:	VOLUME OF SLURRY <u>1.32</u>			LBS. / GAL. <u>15</u>	RELEASED	
<u>105</u>		SACKS CEMENT TREATED WITH <u>5</u>			% OF CALIUM	MILES FROM STATION TO WELL	
<u>105</u>	MAX DEPTH FT.	MAX PRESSURE			PS.I.		

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).
The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract (or services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without written consent of an officer of Advanced Drilling Technologies, LLC.

SIGNED: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
001-2	Depth charge - Cement - Milwaukee Asper Contract				4000 00
300-2	4 1/2 Accusal Floushot	4			267 07
300-4	4 1/2 Lockdown Baffle plug	1			226 00
300-6	4 1/2 Centralizers	8			296 00
300-8	4 1/2 Scratches	10			348 00
300-12	7" Centralizers	2			36 44
400-2	CLASMA	2.5 gal			118 12
400-4	KCL	100 LB			286 00
					5322 65
0400	FRESH WATER 10.1				
0405	Cement 10.6				
0415	Displacement 20.1				
0430	Bump plug @ 200				
SUB TOTAL					
SERVICE & EQUIPMENT				% TAX ON \$	
MATERIALS				% TAX ON \$	
TOTAL					

ACID DATA:			
	GALLONS	%	ADDITIVES
ICL			
ICL			

SERVICE REPRESENTATIVE: _____
FIELD SERVICE ORDER NO. _____

THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: _____
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

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