

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

SEP 15 2005

WELL COMPLETION FORM

KCC WICHITA

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6470
Name: Schankie Well Service, Inc.
Address: 1006 SW Boulevard, P O Box 397
City/State/Zip: Madison, Kansas 66860
Purchaser: SemGroup
Operator Contact Person: Randall Schankie
Phone: (620) 437-2595
Contractor: Name: Rig 6 Drilling Co., Inc.
License: 30567
Wellsite Geologist: Dean Seeber

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. _____

10-18-04 10-22-04 10-22-04

Spud Date or 10-18-04 Date Reached TD 10-22-04 Completion Date or 10-22-04 Recompletion Date

API No. 15 073-23994-DD-DD

County: Greenwood

CS2SESW Sec. 22 Twp. 23 S. R. 11 East West

330 feet from (S) N (circle one) Line of Section

1980 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW (SW)

Lease Name: Carver Well #: 1

Field Name: Seeley-Wick

Producing Formation: Bartlesville

Elevation: Ground: 1110' Kelly Bushing: NA

Total Depth: 2004' Plug Back Total Depth: 1986'

Amount of Surface Pipe Set and Cemented at 100 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 Ait II NCR 8-19-08
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used Vacuum Truck

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: Secretary Date: 9-14-05

Subscribed and sworn to before me this 14th day of September

Notary Public: Rachel D. Ballard
Date Commission Expires: 5-6-06

RACHEL D. BALLARD
Notary Public - State of Kansas
My Appt. Expires 5-6-06

KCC Office Use ONLY

NO Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Schankie Well Service, Inc. Lease Name: Carver Well #: 1
 Sec. 22 Twp. 23 S. R. 11 East West County: Greenwood

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run: Gamma Ray-Neutron</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Cherokee</td> <td>1698</td> <td>-588</td> </tr> <tr> <td>Upper Squirrel</td> <td>1704</td> <td>-594</td> </tr> <tr> <td>Lower Squirrel</td> <td>1742</td> <td>-632</td> </tr> <tr> <td>Ardmore</td> <td>1792</td> <td>-682</td> </tr> <tr> <td>Cattleman</td> <td>1804</td> <td>-694</td> </tr> <tr> <td>Bartlesville</td> <td>1929</td> <td>-819</td> </tr> <tr> <td>Base Bartlesville</td> <td>1966</td> <td>-856</td> </tr> <tr> <td>RTD</td> <td>2002</td> <td>-892</td> </tr> </table>	Name	Top	Datum	Cherokee	1698	-588	Upper Squirrel	1704	-594	Lower Squirrel	1742	-632	Ardmore	1792	-682	Cattleman	1804	-694	Bartlesville	1929	-819	Base Bartlesville	1966	-856	RTD	2002	-892
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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	# Sacs Used	Type and Percent Additives
Surface	NA	8 5/8"	NA	100'	Common	30	NA
Production	6 3/4"	4 1/2"	11.6#	1998'	Common	250	2% gel

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
1/2'	1930' - 1940' 6 shots	500 gal 15% HCL Acid 10000# Sand Frac	

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2 3/8"	1934'	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumerd Production, SWD or Enhr.			Producing Method					
8-1-05			<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			
	3	0	75	NA	40			

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 2273
 LOCATION Eureka
 FOREMAN Brad Butler

TREATMENT REPORT & FIELD TICKET
 CEMENT

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-22-04	7359	Carver #1	22	23	11E	Greenwood
CUSTOMER Shankie Well Service			Rig 6 Dag.			
MAILING ADDRESS P.O. Box 397			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Madison			STATE Ks.	ZIP CODE 66860		
			446	Rick		
			440	Randy		
			439	Anthony		
			436	Jim		

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 2003' CASING SIZE & WEIGHT 4 1/2" 9.5 lb, 11.6 lb
 CASING DEPTH 1998' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13", 14" SLURRY VOL 64 Bbl. WATER gal/sk _____ CEMENT LEFT in CASING 6'
 DISPLACEMENT 3 1/2 Bbls. DISPLACEMENT PSI 700 ~~1100~~ Loaded Plug RATE 4 BPM.

REMARKS: Safety Meeting - Rig up to 4 1/2" casing. Break circulation with 10 Bbl. fresh water.
Mixed 125 SKs. 60/40 Pozmix cement w/ 6% Gel, 1/4 lb. P^w/sk of Flocele or 13% P^w/gal. Tail in with
125 SKs. Regular cement w/ 2% Gel, 1% CACL₂ and 4 lb. P^w/sk of KOL-SEAL at 14 lb. P^w/gal. Shutdown
washout pump & lines - Release Plug - Displace Plug with 3 1/2 Bbls. water.
Final pumping at 700 PSI - Bumped Plug to 1100 PSI - wait 2 min - Release Pressure
Float Held - close casing in w/ 0 PSI - Good cement returns to surface = 15 Bbl. slurry
Job complete - Teardown

Note: Rotated Pipe during cementing procedure
 "Thank you"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE RECEIVED	710.00	710.00
5406	20	MILEAGE SEP 15 2005	2.35	47.00
1131	125 SKs.	60/40 Pozmix cement KCC WICHITA	7.30	912.50
1118	6 1/2 SKs.	Gel 6%	12.40	80.60
1107	1 1/2 SK.	Flocele 1/4" P ^w /sk	40.00	60.00
1104	125 SKs.	Regular - Class A cement	8.90	1112.50
1118	2 1/2 SKs.	Gel 2%	12.40	31.00
1102	2 SK	CACL ₂ 1%	35.70	71.40
1110-A	10 SK.	KOL-SEAL 4" P ^w /sk	15.75	157.50
5407A	11.5 Ton	20 miles - Bulk Truck	7.85	195.50
5502 C	3 Hrs.	80 Bbl. VAC Truck	78.00	234.00
1123	3000 GAL	City water	11.50	34.50
4404	1	4 1/2" Top Rubber Plug	35.00	35.00
5611	1	Rental on Rotating Head	40.00	40.00
		6.3%	SALES TAX	157.18
			ESTIMATED TOTAL	3878.69

Shankie

TITLE

193620

DATE 10-22-04