

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

Ka
McG
6/6/08

037-21976-0000

Operator: License # 6766
Name: N & W Enterprises, Inc
Address: 1111 S Margrave
City/State/Zip: Fort Scott, KS 66701
Purchaser: Plains Marketing, LLC
Operator Contact Person: Tom Norris
Phone: (620) 223-6559
Contractor: Name: Hat Drilling, LLC
License: 33734
Wellsite Geologist: _____

API No. 15 - 3121976
County: Crawford
SE SW NW Sec. 29 Twp. 28 S. R. 22 East West
2805 feet from (S) N (circle one) Line of Section
3465 feet from (E) W (circle one) Line of Section

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Hammerbacher Well #: 3

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. _____

Field Name: Walnut SE
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 428 Plug Back Total Depth: 424
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 438
feet depth to Top w/ 55 sx cmt.

03/30/2008 03/31/2008 03/31/2008
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(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.: _____

Alt 2 - Dig - 6/30/08

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.

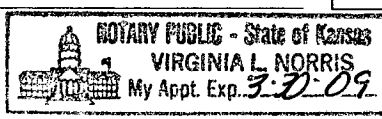
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: *Thomas L Norris*
Title: Pres. Date: 5/31/08
Subscribed and sworn to before me this 31st day of May
08
Notary Public: *Virginia L Norris*
Date Commission Expires: 3-30-09

KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
JUN 06 2008



CONSERVATION DIVISION
WICHITA, KS

N & W Enterprises Inc

Ticket #: 66

1111 S. Margrave
Fort Scott, KS 66701
620-223-6559

TREATMENT REPORT & FIELD TICKET CEMENT

DATE		LEASE NAME					
5/31/2008		Hammerbacher					
SECTION	TOWNSHIP	RANGE	COUNTY	SPOT LOCATION			WELL #
29	28	22	Crawford	SE-SW-NW-	2805 feet from South Line	3465 feet from East Line	3

Job Type: Long string Hole Size: 5 5/8 Hole Depth: 428 Casing Size & Weight: 2 7/8
 Casing Depth: 424 Drill Pipe: _____ Tubing: _____ Other: _____
 Slurry Weight: _____ Slurry Vol: _____ Water gal/sk: _____ Cement Left in Casing: _____
 Displacement: _____ Displacement PSI: _____ Mix PSI: _____ Rate: _____

Remarks: Established circulation to flush hole, circulated cement to surface, flushed pump clean, pumped rubber plug to bottom shut in pressure 700 lbs.

Quantity: Description of Service

55 sacks	Portland #1 cement
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Authorization: Thomas L. Lewis

Title: Prod.

Date: 5/31/08