

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM ORIGINAL  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 3532 Inc.  
Name: CMX, Inc.  
Address: 1551 N. Waterfront Parkway - Suite 150  
City/State/Zip: Wichita, Kansas 67206  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Douglas H. McGinness II  
Phone: (316) 269-9052  
Contractor: Name: Duke Drilling Co., Inc.  
License: 5929  
Wellsite Geologist: Ken LaBlanc

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. \_\_\_\_\_

09-19-06 09-29-06  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-23051-0000  
County: Barber County, Kansas  
NW SW NE Sec. 8 Twp. 30 S. R. 14  East  West  
1680 feet from S (N) (circle one) Line of Section  
2240 feet from (E) W (circle one) Line of Section

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

Lease Name: Lenkner Well #: 2  
Field Name: Wildcat

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 1916' Kelly Bushing: 1927'

Total Depth: 4700' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 335 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 PA AH INH 6-18-08  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume 800 bbls  
Dewatering method used hauled off

Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Benco

Lease Name: Mae SWD License No.: 32613  
Quarter \_\_\_\_\_ Sec. 7 Twp. 32 S. R. 11  East  West  
County: Barber Docket No.: CD-78217

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: 1/11/07  
Subscribed and sworn to before me this 11<sup>th</sup> day of January 2007.  
Notary Public: Donna L. May-Murray  
Date Commission Expires: 2/7/08

RECEIVED  
JAN 16 2007  
KCC WICHITA

KCC Office Use ONLY  
Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
Wireline Log Received  
Geologist Report Received  
UIC Distribution

DONNA L. MAY-MURRAY  
Notary Public State of Kansas  
My Appt. Expires 2/7/08

Operator Name: CMX, Inc. Lease Name: Lenkner GU Well #: 2  
 Sec. 8 Twp. 30 S. R. 14  East  West County: Barber County, Kansas

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 checked="" type="checkbox"/> Yes <input 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: <u>CDNL, DIL, Sonic</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Tarkio</td> <td>3180</td> <td>-1250</td> </tr> <tr> <td>Cherokee Sh.</td> <td>4472</td> <td>-2542</td> </tr> <tr> <td>Viola</td> <td>4501</td> <td>-2571</td> </tr> <tr> <td>Simp. Sh.</td> <td>4546</td> <td>-2616</td> </tr> <tr> <td>Simp. Sand.</td> <td>4558</td> <td>-2628</td> </tr> <tr> <td>RTD</td> <td>4695</td> <td>-2765</td> </tr> </tbody> </table>	Name	Top	Datum	Tarkio	3180	-1250	Cherokee Sh.	4472	-2542	Viola	4501	-2571	Simp. Sh.	4546	-2616	Simp. Sand.	4558	-2628	RTD	4695	-2765
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RTD	4695	-2765																				

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	12-1/4"	8-5/8"	23#	335'	60/40 Poz	250	3%cc 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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method <input 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, Sumit ACO-18.)*      METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

24019

TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

MEDICINE LODGE

DATE <u>9-30-06</u>	SEC. <u>8</u>	TWP. <u>30S</u>	RANGE <u>14W</u>	CALLED OUT <u>9:45 am</u>	ON LOCATION <u>12:45 pm</u>	JOB START <u>3:15 pm</u>	JOB FINISH <u>4:15 pm</u>
LEASE <u>LENKER</u>	WELL # <u>2 GU</u>	LOCATION <u>SUN CITY, S N TO CURVE, 2 3/4</u>			COUNTY <u>BARBER</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>E, S/INTO</u>				

CONTRACTOR DUKE-ES

TYPE OF JOB ROTARY PLUG

HOLE SIZE 7 7/8" T.D. 700'

CASING SIZE 8 5/8" DEPTH 335'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE 4 1/2" DEPTH 700'

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX 300 MINIMUM 50

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT FRESH WATER

**EQUIPMENT**

PUMP TRUCK CEMENTER BILL M.

# 360 HELPER DWAYNE W.

BULK TRUCK

# 353 DRIVER GREG G.

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

1ST PLUG 700', LOAD HOLE, PUMP 50 SK 60:40:6,  
DISPLACE WITH FRESH WATER, 2nd PLUG 350',  
LOAD HOLE, PUMP 50 SK 60:40:6, DISPLACE WITH  
FRESH WATER, 3rd PLUG 60', LOAD HOLE, PUMP  
20 SK 60:40:6, CIRCULATE CEMENT TO  
SURFACE, PLUG RATCHMOUSE HOLES WITH  
25 SK 60:40:6.

CHARGE TO: CMX, INC.

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE [Signature]

OWNER CMX, INC.

CEMENT  
AMOUNT ORDERED 145 SK 60:40:6

COMMON	<u>87</u>	<u>A</u>	@	<u>10.65</u>	<u>926.55</u>
POZMIX	<u>58</u>		@	<u>5.80</u>	<u>336.40</u>
GEL	<u>8</u>		@	<u>16.65</u>	<u>133.20</u>
CHLORIDE			@		
ASC			@		

HANDLING	<u>153</u>	@	<u>1.90</u>	<u>290.70</u>
MILEAGE	<u>25 x 153 x .09</u>			<u>344.25</u>
TOTAL				<u>2031.10</u>

**SERVICE**

DEPTH OF JOB	<u>700'</u>			
PUMP TRUCK CHARGE				<u>815.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>25</u>	@	<u>6.00</u>	<u>150.00</u>
MANIFOLD		@		
		@		
		@		

TOTAL 965.00

**PLUG & FLOAT EQUIPMENT**

ANY APPLICABLE TAX @ \_\_\_\_\_  
WILL BE CHARGED  
UPON INVOICING TOTAL \_\_\_\_\_

TAX \_\_\_\_\_  
TOTAL CHARGE [Crossed out]

DISCOUNT [Crossed out] "IF PAID IN 30 DAYS"

JOE LEWISTON  
PRINTED NAME

# ALLIED CEMENTING CO., INC. 24832

TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

*Medicine Lodge, KS*

DATE <i>19 Sep 06</i>	SEC <i>8</i>	TWP. <i>30s</i>	RANGE <i>14w</i>	CALLED OUT <i>5:30 AM</i>	ON LOCATION <i>8:00 AM</i>	JOB START <i>8:15 AM</i>	JOB FINISH <i>8:45 AM</i>
LEASE <i>Lenker</i>	WELL # <i>2 GU</i>	LOCATION <i>Sun City, KS, 5N, 2 3/4 E,</i>			COUNTY <i>Barber</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one) <u>NEW</u>			<i>Sinto</i>				

CONTRACTOR *Duke #5*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *338*

CASING SIZE *8 5/8* DEPTH *335*

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX *250* MINIMUM *-*

MEAS. LINE \_\_\_\_\_ SHOE JOINT *N/A*

CEMENT LEFT IN CSG. *15'*

PERFS. \_\_\_\_\_

DISPLACEMENT *20 1/4 Bbls Fresh H<sub>2</sub>O*

EQUIPMENT

OWNER *CMX, inc*

CEMENT AMOUNT ORDERED *250s x 60:10:2 + 3% occ*

COMMON	<i>150 A</i>	@	<i>10.65</i>	<i>1597.50</i>
POZMIX	<i>100</i>	@	<i>5.80</i>	<i>580.00</i>
GEL	<i>4</i>	@	<i>16.65</i>	<i>66.60</i>
CHLORIDE	<i>8</i>	@	<i>46.60</i>	<i>372.80</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>262</i>	@	<i>1.90</i>	<i>497.80</i>
MILEAGE	<i>25 x 262 x</i>		<i>1.09</i>	<i>589.50</i>
				TOTAL <i>3704.20</i>

PUMP TRUCK # *352* CEMENTER *D. Felio* HELPER *M. Coley*

BULK TRUCK # *364* DRIVER *T. Demarzo*

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

*Pipe on Bttm, Break Circ, Pump Fresh H<sub>2</sub>O Mix  
250s x Cement, Stop Pumps, Release Plug, Start  
Disp, w Fresh H<sub>2</sub>O, See increase in PST,  
Slow rate, Stop Pump at 20 1/4 Bbls total  
Fresh H<sub>2</sub>O Disp, Shut in, Release line PST,  
Cement Did Circ.*

SERVICE

DEPTH OF JOB	<i>335</i>		
PUMP TRUCK CHARGE	<i>0-300'</i>		<i>815.00</i>
EXTRA FOOTAGE	<i>35'</i>	@	<i>.65 22.75</i>
MILEAGE	<i>25</i>	@	<i>6.00 150.00</i>
MANIFOLD	<i>headental</i>	@	<i>100.00 100.00</i>
		@	
		@	

CHARGE TO: *CMX, inc.*

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL *1087.75*

*8 5/8"* PLUG & FLOAT EQUIPMENT

	@		
<i>1- Wooden Plug</i>	@	<i>60.00</i>	<i>60.00</i>
	@		
	@		
ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING			
			TOTAL <i>60.00</i>

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TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE *[Signature]*

*Tom Livingston*  
PRINTED NAME