

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 # 33258
Name: Sabine Operating Services, Inc.
Address: 896 N. Mill St. #203
City/State/Zip: Lewisville, Texas 75057
Purchaser: TBD
Operator Contact Person: Eric Oden
Phone: (903) 283-1094
Contractor: Name: same
License: _____
Wellsite Geologist: None
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. _____
9/28/06 10/04/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

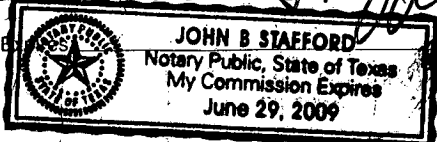
API No. 15 - 087-20646-00-00
County: Jefferson
SW NW NE NW Sec. 9S Twp. 20E S. R. 20 East West
585' feet from S (N) (circle one) Line of Section
1600' feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
_____ (circle one) NE SE NW SW
Lease Name: Noll Well #: 2-06
Field Name: Zachariah
Producing Formation: Lwr McLouth
Elevation: Ground: 941 Kelly Bushing: _____
Total Depth: 1525 Plug Back Total Depth: 1520
Amount of Surface Pipe Set and Cemented at 40' 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 AH II NH 7-11-08
(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: 5-07-2007
Subscribed and sworn to before me this 5th day of MAY
07
Notary Public: [Signature]
Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
_____ Geologist Report Received **RECEIVED**
_____ UIC Distribution **KANSAS CORPORATION COMMISSION**
JUN 11 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Sabine Operating Services, Inc. Lease Name: Noll Well #: 2-06
 Sec. 9S Twp. 20E S. R. East West County: Jefferson

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 checked="" type="checkbox"/> Yes <input 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: Dual Induction, Dual Compensated Porosity, Sonic Cement Bond	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Marmaton</td> <td>794</td> <td>+147</td> </tr> <tr> <td>Cherokee Shale</td> <td>888</td> <td>+53</td> </tr> <tr> <td>Upper McLouth</td> <td>1,336</td> <td>-395</td> </tr> <tr> <td>Middle McLouth</td> <td>1,339</td> <td>-398</td> </tr> <tr> <td>Lower McLouth</td> <td>1,348</td> <td>-407</td> </tr> <tr> <td>Base McLouth</td> <td>1,375</td> <td>-434</td> </tr> <tr> <td>Mississippian</td> <td>1,375</td> <td>-434</td> </tr> </table>	Name	Top	Datum	Marmaton	794	+147	Cherokee Shale	888	+53	Upper McLouth	1,336	-395	Middle McLouth	1,339	-398	Lower McLouth	1,348	-407	Base McLouth	1,375	-434	Mississippian	1,375	-434
Name	Top	Datum																							
Marmaton	794	+147																							
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Base McLouth	1,375	-434																							
Mississippian	1,375	-434																							

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	11 5/8	8 5/8	23#	40'	Class A	30	.02 Gel, .02 Ccl
Production	6.75	4.5'	9.5#	1520'	50/50 POZ	199	.06 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 (Amount and Kind of Material Used)	Depth
4	1349'-1358'	Acidize with 500 gal 15% HCL	1358'

TUBING RECORD	Size 2 3/8	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. TBD	Producing Method <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. TBD	Gas Mcf TBD	Water Bbls. TBD	Gas-Oil Ratio TBD
				Gravity 22

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 _____

RECEIVED
 KANSAS CORPORATION COMMISSION

JUN 11 2007

CONSERVATION DIVISION
 WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 08925
LOCATION Ottawa KS
FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-4-06	7886	No11 # 1-06	9	9	20	J.F.
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Sabine Operating Ser. Inc			506	Fred Mader	505-7106	Matt Mader
MAILING ADDRESS			495	Casey		
% Fred Oden 896 N. Mill St Ste 203			510	Garland		
CITY	STATE	ZIP CODE	237	Red Bos.		
Lewisville	Tx	75057				

JOB TYPE Long string HOLE SIZE 6 3/4 HOLE DEPTH 1524 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 1520 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 24.1 DISPLACEMENT PSI _____ MIX PSI _____ RATE 6 BPM

REMARKS: Establish Circulation. Mix Pump 20 BBL Fresh Water Flush
w/ 1 Gal ESA-41 (soap). Mix Pump 94 sks 50/50 Por Mix
Cement w/ 6 1/2 Gal 1/4" Flo Seal. Follow w/ 105 sks OWC Cement
w/ 1/4" Flo Seal per sack. Flush pump & lines clean. Displace
4 1/2" Rubber plug to casing TD. Pressure to 700#. Release
pressure to set Flood Show. Check Plug depth w/ wireline.
Fred Mader

HAT Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	495	800 ⁰⁰
5406	60 mi	MILEAGE Pump Truck	495	189 ⁰⁰
5407A	4.888 Ton	Ton Mileage	510	307 ⁹⁶
5407B	3.948 Ton	Mileage	237	275 ⁰⁰
5501C	5 hrs	Transport 505-7106		490 ⁰⁰
1124	89 sks	50/50 Por Mix Cement		787 ⁶⁵
1126	105 sks	OWC Cement		1538 ²⁵
7118B	474 #	Premium Gel		66 ³⁶
1107	50 #	Flo Seal		90 ⁰⁰
1238	1 Gal	ESA-41 (soap)		33 ⁷⁵
4404	1	4 1/2 Rubber Plug		40 ⁰⁰
		Sub Total		4617. ⁹⁵
		Tax @ 6.3%		161. ⁰³
		SALES TAX ESTIMATED TOTAL		4778. ⁹⁸

RECEIVED
KANSAS CORPORATION COMMISSION
JUN 11 2007
CONSERVATION DIVISION
WICHITA, KS

AUTHORIZATION Watt 209691

TITLE _____

DATE _____

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 08899
LOCATION Ottawa KS
FOREMAN Fred Maden

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-28-06	7886	Well # 2-06	9	9	20	LV
CUSTOMER			TRUCK #			
Sabine Operating Ser. Inc.			DRIVER			
MAILING ADDRESS			TRUCK #			
% Fred Odan			DRIVER			
875 Mill St Ste 203			506			
CITY			510			
Lewisville			Ken Ham			
STATE			505-T106			
TX			Max Mad			
ZIP CODE			75057			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 42' CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 42' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 10'
 DISPLACEMENT 2588L DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish Circulation. Mix & Pump 30 sks Portland A
Cement w/ 2% Gel 2% Calcium Chloride 4# Flo Seal. Circulate
Cement to Surface. Displace casing clean w/ 2.5 BBL
Fresh Water. Shut in Casing. Put remaining water
into drilling pits.

Fred Maden

HAT Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE Surface Cement	164	620.00
5406	60 mi	MILEAGE Pump Truck	164	189.00
5407	Minimum	Turn Mileage	503	275.00
5501C	5 hrs	Transport 505-T106		490.00
1104S	30 sks	Class A Portland Cement		337.50
1115B	56#	Premium Gel		7.84
1102	56#	Calcium Chloride		35.84
1107	8#	Flo Seal		14.40
Sub Total				1969.58
Tax @ 6.3%				24.92
RECEIVED KANSAS CORPORATION COMMISSION				
JUN 11 2007				
CONSERVATION DIVISION W/CB/ABE/STAX				
ESTIMATE TOTAL				1994.50

AUTHORIZATION _____

TITLE W# 209531

DATE _____