

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5786
Name: McGown Drilling, Inc.
Address: P.O. Box K
City/State/Zip: Mound City, KS 66056
Purchaser: _____
Operator Contact Person: Doug McGown
Phone: (913) 795-2258
Contractor: Name: McGown Drilling, Inc.
License: 5786
Wellsite Geologist: _____
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. _____

<u>3-17-07</u>	<u>3-21-07</u>	<u>4-17-07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-23228-0000
County: Bourbon
C NW NW Sec. 22 Twp. 24 S. R. 25 East West
660 feet from S / (circle one) Line of Section
660 feet from E / (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Emmerson Farms Well #: 4-22
Field Name: _____
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 410 Plug Back Total Depth: _____
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 400
feet depth to surface w/ 63 sx cmt.
Alk 2 - Dog 7/15/08
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.: _____

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: Doug S. McGown
Title: Secretary Date: 6-2-08
Subscribed and sworn to before me this 2nd day of June
20 08
Notary Public: Doreen Thomas
Date Commission Expires: _____



KCC Office Use ONLY

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

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JUN 05 2008

Operator Name: McGown Drilling, Inc. Lease Name: Emmerson Farms Well #: 4-22
 Sec. 22 Twp. 24 S. R. 25 East West County: Bourbon

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum *See Attached Sheet
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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	12 1/4	8 5/8	20	20	Portland	5	none
Long String	6 3/4	4 1/2	9.5	400	50/50 Poz	63	none

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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, Submit ACO-1B.)* METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

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EMMERSON FARI

#4-22

DEPTH	FORMATION
0-4'	Soil
4-16'	Clay
16-28'	Shale
28-48'	Lime
48-113'	Shale
113-115'	Lime
115-142'	Shale
142-144'	Lime
144-157'	Shale
157-158'	Coal
158-209'	Shale
209-210'	Coal
210-262'	Shale
262-275'	Sand
275-310'	Shale
310-352'	Sand
352-375'	Shale
375-389'	Sand
389-392'	Coal
392-399'	Shale
399-410'	Lime
410'	TD

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CONSERVATION DIVISION
WICHITA, KS

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

TICKET NUMBER 15443
 LOCATION Ottawa
 FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
4-17-07	5363	Emmenson Farms 4.22	22	24	25	BB	
CUSTOMER McGowan Drilling MAILING ADDRESS P.O. Box 334 CITY Mound City STATE KS ZIP CODE 66056			TRUCK # DRIVER TRUCK # DRIVER				
			576 Alan M				
			368 Harold B				
			221 Eric Powell				
			570 Ken Hamric				
JOB TYPE	long string	HOLE SIZE	6 3/4	HOLE DEPTH	410	CASING SIZE & WEIGHT	4 1/2
CASING DEPTH	400'	DRILL PIPE		TUBING		OTHER	
SLURRY WEIGHT		SLURRY VOL		WATER gal/sk		CEMENT LEFT in CASING	
DISPLACEMENT		DISPLACEMENT PSI		MIX PSI		RATE	

REMARKS: Established gate. Mixed & pumped 100# gel followed by 5 bbl water. Pumped 1 1/2 bbl dye followed by 65.5x 50/150 po2. 2% gel. Circulated dye to surface. Flushed pump clean. Pumped 4 1/2 plug to casing TD. Well held 800 PSI. Set float. Checked depth with wireline. Circulated 4 bbl cement returns.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	368	840.00
5406	10	MILEAGE from other well	368	33.00
5402	400'	casing footage	368	N/A
5407	min	tax miles	510	285.00
5502C, 10	1 1/2	80 gal		135.00
1118B	228#	gel		34.20
1124	63.5x	50/150 po2		557.35
4404	1	4 1/2 plug		40.00
			Sub.	1924.75
			6.3%	39.80
			SALES TAX	39.80
			ESTIMATED TOTAL	1964.55

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AUTHORIZATION WO# 213065 / # 213066 TITLE _____ DATE _____