

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4175
 Name: Harold Dvorachek dba Quest Dev. Co.
 Address 1: P.O. Box 413
 Address 2: _____
 City: Iola State: KS Zip: 66749 + _____
 Contact Person: Harold Dvorachek
 Phone: (620) 365-5862
 CONTRACTOR: License # 33734
 Name: Hat Drilling
 Wellsite Geologist: None
 Purchaser: CMT
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 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. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
Aug. 27, 2008 Aug. 28, 2008 Oct. 06, 2008
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 001-29838-0000
 Spot Description: _____
NE SW SW SW Sec. 26 Twp. 25 S. R. 18 East West
580 Feet from North / South Line of Section
580 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Allen
 Lease Name: Works Well #: 6
 Field Name: Humboldt-Chanute
 Producing Formation: Cattleman Sand
 Elevation: Ground: 986 Kelly Bushing: _____
 Total Depth: 854 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: 847
 feet depth to: Surface w/ 125 ATZ-Dlg-2/3/09 ^{sx cmf}

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content: N/A 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: H. Dvorachek
 Title: OWNER Date: 12/04/08
 Subscribed and sworn to before me this 4 day of December,
 20 08
 Notary Public: Lori D. Edge
 Date Commission Expires: 02/03/2010

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
 KANSAS CORPORATION COMMISSION



DEC 08 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Harold Dvorachek dba Quest Dev. Co. Lease Name: Works Well #: 6
 Sec. 26 Twp. 25 S. R. 18 East West County: Allen

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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Cattleman Sand 810' +176 <div style="text-align: center;"> RECEIVED KANSAS CORPORATION COMMISSION DEC 08 2008 CONSERVATION DIVISION WICHITA, KS </div>
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CASING RECORD <input checked="" 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"	8 5/8"	24.7	20	Portland	6	
Production	5 5/8"	2 7/8"	7.77	850	OWC	125	

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
2	12 shots 811' to 817'	75gal 15% HCL, 100# 20-40 Brady	811'-817'
		2900# 12/20 Brady, 1000# 8-12 Mesh	

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 10/23/08	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 Bbbs. <1 Gas Mcf Trace Water Bbbs. 20 Gas-Oil Ratio n/A Gravity 18

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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KWS, LLC

19245 Ford Road
Chanute, KS 66720
(620) 431-9212
Mobile (620) 431-8945
FED # 20-8746618

Quest Development
Harold Dvorachek
P.O. Box 413
Iola, KS 66749

Date	Invoice
9/2/2008	814

Date: 8-28-08
Well Name: Works Lease #6
Section:
Township:
Range:
County: Allen
API:
PO#

CEMENT TREATMENT REPORT

TYPE OF TREATMENT: Production Casing
HOLE SIZE: 5 5/8
TOTAL DEPT:
WIRE LINE READING BEFORE:
WIRE LINE READING AFTER:

- (x) Landed Plug on Bottom at 500 PSI
- (x) Shut in Pressure 500
- () Lost Circulation
- (x) Good Cement Returns
- () Topped off well with _____ Sacks
- (x) Set Float Shoe - Shut In

Service or Product	Quantity	Per Foot Pricing/Unit Pricing	Amount
Run 2 7/8	850	2.85	2,422.50

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Prod

Hooked onto 2 7/8 casing. Established circulation with 5 barrels of water, 4 GEL, 1 METSO, 0 COTTONSEED ahead, blended 124 sacks of OWC cement, dropped rubber plug, and pumped 5 barrels of water.

Subtotal	\$2,422.50
Sales Tax (5.3%)	\$0.00
Balance Due	\$2,422.50

INVOICE

No. 209

HAT Drilling
12371 Ks Hwy D
Abound (C) 66056

INVOICE DATE	8-28-08
CUSTOMER'S ORDER NO.	

SOLD TO:	Quest Development
	Works # 6 T.D. 854'

SHIP TO:	

SALESPERSON	SHIPPED VIA	TERMS	F.O.B.
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QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
	854'	@ \$8.50/ft		7259.00
	2	hrs water hauling @ \$90/hr		\$180.00
	6	mins cement @ \$11/Bag		66.00
		Total		\$7505.00
		PAID IN FULL		

adams 872

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