

*Ken
M
12/10/08*

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 # 9722
Name: G & J Oil Company, Inc.
Address 1: P. O. Box 188
Address 2: _____
City: Caney State: KS Zip: 67333 + _____
Contact Person: Gene Nunneley
Phone: (620) 252-9700
CONTRACTOR: License # 5989
Name: Finney Drilling Company
Wellsite Geologist: Sam Nunneley
Purchaser: CMT

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
 Oil _____ SWD _____ SIOW _____
 _____ ENHR _____ SIGW _____
 CM (Coal Bed Methane) _____ Temp. Abd. _____
 Dry _____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

*Per telecon
w/ oper.
on 12/15/08.
m*

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.: _____
08/18/08 08/20/08 08/20/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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: Gene Nunneley
Title: President Date: 12/04/2008
Subscribed and sworn to before me this 4th day of December

NOTARY PUBLIC
Notary Public: _____
Date Commission Expires: 5-21-10
STATE OF KANSAS

API No. 15 - 125317570000
Spot Description: _____
NE NE SW SE Sec. 13 Twp. 34 S. R. 14 East West
1290 Feet from North / South Line of Section
1485 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner.
 NE NW SE SW
County: MONTGOMERY
Lease Name: H. MELANDER Well #: 08-05
Field Name: HAVANA-WAYSIDE
Producing Formation: WAYSIDE
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 682 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 20.45 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 686
feet depth to: SURFACE w/ 87 _____ sk cnt.

AKZ-Dlg-2/9/09

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.: _____

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

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KANSAS CORPORATION COMMISSION

DEC 08 2008

CONSERVATION DIVISION

Operator Name: G & J Oil Company, Inc. Lease Name: H. MELANDER Well #: 08-05
 Sec. 13 Twp. 34 S. R. 14 East West County: MONTGOMERY

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.

Handwritten: 12/10/08

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:
 Gamma Ray Neutron Completion Log

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Wayside

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	# Sacks Used	Type and Percent Additives
Surface	12 1/4	7	16	20.45	1	9	Service Company
Production	5 7/8	2 7/8	6.5	686	50-50	87	Service Company

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
..... Perforate			9	
..... Protect Casing				
..... Plug Back TD				
..... 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
37	2" DML-RTG		624-642

TUBING RECORD: Size: 1" Set At: 685 Packer At: none Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. 9-23-08 Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>2</u>	Gas Mcf	Water Bbls. <u>25</u>	Gas-Oil Ratio <u>0:2</u>	Gravity <u>30</u>
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DISPOSITION OF GAS: <input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-16.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	PRODUCTION INTERVAL: RECEIVED KANSAS CORPORATION COMMISSION DEC 08 2008
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION
WICHITA, KS



CONSOLIDATED
Oil Well Services, LLC

9-16-08
CK#12770

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 224997

Invoice Date: 08/26/2008 Terms: 0/30,n/30

Page 1

G & J WELL SERVICES, INC.
P.O. BOX 188
CANEY KS 67333
(620)252-5824

H. MELANDER 8-5
18033
8/20/08

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	70.00	17.0000	1190.00
1107A	PHENOSEAL (M) 40# BAG)	80.00	1.1500	92.00
1110	GILSONITE (50#)	350.00	.6000	210.00
1118B	PREMIUM GEL / BENTONITE	100.00	.1700	17.00
4402	2 1/2" RUBBER PLUG	2.00	23.0000	46.00
Description		Hours	Unit Price	Total
418	CEMENT PUMP	1.00	925.00	925.00
418	EQUIPMENT MILEAGE (ONE WAY)	35.00	3.65	127.75
418	CASING FOOTAGE	686.00	.20	137.20
486	MIN. BULK DELIVERY	1.00	315.00	315.00

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FEB 09 2009

CONSERVATION DIVISION
WICHITA, KS

Parts:	1555.00	Freight:	.00	Tax:	82.42	AR	3142.37
Labor:	.00	Misc:	.00	Total:	3142.37		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7884

GILLETTE, WY
307/886-4914

McALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/639-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, U.S.

TICKET NUMBER 18033
LOCATION Belle
FOREMAN Coop

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-20-08	3081	H. McHarder #08-5				Mont
CUSTOMER G+J			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			418	Ryan H		
CITY			486	Dusty H		
STATE						
ZIP CODE						

JOB TYPE Lab HOLE SIZE 5 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT 2 7/8
 CASING DEPTH 686' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 0-
 DISPLACEMENT 4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Propped 2 3/8" ahead, EOB circulation, propped 20' in cement, should pump 1000
displaced 2 plays to bottom set shoe, shut in.
- Circulated cement to surface -

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	35	MILEAGE		1622.75
5402	686'	Fracture		132.00
5407	1	Bulk Touch		315.00
1186A	20cbm	DWC cement		1140.00
1102A	80 #	Plano Seal		92.00
110	350 #	Leclanche		210.00
118A	100 #	Seal		12.00
4402	2	2 3/8" Rubber Plug		46.00
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		SALES TAX		82.42
		ESTIMATED TOTAL		43142.37

Form 3737

AUTHORIZATION [Signature] # 224997
TITLE _____ DATE _____