

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5983

Name: Victor J. Leis

Address Box 223

City/State/Zip Yates Center, Ks 66783

Purchaser: Crude Marketing Inc.

Operator Contact Person: Victor J. Leis

Phone (913) 557-4430

Contractor: Name: Kelly-Down Drilling Co.

License: 5661

Wellsite Geologist: none

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGM
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

3-25-04 4-05-04 4-16-04
Spud Date Date Reached TD Completion Date

API NO. 15- 207-26828-0000

County Woodson

NW 1/4 NW 1/4 SE 1/4 NW 1/4 Sec. 4 Twp. 24 Rge. 16 ^X _E _W

1560 Feet from S (circle one) Line of Section

1485 Feet from E (circle one) Line of Section

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

Lease Name Tannahill Well # A-8

Field Name Vernon

Producing Formation Squirrel

Elevation: Ground n/a KB _____

Total Depth 1100 PBSD _____

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 Alt II RGR 3/10/08
(Data must be collected from the Reserve Pit)

Chloride content 0 ppm Fluid volume 300 bbls

Dewatering method used Pumped out

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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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 on 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 Victor J. Leis
Title Owner-Operator Date 5-23-05

Subscribed and sworn to before me this 23rd day of May, 2005.

Notary Public Judith A. Smith
Date Commission Expires Oct. 18, 2008

K.C.C. OFFICE USE ONLY
F ND Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
_____ KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other (Specify)

JUDITH A. SMITH
Notary Public - State of Kansas
My Appt. Expires 10-18-08

ORIGINAL

SIDE TWO

Operator Name Victor J. Leis

Lease Name Tannahill Well # A-8

Sec. Twp. Rge.
 East
 West

County Woodson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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:

Log		Formation (Top), Depth and Datums		Sample
Name		Top	Datum	
Soil	0- 04	Shale	1009-1022	
Shale	04- 206	Sand	1022-1028	
Lime	206- 253	Shale	1028-1049	
Shale	253- 288	Cap Rock	1049-1054	
Lime &	288- 610	Sand	1054-1060	
B shale	610-617	Shale	1060-1100	
Lime	617- 666	Total Depth	1100	
Bq Shale	666- 833			
Lime	833- 848			
Shale	848- 1001			
Lime	1001- 1009			

CASING RECORD New 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	10"	7"	23	40	Portland	12	none
Casing	5 7/8	2 7/8	6.5	1096	OWC	130	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
2	1050-1060		60 Sacks of sand	1050-1060

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SMD or Inj. Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 10 Bbls. Gas Mcf Water 1/2 Bbls. Gas-Oil Ratio 24 Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Production Interval
 Other (Specify)



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER **00 24331**

LOCATION CHANUTE

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
4-6-04	5353	TANNAHILL #A-8		4	24	16	WO	
CHARGE TO <u>MIDWAY OIL CO.</u>				OWNER				
MAILING ADDRESS <u>P.O. BOX 1000</u>				OPERATOR				
CITY & STATE <u>MIAMI, OKLAHOMA 74354</u>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1- WELL	PUMP CHARGE CEMENT PUMP		525.00
1118	5 SKS	PREMIUM GEL - BENTONITE (2 AHEAD)		59.00
4402	1	2 1/2 RUBBER PLUG		15.00
1123	3150 GAL	CITY WATER (75 BBL)		35.44
5407	39	BLENDING & HANDLING TON-MILES <u>MINIMUM (103 TRK)</u>		190.00
5407	39	STAND BY TIME MILEAGE <u>MINIMUM (206 TRK)</u>		190.00
5502	3 HR	WATER TRANSPORTS VACUUM TRUCKS		225.00
1124	150 SKS	CEMENT <u>50/50 P&Z MIX (153 SKS TOTAL)</u>		990.00
1126	35 SKS	OWC <u>(35 SKS TOTAL)</u>	SALES TAX	395.50
		<u>(50/50; 2% LEAD; OWC; TAIL)</u>		79.23
			ESTIMATED TOTAL	2704.17

Ravin 2790

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KANSAS CORPORATION COMMISSION

MAR 07 2008

CUSTOMER or AGENTS SIGNATURE _____

CONSERVATION DIVISION
WICHITA, KS

CUSTOMER or AGENT (PLEASE PRINT) _____

DATE _____

189610

