

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5602
Name: N&B Enterprises,
Address: PO Box 812
City/State/Zip: Chanute, Ks 66720
Purchaser: City of Iola
Operator Contact Person: J.R. Burris
Phone: (620) 365 3181
Contractor: Name: Michael Drilling LLC
License: 33783
Wellsite Geologist: none
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____
10/15/07 11/05/07 1/28/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

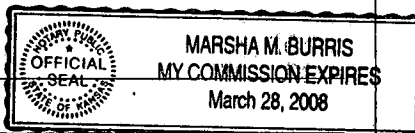
API No. 15 - 001-29643-0000
County: Allen
NW NE Sec. 13 Twp. 25 S. R. 18 East West
4620 feet from S N (circle one) Line of Section
1910 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Barnett Well #: 1
Field Name: Iola
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 925 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 894
feet depth to _____ w/ 139 sx cmt.
Alt 2-Dlg - 1/28/09

Drilling Fluid Management Ian
(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: J. R. Burris
Title: Partner Date: 14 Feb 08
Subscribed and sworn to before me this 14 day of Feb
2008
Notary Public: Marsha M. Burris
Date Commission Expires: 3/28/2008



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 19 2008
CONSERVATION DIVISION
WICHITA, KS

Operator Name: N&B Enterprises Lease Name: Barnett Well #: 1

Sec. 13 Twp. 25 S. R. 18 East West County: _____

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run: _____</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Datum</p> <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>soil & clay</td> <td>0</td> <td>10</td> </tr> <tr> <td>lime & shale</td> <td>10</td> <td>268</td> </tr> <tr> <td>shale</td> <td>268</td> <td>391</td> </tr> <tr> <td>shale & lime</td> <td>391</td> <td>649</td> </tr> <tr> <td>shale</td> <td>649</td> <td>892</td> </tr> <tr> <td>sand</td> <td>892</td> <td>925 TD</td> </tr> </table>	Name	Top	Datum	soil & clay	0	10	lime & shale	10	268	shale	268	391	shale & lime	391	649	shale	649	892	sand	892	925 TD
Name	Top	Datum																				
soil & clay	0	10																				
lime & shale	10	268																				
shale	268	391																				
shale & lime	391	649																				
shale	649	892																				
sand	892	925 TD																				

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	# Sacs Used	Type and Percent Additives
surface	12"	8 5/8"	24#	20'	Portland	5	
production	6 3/4"	4 1/2"	10#	897'	Portland	139	posmix

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			NONE	

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 <u>0</u>	Set At <u>0</u>	Packer At <u>0</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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)
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Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
		x 15	0	0	0

Disposition of Gas <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____
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8005
 2010
 2010

CONSOLIDATED OIL WELL SERVICES, **LLC**
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8876

TICKET NUMBER 15723
 LOCATION Ottawa KS
 FOREMAN Fred Madson

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10/16/07	5675	Barnett # 1	13	25	18	AL

CUSTOMER	TRUCK #	DRIVER	TRUCK #	DRIVER
N & B Enterprises Mailing Address P.O. Box 812 Chanute KS 66720	506	Fred		
	495	Casey		
	503	Rick		
	505/7106	Jason		

JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT
Logging	6 3/4"	894'	4 1/2"

CASING DEPTH	DRILL PIPE	TUBING	OTHER
894'			

SLURRY WEIGHT	SLURRY VOL	WATER gal/hr	CEMENT LEFT in CASING
			2'

DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE
14.25 BBL			6 BPM

REMARKS: Establish Circulation. Mix + Pump 150^{gal} Premium Coal
 Flush. Mix + Pump 8^{hrs} BBL Red hole dye. Follow with
 139 sks 50/50 per mix Cement 2^{hrs} Gal. Displace 4^{hrs}
 Casing clean at cement w/ 14.25 BBL Fresh Water.
 Shut in Casing.

Fred Madson

*Michael Drilling
 Company Tools*

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump	495	495 ⁰⁰
5406	50 mi	MILEAGE Pump Truck	495	165 ⁰⁰
5407A	5.838 Ton	Ten Mile age.	503	290 ⁰⁰
5501C	2 1/2 hrs	Transport	505/7106	250 ⁰⁰
1124	137 sks	50/50 per Mix Cement		1212 ⁰⁰
118B	384 ^{gal}	Premium Coal		57 ⁰⁰
		Sub Total		2815 ⁰⁰
		Tax @ 6.2%		50.01
		SALES TAX		
		ESTIMATED TOTAL		2865.01

AUTHORIZATION Edd

TITLE Watt 217546

DATE 1/19/08

RECEIVED
 KANSAS CORPORATION COMMISSION
 FEB 19 2008
 CONSERVATION DIVISION
 WICHITA, KS