

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 6509
 Name: Cla-Mar Oil Company
 Address: P.O. Box 1197
 City/State/Zip: Hays, Kansas 67601
 Purchaser: _____
 Operator Contact Person: Jim D. Clark
 Phone: (785) 625-3863
 Contractor: Name: Vonfeldt Drilling, Inc.
 License: 9431
 Wellsite Geologist: Randy Kilian
 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>2-21-2005</u> | <u>2-28-2005</u> | <u>2-28-2005</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 051-25395-0000
 County: Ellis
~~SD 10 + 50'S~~
S/2 - NE - SW Sec. 32 Twp. 11 S. R. 17 East West
1600 feet from S N (circle one) Line of Section
3450 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: York/Hadley Well #: 4
 Field Name: Bemis-Shutts
 Producing Formation: _____
 Elevation: Ground: 2112 Kelly Bushing: 2117
 Total Depth: 3690 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 219 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
 (Data must be collected from the Reserve Pit) *P & A KJR 3/5/08*
 Chloride content 56000 ppm Fluid volume 400 bbls
 Dewatering method used Allow to dry and backfill
 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: [Signature]
 Title: Owner Date: 3-16-05
 Subscribed and sworn to before me this 10th day of March
 20 05.
 Notary Public: [Signature]
 Date Commission Expires: 10/11/08

LINDA L. DEWEY
 Notary Public - State of Kansas
 My Appt. Expires 10/11/08

KCC Office Use ONLY

NO Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
MAR 18 2005
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Operator Name: Cla-Mar Oil Company Lease Name: York/Hadley Well #: 4
 Sec. 32 Twp. 11 S. R. 17 East West County: Ellis

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 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: Micro Log

| Name | Formation (Top), Depth and Datum | |
|--------|----------------------------------|-------|
| | Top | Datum |
| Anh | 1344 | +773 |
| Top | 3070 | -953 |
| Heb | 3298 | -1181 |
| Tor | 3318 | -1201 |
| Lans | 3345 | -1228 |
| BKC | 3576 | -1459 |
| Re Arb | 3627 | -1510 |
| Arb | 3639 | -1522 |
| TD | 3691 | -1574 |

| 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 | | 8 5/8" | | 219' | Common | 150 | |
| | | | | | | | |
| | | | | | | | |

| 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-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

DRILLERS WELL LOG

Date Commenced: February 21, 2005
Date Completed: February 28, 2005

Cla-Mar Oil Company
York/Hadley #4
150'W & 50'S S/2 NE SW
Section 32-11S-17W
Ellis County, Kansas

Elevation: 2112' G.L.
2117' K.B.

0 - 54' Top Soil, Sand & Shale
54 - 220' Lime and Shale
220 - 1524' Sand & Shale
1524 - 2297' Lime & Shale
2297 - 2514' Sand & Shale
2514 - 3690' Lime & Shale
3690' R.T.D.

FORMATION DATA

Anhydrite 1332'
Base Anhydrite 1400'

Surface Pipe: Set 23#, new, 8 5/8"
casing @ 219' with 150 sacks
Common, 3% Gel., 2% CC.

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AFFIDAVIT

STATE OF KANSAS)
) ss:
COUNTY OF RUSSELL)

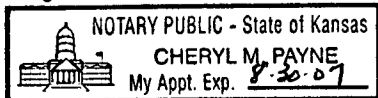
Alan Vonfeldt of lawful age, does swear and state that the facts and statements herein are true and correct to the best of his knowledge.

Alan Vonfeldt
Alan Vonfeldt

Subscribed and sworn to before me this 9th day of March, 2005.

My Commission Expires:
August 30, 2007

Cheryl M. Payne
Cheryl M. Payne, Notary Public



ALLIED CEMENTING CO., INC. 18588

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

ORIGINAL
SERVICE POINT
Russell

| | | | | | | | |
|--------------------------|------|------|----------------|----------------------------------|-------------------------------|------------------------|------------------------------|
| DATE <i>2-22-05</i> | SEC. | TWP. | RANGE | CALLED OUT <i>M. Driscoll</i> | ON LOCATION <i>2:40 AM</i> | JOB START | JOB FINISH <i>4:30 PM</i> |
| LEASE <i>York Hadley</i> | | | WELL# <i>4</i> | LOCATION <i>Tudon T-70 12N</i> | | COUNTY <i>Ellis</i> | STATE <i>Ks</i> |
| OLD OR NEW (Circle one) | | | | | | | |

CONTRACTOR *CLG-MOR Oil Co. Van FLOWNER*

TYPE OF JOB *SURFACE*

HOLE SIZE *12 1/2 220* T.D.

CASING SIZE *8 1/2* DEPTH *219*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. *15*

PERFS.

DISPLACEMENT *12.5 bbls*

EQUIPMENT

PUMP TRUCK CEMENTER *Bill*

366 HELPER *Glen*

BULK TRUCK

213 DRIVER *CPG-6*

BULK TRUCK

DRIVER

REMARKS:

Run 5 ft of 8 1/2 rate

Cement w/ 150 lb Cem 3-2

pump plug w/ 12 1/2 bbls of water

Cement did cure.

CHARGE TO: *CLG MOR Oil Co.*

STREET

CITY STATE ZIP

CEMENT

AMOUNT ORDERED *150 lb Cem 3-2*

COMMON @

POZMIX @

GEL @

CHLORIDE @

ASC @

@

@

@

@

@

@

@

@

@

HANDLING @

MILEAGE

TOTAL

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

MANIFOLD @

1-55 Wood @

@

TOTAL

PLUG & FLOAT EQUIPMENT

@

@

@

@

@

TOTAL

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE *Doug Budas*

Doug Budas
PRINTED NAME

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

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MAR 18 2005

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