

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33513
Name: FIVE STAR ENERGY, INC.
Address: 215 E. 14TH
City/State/Zip: HARPER, KS 67058
Purchaser: DUKE (GAS) PLAINS (OIL)
Operator Contact Person: HOWARD SHORT
Phone: (620) 896-2710
Contractor: Name: LEIKER WELL SERVICE, INC.
License: 30891

Wellsite Geologist: _____
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: ROBERTS & MURPHY
Well Name: KUHNS #2
Original Comp. Date: 4/25/91 Original Total Depth: 6218
____ 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. _____
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date
11/1/06

API No. 15 - 033-20-815 - 00-02
County: COMANCHE
NE NE SW NE Sec. 34 Twp. 34 S. R. 20 East West
2300 3080 S feet from S / (circle one) Line of Section
1670 1675 E feet from W (circle one) Line of Section
Footages Calculated from Per Oper - KCC - Dig Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: KUHNS Well #: 2
Field Name: BOX RANCH
Producing Formation: VIOLA
Elevation: Ground: 1708 Kelly Bushing: 1720
Total Depth: 6500 Plug Back Total Depth: 6150
Amount of Surface Pipe Set and Cemented at _____ 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 WO NH 9-16-08
(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: Howard Short
Title: Pres Date: 1-05-07
Subscribed and sworn to before me this 5th day of January, 2007.
Notary Public: Rochelle Hodges
Date Commission Expires: 10-30-07

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
JAN 09 2007

ROCHELLE HODGES
NOTARY PUBLIC
STATE OF KANSAS
My App. Exp: 10-30-07

CONSERVATION DIVISION
WICHITA, KS

Operator Name: FIVE STAR ENERGY, INC. Lease Name: KUHNS Well #: 2
 Sec. 34 Twp. 34 S. R. 20 East West County: COMANCHE

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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 <i>(Amount and Kind of Material Used)</i>	Depth
4X2 8 SHOTS	6114-6118 (LOG-TECH)	7 1/2% MCA 25 BIO BALLS	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
		2 3/8"	6100			
Date of First, Resumerd Production, SWD or Enhr. WAITING ON GAS PIPELINE			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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	20	100MCF	300			

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

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 09 2007
CONSERVATION DIVISION



Five Star Energy, Inc.

215 E 14th
HARPER, KS 67058

Phone: 620-896-2710
Fax: 620 896-2530
Email: ssenergy@sbcglobal.net

CONFIDENTIAL

~~1-9-2008~~

1-9-09

RE: KUHNS #2 RECOMPLETION
SEC. 34-34S-20W
COMANCHE, CO. KS.

Please hold information on this well confidential for a period of 12 months.

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 09 2007
CONSERVATION DIVISION
WICHITA, KS