

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5208
Name: ExxonMobil Oil Corporation
Address P.O. Box 4358
City/State/Zip Houston TX 77210-4358
Purchaser: spot market
Operator Contact Person: Jacqueline Davis
Phone (281) 654-1913
Contractor: Name: Key Energy Services
License: 165133
Wellsite Geologist: _____
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/Reentry: Old Well Info as follows:

Operator: Mobil Oil Corporation
Well Name: E. Wilson #1 Unit #2
Original Comp. Date 6/24/74 Original Total Depth 2975'
 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. _____
10/17/07 11/5/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date


API NO. 15- 189-20229001
County Stevens
_____ - _____ - C - NW Sec. 31 Twp. 33 S. R. 37 E W
1250 Feet from SW (circle one) Line of Section
1250 Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name E. Wilson 1 Well # 2
Field Name Hugoton/Panoma
Producing Formation Chase/CG
Elevation: Ground 3145' Kelley Bushing 3153'
Total Depth 2975' Plug Back Total Depth 2967'
Amount of Surface Pipe Set and Cemented at 616 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-dig-2/16/09
(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. _____ E W
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 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 Jacqueline Davis
Title Support Staff-Technical Assistant Date 12/3/07
Subscribed and sworn to before me this 3rd day of December

 PAMELA YVETTE MURPHY
Notary Public, State of Kansas
My Commission Expires May 05, 2010

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
DEC 04 2007
CONSERVATION DIVISION
WICHITA, KS

Operator Name ExxonMobil Oil Corporation

Lease Name E. Wilson 1

Well # 2

Sec. 31 Twp. 33 S.R. 37 East West

County Stevens

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No List All E.Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Name</td> <td style="width:25%;">Top</td> <td style="width:25%;">Datum</td> </tr> <tr> <td>Chase</td> <td>2562'</td> <td></td> </tr> <tr> <td>Council Grove</td> <td>2904'</td> <td></td> </tr> </table>	Name	Top	Datum	Chase	2562'		Council Grove	2904'	
Name	Top	Datum								
Chase	2562'									
Council Grove	2904'									

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	13 3/4"	10 3/4"	32.75	616'	Howco/reg	350	2% & 3% CaCl2
production	8 3/4"	7"	20	2974'	Howco/reg	375	18% salt

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 (Amount and Kind of Material Used)	Depth
2	2910' - 2966' 6/10/74		
3	2792' - 2802' 10/19/07 500 gals 15% HCL;	230022# sand, 1106 bbls gel	2792-2802
3	2744' - 2754'; 2684' - 2694'; 2630' - 2640';		
	2594' - 2604' 11/1/07	28.6 bbls 10% HCL, 90 bbls H2O	2594-2744

TUBING RECORD	Size 2 3/8"	Set At 2959'	Packer At -	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First Resumed Production, SWD or Enhr.		Producing Method		
test pending		<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 Open Hole Perforation Dually Comp. Commingled 2594' - 2966'

(If vented, submit ACO-18.) Other (Specify) _____