

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 # 32294
Name: Osborn Energy, L.L.C.
Address: 24850 Farley 21' S & 6' E of:
City/State/Zip: Bucyrus, Kansas 66013
Purchaser: Akawa Natural Gas, L.L.C.
Operator Contact Person: Steve Allee
Phone: (913) 533-9900
Contractor: Name: Susie Glaze dba Glaze Drilling Co.
License: 5885 (Formally R. S. Glaze Drilling Co.)
Wellsite Geologist: (s) None

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. _____

6/18/1997 6/20/1997 6/25/97
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 091-22767-00-00
County: Johnson (N 38* 45.113', W 94* 42.774')
NW NW NE Sec. 14 Twp. 15 S. R. 24 East West
4929 feet from S N (circle one) Line of Section
2304 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Tom Meyers Well #: 1
Field Name: Stilwell

Producing Formation: (s) Bartlesville Ss
Elevation: Ground: 1100 Kelly Bushing: -----
Total Depth: 1050 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 None Feet
If Alternate II completion, cement circulated from 1050
feet depth to surface w/ 194 ^{sq gmt.}
Alt 2 - Dlg - 3/4/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content N/A ppm Fluid volume 500+/- bbls
Dewatering method used evaporation
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]
For Osborn Energy, L.L.C.

Title: _____ Date: 2/10/05

Subscribed and sworn to before me this 10 day of FEBRUARY

20 05
Notary Public: Taylor C. Herman

Date Commission Expires: 1-10-09

TAYLOR C. HERMAN
Notary Public - State of Kansas
My Appt. Exp. 1-10-09

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

RECEIVED
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Operator Name: Osborn Energy, L.L.C. Lease Name: Tom Meyers Well #: 1
 Sec. 14 Twp. 15 S. R. 24 East West County: Johnson

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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: GR-N	Log Formation (Top), Depth and Datum Sample Name Top Datum ?able if cmt ticket(s), E-Log, DL, etc., sent w/ previous ACO-1 Have made copies of what we have in our files
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* Taken from previous ACO-1 Form(s) CASING RECORD <input checked="" 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"	* 7"	17.00	* 20'	* Portland	* 6	None
Production	* 6 1/4"	* 2 7/8"	NA	* 1050	50/50 Poz-mix	194	2% gel

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
6/25/97 2	1024-1034	Swb tstd wtr, not treated	1024-1034
6/25/97 3	970-976, 933-938, 878-884, & 852-862	Swb tstd wtr, not treated	852-976
6/25/97	Bridge set at 842		
6/25/97 4	812-822, 798-807, & 788-798	Swb tstd gas, no wtr, not treated	788-822

TUBING RECORD	Size Set At	Packer At	Liner Run
	1" set at 842'	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr.	Producing Method		
Gas in leedline 4/1998	Flowing <input type="checkbox"/>	<input checked="" type="checkbox"/> Pumping	Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>
Estimated Production Per 24 Hours	Oil Bbbls.	Gas Mcf	Water Bbbls.
	None	50 / day	0 to < 1 BBL/day
Disposition of Gas		METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>		Open Hole <input type="checkbox"/> <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Other (Specify) _____	788-822

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Tom Meyers #1
 Section 14-T15E-R24E
 Johnson Co., KS
 Spud: 6/18/97
 TD 1050' 6/20-97
 20' of 7" Surface cmt'd w/ 6 sx
 1050' of 2 7/8", cmt'd w/ 194 sx

Driller's Log from Glaze Drilling

T Meyers #1

20 Surface	20	105	Shale	430
12 Lime	32	9	Dand	439
5 Shale	37	74	Shale (sandy)	513
98 Lime	135	7	Lime	522
20 Shale	155	4	Shale	526
10 Lime	165	9	Lime	535
19 Shale	184	15	Shale	550
3 Red Bed	187	2	Blk Slate	552
12 Shale	199	2	Coal	554
6 Lime	205	10	Shale	556
4 Shale	209	8	Lime	572
2 Blk Slate	211	33	Shale	605
19 Shale	230	3	Lime	608
19 Lime	249	45	Shale	653
7 Shale	256	4	Lime	657
24 Lime	280	131	Shale	788
2 Shale	282	19	SAND	807 GAS
2 Blk Slate	284	4	Lime (sandy)	811
4 Shale	288	34	SAND	845 GAS
11 Lime	299	23	Shale	868
9 Dandy Lime	308	30	Sandy Shale	998
2 Shale	310	34	Miss. Lime	1032
4 Lime	314	11	Shale	1043
3 Shale	317	7	Lime	REQUIRED T.D.
8 Lime	325			

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CONSOLIDATED INDUSTRIAL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 OR 800-467-8676

TICKET NUMBER

3667

LOCATION

Ottawa

**FILE COPY
 SCANNED**

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME #	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
6-21-97	3137	Meyers #1		14	15	24	Jo	
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				
R.S. Glaze								
22139 Victory Rd								
Springhill KS 66083				Glaze Drilling				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401		PUMP CHARGE		450 ⁰⁰
5402	549'	Casing footage	.10	54 ⁹⁰
		HYDRAULIC HORSE POWER		
1118	6 sx	premium gel	10 ⁰⁰	60 ⁰⁰
4402	1	2 1/2 rubber plug	14 ⁰⁰	14 ⁰⁰
		tax	6.470	91 ⁶⁵
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
5502	2 1/2 hr	VACUUM TRUCKS	50 ⁰⁰	125 ⁰⁰
		FRAC SAND		
1124	194 sx	CEMENT 50/50 P02	7 ⁰⁰	1358 ⁰⁰
		NITROGEN		
5407	329.8	TON-MILES	.75	247 ³⁵
			ESTIMATED TOTAL	2400 ⁹⁰

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN

Alan Mader

CUSTOMER or AGENT (PLEASE PRINT)

DATE

6-21-97

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155918

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CONSOLIDATED INDUSTRIAL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 or 800-467-8676

TICKET NUMBER 4667
 LOCATION Ottawa
 FOREMAN A. Mader

TREATMENT REPORT

DATE <u>6-23-97</u>	CUSTOMER ACCT # <u>3137</u>	WELL NAME <u>Meyers #1</u>	QTR/QTR	SECTION <u>14</u>	TWP <u>15</u>	RGE <u>24</u>	COUNTY <u>Jo</u>	FORMATION
CHARGE TO <u>R.S. Glaze</u>				OWNER				
MAILING ADDRESS <u>22139 Victory Rd</u>				OPERATOR				
CITY <u>Springhill</u>				CONTRACTOR <u>Glaze Drilling</u>				
STATE <u>KS</u>		ZIP CODE <u>66083</u>		DISTANCE TO LOCATION <u>40 miles</u>				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA	
HOLE SIZE	<u>6 7/8</u>
TOTAL DEPTH	<u>1050</u>
CASING SIZE	<u>2 1/2</u>
CASING DEPTH	<u>1049</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

	PRESSURE LIMITATIONS	
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Establish circulation out of pit. Mix 2 sx premium gel, circulate through well from pit. Pump app 10 bbls clean water. Mixed and pumped 194 sx 50/50 poz mix, 2% gel. Circulated cement to surface. Pumped rubber plug to bottom with 6 bbls clean water.

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
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HYD HHP = RATE x PRESSURE x 40.8	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____