

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 33396
Name: Fair Oil, Ltd
Address: PO Box 689
City/State/Zip: Tyler, TX 75710
Purchaser: _____
Operator Contact Person: Rodney K. Thomson
Phone: (903) 510-6527
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Richard Saenz

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. _____

06-21-05 07-02-05 R & A
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 101-21882-00-00
County: Lane County, Kansas
SE SE NW NE Sec. 4 Twp. 16 S. R. 29 East West

4100 feet from S / N (circle one) Line of Section
1400 feet from EX/ W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: KS5A Dowell et. al Well #: 4-1
Field Name: Wildcat

Producing Formation: _____
Elevation: Ground: 2616' Kelly Bushing: 2625'

Total Depth: 4407' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 334 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 ALT II WITH
(Data must be collected from the Reserve Pit) 1-22-08
Chloride content 21,000 ppm Fluid volume 640 bbls
Dewatering method used EUAPORATION

Location of fluid disposal if hauled offsite: NA
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.

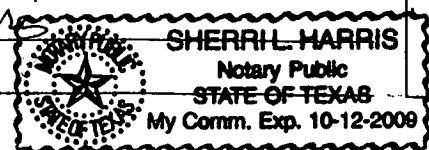
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Rodney K. Thomson
Title: Production Manager Date: 2-17-06

Subscribed and sworn to before me this 16th day of JUNE

Notary Public: Sherril L. Harris

Date Commission Expires: _____
My Comm. Exp. 10-12-2009



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
JUN 21 2006
KCC WICHITA

Operator Name: Fair Oil, Ltd. Lease Name: K55A Dowell et al Well #: 4-1
 Sec. 4 Twp. 16 S. R. 29 East West County: Labane

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Sonic Compensated Density/Neutron	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:40%;">Name</th> <th style="width:20%;">Top</th> <th style="width:40%;">Datum</th> </tr> <tr> <td>Anhydrite</td> <td>2015</td> <td>+610</td> </tr> <tr> <td>Base "</td> <td>2044</td> <td>+5811</td> </tr> <tr> <td>Heebner</td> <td>3692</td> <td>-1067</td> </tr> <tr> <td>Lansing</td> <td>3729</td> <td>-1104</td> </tr> <tr> <td>Stank</td> <td>3985</td> <td>-1360</td> </tr> <tr> <td>Pleasanton</td> <td>4070</td> <td>-1445</td> </tr> <tr> <td>Marmaton</td> <td>4094</td> <td>-1469</td> </tr> <tr> <td>Cherokee</td> <td>4272</td> <td>-1647</td> </tr> </table>	Name	Top	Datum	Anhydrite	2015	+610	Base "	2044	+5811	Heebner	3692	-1067	Lansing	3729	-1104	Stank	3985	-1360	Pleasanton	4070	-1445	Marmaton	4094	-1469	Cherokee	4272	-1647
Name	Top	Datum																										
Anhydrite	2015	+610																										
Base "	2044	+5811																										
Heebner	3692	-1067																										
Lansing	3729	-1104																										
Stank	3985	-1360																										
Pleasanton	4070	-1445																										
Marmaton	4094	-1469																										
Cherokee	4272	-1647																										

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	12 1/4	8 5/8	24	334	Common	200	3% cc, 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 <i>(Amount and Kind of Material Used)</i>	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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval
---	---	---------------------

RECEIVED
 JUN 21 2006
 KCC WICHITA