

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 # 33982
Name: Alton Oil LLC.
Address: P.O. Box 117
City/State/Zip: Winfield, Kansas 67156
Purchaser: _____
Operator Contact Person: Michael A. Pressnall
Phone: (620) 221-4268
Contractor: Name: Gulick Drilling Co., Inc.
License: 32854
Wellsite Geologist: Thomas E. Blair

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. _____

11-19-07	11-26-07	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23751-00-00
County: Butler
NW SE SW Sec. 28 Twp. 29 S. R. 5 East West
990 feet from (S) N (circle one) Line of Section
1650 feet from (W) E (circle one) Line of Section

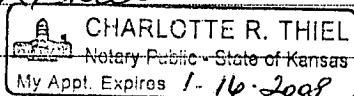
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: B-Gibson Well #: 1
Field Name: Combs NE

Producing Formation: _____
Elevation: Ground: 1276³ Kelly Bushing: 1284³
Total Depth: 2835³ Plug Back Total Depth: 255³
Amount of Surface Pipe Set and Cemented at 205 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) *ACT I WITH 1-25-08*
Chloride content 1000 ppm Fluid volume 75 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: Michael A. Pressnall
Title: OWNER Date: 12-4-07
Subscribed and sworn to before me this 4th day of January,
2008.
Notary Public: Charlotte R. Thiel
Date Commission Expires: 1-16-2008


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 10 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Alton Oil LLC. Lease Name: B-Gibson Well #: 1
 Sec. 28 Twp. 29 S. R. 5 East West County: Butler

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:

None

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Kansas City	2160	-876
Base Kansas City	2405	-1121
Marmaton	2486	-1202
Mississippi Chat	2804	-1520
Mississippi Dolo	2812	-1528
Total Depth	2835	-1551

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	12-1/4	8-5/8	24	205	Class "A"	125	Calcium Chloride 3%

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
----- Perforate				
----- Protect Casing				
----- Plug Back TD				
----- Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

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 _____

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 CONSERVATION DIVISION
 WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, LLC
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 12907
 LOCATION FLD 2000 #30
 FOREMAN Jim Thomas

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-19-07	1188	B-Gibson #1	28	29	SE	Butler
CUSTOMER Alton Oil LLC			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 117			467	Jeff		
CITY Windfield			442	Shane		
STATE Ks		ZIP CODE 67156				

JOB TYPE Surface HOLE SIZE 12 1/4" HOLE DEPTH 217 ft. CASING SIZE & WEIGHT 3 1/2" 29.0"
 CASING DEPTH 218 ft. DRILL PIPE _____ TUBING _____ OTHER None
 SLURRY WEIGHT 15.055 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 20 ft.
 DISPLACEMENT 12.75 BK DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Softly Meeting Rig up to 8 3/4" Drake circulation Pumped 125 sacks Class A 2% cc of disp. cement to 200 ft. Shut in. Cement circulated in the cellar. Wash up & Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	650.00	650.00
5406	26	MILEAGE	3.30	85.80
11045	125 sks	Class A	12.20	1525.00
1102	375 lbs	3% calcium Chloride	1.67	626.25
5407	1	min Bulk Truck chrg.	285.00	285.00
Subtotal				2891.20
			SALES TAX	12.00
			ESTIMATED TOTAL	2903.20

218085

AUTHORIZATION _____ TITLE _____ DATE _____

2891.20